

. Folio Nos.:								\perp				
2. Reason for Change: (Refer instructions fo	or mandatory documents to k	e submitted)										
Change in First Name	Change in Middle	Name / Surn	ame [Chan	ge in	Nam	e due	to M	larriag	је		
Change in Name due to Divorce	Change in Name	of Minor	_	_								
B. Old Names and New Names:												
a. Sole/First Unit Holder:												
Old Name:												
New Name:												
b. Second Unit Holder:												
Old Name:												
New Name:												
c. Third Unit Holder												
Old Name:												
New Name:												
. Change of Tax Status : (Refer Instruc												
Resident Indian (Individual) to NRI –		□ NRI – Non-	-Ronatri	ahla ta	Rosio	lent l	ndian	(Indi	vidua	Iλ		
NRI – Repatriable to Resident Indian	·	NRI – Repa	-					-	viuua	')		
			alliable	io ivini ·	- 1101	ı <u>-</u> net	Jalilab	ıc				
. New Bank Details: (Refer instructions for	mandatory documents to be	submitted)	1 1	1 1		ī	1	ī	1 1	ı	1	
ank Account No.:		NDE 🗆	NIT			241						
ank Account Type: (Please tick) Saving	gs Current	NRE 📗	NF	1	, '	Othe 	ſ <u></u>					_
lame of Bank:				<u></u>							\perp	
Branch Name: Land Land Land				<u> </u>		 						_
ity:		it number next to t	the observe		\		Pin: ∟					_
/IICR Code (9-Digit):		it number next to t	ine cneque	e number	.)							
=S Code (11-Digit):												
. Declaration and Signatures:												
We request SBI Mutual Fund to update		_										
etails mentioned below. I/We hereby agr		_						-			-	
pdated in the system and a confirmation signatures will not be honoured by the Fu		Alter the new i	name / s	signatu	re upo	Jalio	i, ariy	requ	iesi w	IIII O	IU II	ame
signatures will not be nonoured by the re	, ind.				Г						—	
(First Unit Holder / Quardian)	(Cocond I	Jnit Holder)			_		/Thir	ط ا اد	sit ∐al	dor)		
(First Unit Holder / Guardian)	(Second (Jilit Holder)					(11111	u On	nit Hol	uer)		
. Signature Verification from Banker:												
Signature of the Branch Manager / Auth				•								
ame:				-								
mployee Code:					.:							
	TEA	R HERE			– –	— — State P	— — - ank of Inc	– – Jia				
SBI MUTUAL FUND A PARTNER FOR LIFE Cha	ange Of Name Request Fo	orm - Acknowle	edgemen	ıt İnv	estmer/	ıt mana	i ger: SBI etween S	l Funds			Ltd.	
Change Of Name Request Form receive	d from											
(subject to verification of documents)	u 110111				, i OII0		ature, Da					
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