



कुमारी क्यापिटल लिमिटेड
Kumari Capital Limited
 Invest for your Future



M/S Kumari Capital Limited

Naxal, Kathmandu

Distribution Centre:

Date:

Subject: Amendment in SIP Registration Instruction

Dear Sir / Madam,

With reference to the above subject, I/We would like to amend the following instruction of my/our SIP registration.

Name:

BOID (हितग्राही खाता):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Details of the Amendments Requested

Particulars	Existing Instruction								Amendment																							
SIP Due Date	<table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>M</td><td>M</td><td>D</td><td>D</td></tr></table>								Y	Y	Y	Y	M	M	D	D	<table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>M</td><td>M</td><td>D</td><td>D</td></tr></table>								Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D																									
Y	Y	Y	Y	M	M	D	D																									
Model of SIP	<div><input type="checkbox"/> Unlimited Installments</div> <div><input type="checkbox"/> Limited Term</div> <div><input type="checkbox"/> Corporate Payroll SIP</div> <div>Company Name:</div> <div>.....</div>								<div><input type="checkbox"/> Unlimited Installments</div> <div><input type="checkbox"/> Limited Term</div> <div><input type="checkbox"/> Corporate Payroll SIP</div> <div>Company Name:</div> <div>.....</div>																							
SIP Interval	<input type="checkbox"/> Monthly				<input type="checkbox"/> Quarterly				<input type="checkbox"/> Monthly				<input type="checkbox"/> Quarterly																			
	<input type="checkbox"/> Semi-Annually				<input type="checkbox"/> Annually				<input type="checkbox"/> Semi-Annually				<input type="checkbox"/> Annually																			
SIP Installment Amount	<div>In Figure:</div> <div>In Words:</div> <div>.....</div>								<div>In Figure:</div> <div>In Words:</div> <div>.....</div>																							
Payment Mode	<div><input type="checkbox"/> Online</div> <div><input type="checkbox"/> Post Dated Cheques</div> <div><input type="checkbox"/> Standing Instruction with Bank</div> <div><u>Bank / Branch Name:</u></div> <div>.....</div> <div><u>Account Number:</u></div> <div>.....</div>								<div><input type="checkbox"/> Online</div> <div><input type="checkbox"/> Post Dated Cheques</div> <div><input type="checkbox"/> Standing Instruction with Bank</div> <div><u>Bank / Branch Name:</u></div> <div>.....</div> <div><u>Account Number:</u></div> <div>.....</div>																							

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 Applicant's Signature (निवेदकको दस्तखत)