

From	To The Manager Depository Services Division 3rd Floor Operations Department Parakkal Towers Thottakkattukara UC College P O Aluva Ernakulam Kerala India 683102
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CHANGE OF POA IN DEPOSITORY ACCOUNTS (INDIVIDUALS)

Dear Sir/Madam,

Ref: My Depository Account Client Id:

I/We hereby request you to **cancel/unlink** my/our existing POA with trading partner in your records and **link** my/our POA with trading partner

My/our present signature is/are as follows:

.....
(First Holder)

.....
(Second Holder)

.....
(Third Holder)

BRANCH CERTIFICATION

Certified that the client(s) has signed in my presence and the identity of the client(s) is confirmed in-person.

Name of the Branch Official:	Signature:
Branch: Date:	Sign. Power No: Office Seal

Encl: Copy of Identification document duly attested with remarks 'Verified with original'