

(Please fill the form in **BLOCK LETTERS** only All Fields marked " " are MANDATORY)

*Full Name of Primary Account Holder

 Application Date

D	D
---	---

M	M
---	---

Y	Y	Y	Y
---	---	---	---

(Please leave one space between words For e.g.)

PREFIX	CUSTOMER NAME
<table border="1" style="width: 100%; height: 20px;"></table>	<table border="1" style="width: 100%; height: 20px;"></table>

New Mailing / Correspondence Address (Please tick - applicable to Loans (Assets) only) ☐ Residence ☐ Office

For Asset relationship if the above options are left blank, then Residence address would be updated

*Company Name /

 Flat No & Bldg
Name

*Road No./Name

*Landmark

*City

*State

Pan No.

*PIN Code

Country

*Please mention a prominent landmark to ensure that the deliverables reach you"

New Permanent Address

*Company Name /

 Flat No & Bldg
Name

*Road No./Name

*Landmark

*City

*State

*PIN Code

Country

*Please mention a prominent landmark to ensure that the deliverables reach you"

CONTACT DETAILS :

* Tel (R)	<table border="1" style="width: 100%; height: 20px;"></table>	* Tel (O)	<table border="1" style="width: 100%; height: 20px;"></table>	Ext.	<table border="1" style="width: 100%; height: 20px;"></table>
* Email ID	<table border="1" style="width: 100%; height: 20px;"></table>				
* Mobile	<table border="1" style="width: 100%; height: 20px;"></table>				

 Address of Communication (Applicable to Demat Account only) ☐ Mailing/Correspondence Address ☐ Permanent Address
 (If the above option is left blank permanent address would be updated by default)

Relationship Name	Account No(s)
Savings Account / Term Deposit / Individual Current A/C.	Customer Id: <table border="1" style="width: 100%; height: 20px;"></table> Account Number <table border="1" style="width: 100%; height: 20px;"></table> Proof of address to be mandatorily submitted with the form.
Loan Against Securities A/c No.	<table border="1" style="width: 100%; height: 20px;"></table> Proof of address to be mandatorily submitted with the form.
Loan Account (Please write Loan agreement No. & tick the type of loan)	L. Agreement No.1 <table border="1" style="width: 100%; height: 20px;"></table> *PL / AL / TW / OTH (PI specify _____) L. Agreement No.2 <table border="1" style="width: 100%; height: 20px;"></table> *PL / AL / TW / OTH (PI specify _____) L. Agreement No.3 <table border="1" style="width: 100%; height: 20px;"></table> *PL / AL / TW / OTH (PI specify _____) Proof of address to be mandatorily submitted with the form. *Personal Loan /Auto Loan / Two Wheeler / Other
Credit Card Number	<table border="1" style="width: 100%; height: 20px;"></table> <table border="1" style="width: 100%; height: 20px;"></table> (The address change request will be incorporated only if requested by the primary card holder)
Demat Account	Client ID : <table border="1" style="width: 100%; height: 20px;"></table> DP ID : <table border="1" style="width: 100%; height: 20px;"></table> Trading Account No : <table border="1" style="width: 100%; height: 20px;"></table> It is mandatory to provide the proof of the new mailing / new permanent address to effect an address change for the DEMAT account. Nominee's Address also to be changed as per the New Mailing / Correspondence Address Yes () No () Default is NO

Customer Copy
Instructions Overleaf

Please quote this reference no. for any future communication.

Acknowledgment

We acknowledge receipt of your address change request for the following products:

<input type="checkbox"/> S. A / T.D / Individual C.A	<input type="checkbox"/> Credit Card	Branch Officer Name:
<input type="checkbox"/> Demat A/C	<input type="checkbox"/> Trading A/C No.	EMP Code:
<input type="checkbox"/> PL / AL / TW / Other Assets Loan	<input type="checkbox"/> Loan Against Shares	Date: Branch:

 Date:

D	D
---	---

M	M
---	---

Y	Y	Y	Y
---	---	---	---

 Address Changes as requested would be effected in the Bank's records within a maximum of 7 days from the date of receipt. Any document / communication sent by the Bank during the next 7 days would be despatched to the existing / present address recorded with the Bank. Should you require any further assistance, you may kindly access the following link http://www.hdfcbank.com/common/customer_center.htm to contact us.

Signature of Bank official

This section is applicable to Demat Accounts only.

Name of the Holder (In case of jointly operated accounts & Demat account ONLY all the account holders must sign)	Signature and attestation (Sign as per Bank s record)
1st	
2nd	
3rd	
Signature of the Holder / Representative - Visiting the branch in front of Bank / DP official	Attestation by Bank / DP official
	Name: _____ Employee Code: _____ Signature: _____ Bank Branch Seal

Authority Letter

I / We hereby authorize Mr. / Ms _____ whose signature is attested below to submit the Change of address request and documents pertains to DP ID _____ & Client Id _____ / Trading Account No. _____
 Signature of Authorized Representative _____

Attested by:

Signature of Demat Account Holders: 1st _____ 2nd _____ 3rd _____

DECLARATION

I / We declare confirm and agree:

- HDFC Bank reserves the right to reject the request for address change for one or more of the products / services.
- I / We understand that it is my / our responsibility to inform HDFC Bank within 15 days in event of any change in address as mentioned herein and to provide further information as may be required by HDFC Bank.
- I confirm that I have the necessary authority / mandate from all the joint account holders to sign this declaration on behalf of myself and all the joint account holders for all the products and services as mentioned herein.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address**

Name: _____
 Date : _____

Name: _____
 Date : _____

Name: _____
 Date : _____

To Be Filled in By HDFC Bank official

Date of receipt _____ Sourcing Branch Name _____ Branch Code _____ Customer signed in my presence. Name: _____ Employee Code : _____ Signature : _____	Verified that the account is operated singly or by either / any one or survivor Signature / A/c. No Verified / Address Changed Verified Signature of Bank Staff : _____ Emp Code: _____ Date of account Opened : _____ Receipt At CPU: Date of Receipt _____ Signature of Bank Staff _____ Emp Code _____ Date of Address Change _____
--	---

General Instruction:

- Address change will be effected only if the first holder / first applicant remain same across all the products and services.
- In case of Demat account the request has to be signed by ALL the holders
 - Photo ID is required for all the Account Holders
 - At least one of the holders of the Demat account to visit the bank's branch. In case the request is sent through an authorized representative, his / her signatures should be duly attested by ALL the holders of the demat account.
 - Address Proof (for New Address) is required for the Sole / 1st A/c Holder. (In case the address proof filled by the customer for both correspondence and permanent then address proof is required for both the addresses.)
 - For COA request submitted through a representative (not the Demat A/C Holder) Customer Self-attested ID + Address Proofs, Authority Letter in favour of the Representative & Representative's Photo ID
 - Please note that the trading account holder should be the first holder in the Demat and Bank Account.
 - Letters related to change of address are not accepted as we have the prescribed form which fulfils the regulatory requirement. For CDSL accounts the format is prescribed by them and non acceptance of the same in that format is viewed as non compliance.
 - You may kindly note down the email id's of our demat grievance cell(s) as follows:
 - Depository Services : dphelp@hdfcbank.com
 - Online trading in securities / E Broking : customer@hdfcsec.com
- Address change on Corporate guarantee credit cards are done only through the corporate authorised signatory through corporate cards team