

MODIFICATION FORM

Date:/...../.....

Dear Sir/Madam,

I/We would request you to make the following additions/modifications to my/our BO Account in your records.

Account Holder's Details

Name of First Account Holder		Code	
Name of Second Account Holder		BO ID	12065400
Name of Third Account Holder			

1. Bank Details	New Details			Supporting Documents
Modification <input type="checkbox"/>	Bank Name			<input type="checkbox"/> Copy of Cheque Leaf or
Addition <input type="checkbox"/>	Branch Name			<input type="checkbox"/> Bank Statement or
	Bank Account No.			<input type="checkbox"/> Bank Certificate
	Rounting No.			

2. Address Details	New Details			Supporting Documents
Modification <input type="checkbox"/>	Address Line 1			<input type="checkbox"/> Copy of Utility Bill or
Addition <input type="checkbox"/>	Address Line 2			<input type="checkbox"/> Copy of Form VI or
Permanent <input type="checkbox"/>	City	Post Code\		<input type="checkbox"/> Copy of Trade License or
Present <input type="checkbox"/>	Country	State/Division		<input type="checkbox"/> Others:
Business <input type="checkbox"/>				

3. Mobile & Email Details	New Details			Supporting Documents
Modification <input type="checkbox"/>	Mobile			<input type="checkbox"/> [subject to physical verification]
Addition <input type="checkbox"/>	Email			

I/We hereby consent to receive information from REL through SMS/Email on the above registered mobile number/E-mail address.

4. NID/TIN Details	New Details			Supporting Documents
Modification <input type="checkbox"/>	NID			<input type="checkbox"/> Copy of NID
Addition <input type="checkbox"/>	TIN			<input type="checkbox"/> Copy of TIN

5. SIGNATURE	Previous		New
Modification <input type="checkbox"/>	First Accounts Hoder's Signature & Date		First Accounts Hoder's Signature & Date
Addition <input type="checkbox"/>	Second Accounts Hoder's Signature & Date		Second Accounts Hoder's Signature & Date

Declaration: I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief. In case any of the above mentioned information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.

Signature	First Accounts Hoder	Second Accounts Hoder	Third Accounts Hoder

For Official Use Only
Checked & Verified by
Modification (CDBL)
Modification (CAPITA)
Name & Signature:
Date:
Name & Signature:
Date:
Name & Signature:
Date: