ASHLAR COMMODITIES PVT LTD Regd. Office: A-38, Sector-67, Noida-201301Ph.: 0120-2472200,6633200, FAX-0120-2472222, Website: www.ashlarindia.com Sub.: Application for Change in Client Master (To be Filled in CAPITAL letters only) Dear Sir, Please make necessary change/add in my / our client account as per details given below, (please tick appropriate option to make necessary changes) **Trading Account** DATE Name of Account Holder CHANGE OF PERMANANT/LOCAL ADDRESS (Proof Required) **OLD ADDRESS NEW ADDRESS** Address Line 1 Address Line 2 Address Line 3 City/Town/Village State Pin Code Pin Code **CHANGE OF CORRESPONDENCE ADDRESS (Proof Required) OLD ADDRESS NEW ADDRESS** Address Line 1 Address Line 2 Address Line 3 City/Town/Village State Pin Code Pin Code CHANGE OF MOBILE /PHONE/FAX NO. & EMAIL ID (Proof Not Required) Mobile no **Email ID** 1st Holder Tel. No Fax No. **SMS** Mobile no **Email ID** 2nd Holder Tel. No Fax No. SMS Mobile no **Email ID** 3rd Holder Tel. No Fax No. SMS CHANGE OF BANK DETAILS (Proof required) **Bank Name** Bank A/c NO. **Branch Address** Pin Code Bank Ac. type Other(PI Specify) Saving Current MICR **IFSC**

Signature