

SIGNATURE UPDATION FORM

• Website: www.icicipruamc.com • Email: enquiry@icicipruamc.com
• Toll free numbers: 1800 222 999 (BSNL/MTNL), 1800 200 6666 (Other Service Providers)



Date: _____

To
The Trustee,
ICICI Prudential Asset Management Company Ltd.

Dear Sir/ Madam,

I _____, the undersigned in the capacity of the sole/first unitholder/joint holder, hereby submit the request to update my new signature in the below folio no(s).

Folio Number(s): _____

1ST /SOLE UNITHOLDER PAN _____

Reason for new signature updation : _____

2ND UNITHOLDER PAN _____

Reason for new signature updation : _____

3RD UNITHOLDER PAN _____

Reason for new signature updation : _____

BANK ATTESTATION OF ACCOUNT DETAILS & ACCOUNT HOLDER'S SIGNATURE

(Bank attestation will be in original and will include name of signatory, employee code, Designation (Branch manager & above, Bank full seal and Signature)

This is to certify that Mr./Ms. _____ is a customer of our bank namely, _____ Bank Name, _____ Branch Name branch having the following Bank Account

Account No.: _____

Account Type: Savings Current NRO NRE NRNR Others (please, specify _____)

MICR code (9-digit) : _____ IFSC code (11-digit) : _____

His/her address, as per our Bank records, is as follows:

City PIN State

Signature Verification by Bankers

Signature of the above customer in the box alongside, verified & validated with his/her specimen signature as per Bank's Records	Signature of the Client	Name of the attesting bank official*	
		Designation*	To be attested by Bank Manager only
		Employee Code*	
		Telephone No.*	

*Mandatory

Signature of the bank official with Bank's Seal

INVESTOR(S) DECLARATION & SIGNATURE (S)

I/we hereby declare and confirm that the information provided in this form is true and correct and is duly supported by the document proof enclosed alongwith the form. In case of non submission of any of the documents or if the documents are not found to be in order, the AMC is reserves to right to not register the application submitted. The AMC/Mutual Fund shall not be liable and/or responsible for any loss or damage that I/we may incur if the Form is rejected.

SIGNATURE OF SOLE / FIRST UNITHOLDER	SIGNATURE OF SECOND UNITHOLDER	SIGNATURE OF THIRD UNITHOLDER
_____	_____	_____

ACKNOWLEDGEMENT - SIGNATURE UPDATION

Sole/1st Applicant _____ Folio No. _____