kotak
Kotak Mahindra Bank

Annexure

Request for addition/deletion of beneficiary account details for execution of off-market transfer

Date: D D M M Y Y Y Y

To

Participant's Name: KOTAK MAHINDRA BANK LIMITED

Participant's Address: KOTAK INFINITY 5TH FLOOR ZONE I BLDG NO. 21 INFINITY PARK GENERAL AK VAIDYA MARG MALAD E MUMBAI 400097

DP ID: IN Client ID:

Sole/First Holder Name:

Second Holder Name:

Third Holder Name:

I/We hereby inform you that I/we wish to add/delete the beneficiary accounts details below for execution of off-market transfers including inter-depository transfers.

☐ Add ☐ Delete	Beneficiary DP ID:	
	Beneficiary Client ID:	
	PAN of the First Holder:	
☐ Add ☐ Delete	Beneficiary DP ID:	
	Beneficiary Client ID:	
	PAN of the First Holder:	
☐ Add ☐ Delete	Beneficiary DP ID:	
	Beneficiary Client ID:	
	PAN of the First Holder:	

1. _____ 2. _____ 3. _____

Authorised Signatory(ies)

KMBL/Mar-24/V 1.0

Participant Authorisation

Demat Account No : _____

Employee Name : _____

Signature : _____