

Contact Details Updation Form

- Website: www.icicipruamc.com • Email: enquiry@icicipruamc.com
- Toll free numbers: 1800 222 999 (BSNL/MTNL), 1800 200 6666 (Other Service Providers)



FIRST HOLDER DETAILS

Folio No. _____ First/Sole Holder PAN _____

First Holder Name: _____

Mobile No.: _____ Specified Mobile Number belongs to: [Please tick (✓)* one]

- Self Spouse Guardian (for Minor investment) Dependent Children Dependent Parents
 Dependent Siblings PMS Custodian POA

E-mail Address: _____ Specified E-mail Address belongs to: [Please tick (✓)* one]

- Self Spouse Guardian (for Minor investment) Dependent Children Dependent Parents
 Dependent Siblings PMS Custodian POA

FIRST JOINT HOLDER DETAILS

Joint Holder 1 PAN _____

Joint Holder 1 Name: _____

Mobile No. : _____ Specified Mobile Number belongs to: [Please tick (✓)* one]

- Self Spouse Guardian (for Minor investment) Dependent Children Dependent Parents
 Dependent Siblings PMS Custodian POA

E-mail Address: _____ Specified E-mail Address belongs to: [Please tick (✓)* one]

- Self Spouse Guardian (for Minor investment) Dependent Children Dependent Parents
 Dependent Siblings PMS Custodian POA

SECOND JOINT HOLDER DETAILS

Joint Holder 2 PAN _____

Joint Holder 2 Name: _____

Mobile No.: _____ Specified Mobile Number belongs to: [Please tick (✓)* one]

- Self Spouse Guardian (for Minor investment) Dependent Children Dependent Parents
 Dependent Siblings PMS Custodian POA

E-mail Address: _____ Specified E-mail Address belongs to: [Please tick (✓)* one]

- Self Spouse Guardian (for Minor investment) Dependent Children Dependent Parents
 Dependent Siblings PMS Custodian POA

*if above any option is not ticked (✓) or selected then [Self] option is considered as a default.

UNIT HOLDER(S) SIGNATURE(S) & DECLARATION

I/we declare that the email address and Mobile number provided in the form belongs to me/us or to spouse, dependent children, Dependent Siblings, dependent parents, Dependent Children, Guardian, Custodian, POA (applicable to individual investors only).

Names & Signatures

1st/Sole Holder

First Joint Holder

Second Joint Holder

Note: The AMC reserves the right to accept the request, subject to additional verifications such as production of additional documents and In Person Verification.



ACKNOWLEDGEMENT - Contact Details Updation Form

Folio No. _____ / _____

Name of 1st Unitholder _____

SIGN & STAMP