

Request for change in status from Minor to Major

To be filled in capital letters and in blue / black ink only.

Mr./Ms.	
Date of Birth	PAN
Tax Status: <input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI <input type="checkbox"/> PIO <input type="checkbox"/> Others (please specify)	
<input type="checkbox"/> KYC Acknowledgment attached <input type="checkbox"/> KYC form attached <input type="checkbox"/> C-KYC Identification No. Please tick✓ whichever is applicable	
Name of the Guardian Mr./Ms.	
Relationship with the applicant: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed Guardian	

I, the above applicant, hereby request you to change my status from Minor to Major in the following Folios and delete the Guardian's name therein as I have since become a major, and update the details provided herein in your records.

Folio No(s).		
1)	2)	3)
4)	5)	6)
7)	8)	9)

Contact details of the Applicant

Mobile No.+91	Tel. No. STD -
Mobile Number specified above belongs to self or family, due to investor being (please tick any one option below)	
<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian (for minor investment) <input type="checkbox"/> PMS <input type="checkbox"/> Custodian <input type="checkbox"/> POA	
Email Address:	
Email address specified above belongs to self or family, due to investor being (please tick any one option below)	
<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian (for minor investment) <input type="checkbox"/> PMS <input type="checkbox"/> Custodian <input type="checkbox"/> POA	

Address of the Applicant

Address Line 1		
Address Line 2		
City:	State	PIN

(Please note that address will be updated as per applicant's address on KYC form / KYC Registration Agency records)

Bank Account Details of the Applicant

Bank Name	
Account No.	11-digit IFSC
A/c. Type <input type="checkbox"/> SB <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR	9-digit MICR No.
Name of bank branch	
City	PIN
Please attach & tick✓ <input type="checkbox"/> Cancelled cheque with applicant's name printed OR <input type="checkbox"/> Applicant's Bank Statement/Passbook	

Occupation <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Home Maker <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others (Please specify)	
The applicant is <input type="checkbox"/> a Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/> Neither (Not applicable)	
Gross Annual Income (₹) <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 Lacs-1crore <input type="checkbox"/> >1 crore	

<p>Country of Birth _____ Place of Birth _____</p> <p>Nationality _____</p>		
<p>Are you a tax resident of any country other than India? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, please mention all the countries in which you are resident for tax purposes and the associated Taxpayer Identification Number and its identification type in the column below</p>		
Country	Tax-Payer Identification Number	Identification Type

<input type="checkbox"/> I wish to make a nomination and hereby nominate the person/s more particularly described in the Nomination Form attached herewith, to receive the Units held my folio in the event of my death. <i>{Recommended}</i>
<input type="checkbox"/> I DO NOT wish to make a nomination <i>(Please tick ✓ if you do not wish to nominate anyone)</i>

Signature of Applicant _____

<p>Name of the Guardian / Stamp of the Notary/JMFC</p>	<p>The above signature of the applicant duly attested by me</p>
	<p>Signature</p>

☐ Copy of PAN Card of applicant
☐ KYC Acknowledgment OR ☐ KYC form of applicant
☐ Cancelled cheque with applicant's name pre-printed OR ☐ Applicant's Bank Statement/Passbook
☐ Annexure-I – Bankers Attestation of Signature of the applicant
☐ Nomination Form