



**ધી કાલુપુર કોમર્શિયલ કો-ઓપરેટીવ બેંક લિ.**  
સ્થાપના : ૧૯૭૦ મલ્ટી સ્ટેટ શિક્યુલ બેંક

**Form for updation of E-mail ID, SMS alert, Mobile No. & Income Range for Demat Account (NSDL)**

DP ID IN301321 Client ID \_\_\_\_\_

I / We the account holder(s) of the above demat account, would like to update the below mentioned E-mail ID, Mobile No.(s) and Income range in above mentioned Demat Account.

1 <sup>st</sup> Holder Mobile No.										
2 <sup>nd</sup> Holder Mobile No.										
3 <sup>rd</sup> Holder Mobile No.										

1 <sup>st</sup> Holder Email ID	
2 <sup>nd</sup> Holder Email ID	
3 <sup>rd</sup> Holder Email ID	

<b>1<sup>st</sup> Holder Income Range-Individual</b>	<input type="checkbox"/> Below Rs. 1 Lacs <input type="checkbox"/> Rs. 1 Lacs to Rs. 5 Lacs <input type="checkbox"/> Rs. 5 Lacs to Rs. 10 Lacs	<input type="checkbox"/> Rs. 10 Lacs to Rs. 25 Lacs <input type="checkbox"/> More than Rs. 25 Lacs
<b>2<sup>nd</sup> Holder Income Range-Individual</b>	<input type="checkbox"/> Below Rs. 1 Lacs <input type="checkbox"/> Rs. 1 Lacs to Rs. 5 Lacs <input type="checkbox"/> Rs. 5 Lacs to Rs. 10 Lacs	<input type="checkbox"/> Rs. 10 Lacs to Rs. 25 Lacs <input type="checkbox"/> More than Rs. 25 Lacs
<b>3<sup>rd</sup> Holder Income Range-Individual</b>	<input type="checkbox"/> Below Rs. 1 Lacs <input type="checkbox"/> Rs. 1 Lacs to Rs. 5 Lacs <input type="checkbox"/> Rs. 5 Lacs to Rs. 10 Lacs	<input type="checkbox"/> Rs. 10 Lacs to Rs. 25 Lacs <input type="checkbox"/> More than Rs. 25 Lacs
<b>Income Range - Non Individual</b>	<input type="checkbox"/> Below Rs.20 Lacs <input type="checkbox"/> Rs.20 Lacs to Rs. 50 Lacs	<input type="checkbox"/> Rs. 50 Lacs to Rs. 1 Crore <input type="checkbox"/> More than Rs. 1 Crore

I / We hereby declare as detailed below for Mobile Number and E-mail ID belongs to :

Holder	Mobile		E-mail	
1 <sup>st</sup> Holder	<input type="checkbox"/> Self	<input type="checkbox"/> Spouse	<input type="checkbox"/> Self	<input type="checkbox"/> Spouse
	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> Dependent Children	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> Dependent Children
2 <sup>nd</sup> Holder	<input type="checkbox"/> Self	<input type="checkbox"/> Spouse	<input type="checkbox"/> Self	<input type="checkbox"/> Spouse
	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> Dependent Children	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> Dependent Children
3 <sup>rd</sup> Holder	<input type="checkbox"/> Self	<input type="checkbox"/> Spouse	<input type="checkbox"/> Self	<input type="checkbox"/> Spouse
	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> Dependent Children	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> Dependent Children

I / We agree to immediately inform The Kalupur Com. Co.Op. Bank Ltd. about any change in E-mail address and Mobile No. if any.

	NAME	SIGNATURE
Self / 1 <sup>st</sup> Holder		
2 <sup>nd</sup> Holder		
3 <sup>rd</sup> Holder		

PLACE :

DATE :