

# Escorts Mutual Fund

## Change in Address / Contact Detail

(PLEASE Fill IN CAPITALS LETTERS)

To  
Escorts Mutual Fund  
I/We wish to change the address/contact details in my / our folio as mentioned below.

Date 

DD	MM	YYYY			

### 1. Unit Holder Information (Mandatory)

Folio No.	
Sole/ First Unit Holder	
Scheme Name	

### 2. Proof of Identity

PAN			[Please enclosed a self attested copy of your PAN card]
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Proof of identity for PAN exempt cases [Please enclose a self attested copy and tick (✓)]

UID (Aadhaar)  
  Passport  
  Voter ID  
  Driving License  
  Others \_\_\_\_\_

### 3. New Address

City	PIN
State	Country

### 4. Proof of New Address

**Please submit ANY ONE of the following valid documents (self attested) & tick (✓) against the document attached.**

Passport  
  Ration Card  
  Registered Lease/ Sale Agreement of Residence  
  Driving License  
  Voter ID  
  \*Latest Gas Bill  
 \*Latest Bank A/C statement/Passbook  
  \*Latest Telephone Bill (Landline only)  
  \*Latest Electricity Bill  
  Others \_\_\_\_\_

\*Not more than 3 month old. Validity/Expiry date of proof of address submitted

### 5. New Contact Details

STD	Office	Residence
Mobile		
Email :		

### 6. Unit Holder(s) Signature(s)

**Signature (s)**  
(All Holder to sign in case mode of holding is joint)

\_\_\_\_\_  
 First Account Holder                      Second Account Holder                      Third Account Holder