



The Cosmos Co-operative Bank Ltd.

(Multistate Scheduled Bank)
Depository Service Cell

Head Office : Cosmos Heights, 269/270 Shaniwar Peth, Pune 30.
Ph.: 24456591, 24409253

To,
The Manager,

Date :

_____ Br./ Depository Service Cell

Subject : Change of Address

Sir / Madam,

I / We have a demat account with your bank. My demat account No. is

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I / We want to change my address in your record, as follows.

Old Address

New Address

Pin Code

--	--	--	--	--	--	--

Pin Code

--	--	--	--	--	--	--

Telephone No. _____

Telephone No. _____

I / We are submitting herewith the following document as a proof of address change.

(You can tick out any one) **(Photo ID Proof & Address Proof of All A/ c Holders is required)**

- | | | | |
|--------------------------------------|--|--|---|
| <input type="checkbox"/> Ration Card | <input type="checkbox"/> *Telephone Bill | <input type="checkbox"/> *Electricity Bill | <input type="checkbox"/> Bank Pass Book |
| <input type="checkbox"/> Passport | <input type="checkbox"/> Driving License | <input type="checkbox"/> Election Card | <input type="checkbox"/> PAN CARD |

* Latest Telephone Bill & Electricity Bill (bill should not be more than two months old from bill date.)

Name

Signature

1) _____

2) _____

3) _____

(Signatures of all holders required)

For Office use only

Proof of new address & Id proof is verified from original _____ (Sign)

Address is changed in DPM system _____ (Sign)

Letter is dispatched to new address Dt. _____ Sign. _____

For Office use only

The Cosmos Co-operative Bank Ltd.

Name of the Demat Center _____

The identity of the applicant (s) verified in person
as per NSDL Cir. No. NSDL / POLICY/ 2007 / 0016 dt. 16./03/ 07

Signature of Verifying Officer _____

Name of Verifying Officer _____

Employee Code of Verifying officer (Ticket No.) _____

Date _____ Place _____

Signature of applicants (s)

1) _____ 2) _____ 3) _____

(All Joint Holders should sign in presence of DP Staff)