

Minor Attains Majority: Request Form to Update Details

				-		-					
1. Folio No/s:											
2. Minor's Name in the	folio:										
3. Guardian's Name in t											
Having completed age of 18 y independently, with details a # Hereunder, please mention	s mentioned	below.	-	-	DSP Mutual Fund to tr	ansfer t	he Units in the	name of the	e Major Un	it holder	
4. Date of Birth: d	d /	m m /	у у у у	5. P.	AN/PEKRN					□ KYC (mandatory)	
6. Tax Status	ident Indivi	idual 🗆 NRI	(Non-Repatriable	2)							
7. Additional KYC Details											
a. Occupation Details (Please tick ✓) □ Private Sector Service □ Public Sector Service □ Government Service □ Business □ Professional □ Agriculturist □ Retired □ Housewife □ Student □ Forex Dealer □ Others (Please specify)											
b. Gross Annual Income □ Below 1 Lac □ 1-5 Lacs □ 5-10 Lacs □ 10-25 Lacs □ >25 Lacs-1 crore □ >1 crore											
c. Others (Please tick 🗸) 🗆 Politi	cally Exposed Pe	erson (PEP) 🗖 Rela	ted to a Po	litically Exposed Perso	n (PEP)	□ Not Applicab	le			
8. Contact Details, Online Access @ Mobile Number: +91											
@ Email id: (in capital)						_					
9. New Address Address as per KYC											
Address line 1											
Address line 2											
City			Pincode				State				
10. New Bank Details (Mention new bank details and enclose mandatory documents as mentioned below)											
Original cheque with	name & ac	count numb	er pre-printed. C	Driginal s	hould be produced	l for ve	erification if	photocopy	/ is subm	itted.	
Bank Name	Bank Name										
Branch & City											
Full Bank A/c No											
A/c Type (Please ☑) □ Savings □ Current □ NRE □ NRO □ FCNR □ Others											
IFSC Code (11 digit)					MICR Code (09 di	git)					
11. FATCA and CRS Deta	ils of the A	ccount Holde	er (Mandatory)								
Place & Country of Birth				LACE	COUNTRY						
# Please indicate all Countries	other than I	ndia, in which y	you are a resident fo	or tax purp	rpose, associated Taxpayer Identification Number and it's Identification type eg. TIN etc.						
Country #			Tax Identification Number				Identification Type				
1											
2											
3											
12. Nomination Details		□ I wish to	nominate.		0 NOT wish to nom	inate.	(Advisat	ole to avail	Nominat	ion Facility)	
Nominee Name											
Nominee Date of Birth	d d	/ m m	/ У У	у у							
Guardian Name (if minor)										
Nominee Address											
							Nominee Sig	gnature:			
13. Guardian Signature					13. Signature of Unit holder (erstwhile Minor, now Major)						
					3		(,	- /	
Guardian's Signature					Name					& Signature	
	Name:										

×	×	×
Acknowledgement (To be filled in by the investor)	Minor Attains Majority	DSP Mutual Fund
Received, subject to verification, request for change of stat from: Fo		
Mandatory documents: 🗆 KYC Letter 🗆 Proof of new Bank ac		
email: service@dspim.com www.dspim.com Call: 180	0-208-4499 / 1800-200-4499	ISC Stamp & Signature