

CDS ACCOUNT HOLDER MASTER FILE CHANGES

CDS ACCOUNT NUI	MBER:																		
NAME OF ACCOUNT HOLDER:																			
I/We hereby request the CDS to consider the following details and make the necessary changes with regard to my/our CDS account									5										
A. CHANGE OF CDS ACCOUNT NUMBER																			
NEW NIC/PASSPORT NUMBER :																			
Certified Copy of NIC Passport Other																			
B. CHANGE OF NAME/TITLE (Title/Surname/Initials/Other Names should be changed as follows)																			
TITLE :	MR.	MRS.	MISS.	D	R.	RE	٧.	V	/EN.		отн	ER:							
LAST NAME:				П	I	I						T	I	I	I				
L/OT WAVE.				Ш										\perp					
INITIALS:																			
NAMES DENOTED BY INITIALS:																			
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	++	++	++	\forall	+	Н	+	+	+	+	+	\vdash		Н			+		H
Certified Copy of NIC PASSPORT MARRIAGE CERTIFICATE COMPANY NAME CHANGE CERTIFICATE Other																			
C. CHANGE OF CORRESPONDENCE ADDRESS																			
Original/Certified Copy of Water Bill Electricity Bill Telephone Bill Bank Statement,																			
Other																			
residency.																			



D. CHANGE OF CDS ACCOUNT ST	ATUS AT THE RECU	EST OF THE ACCOUN	T HOLDER						
Change to the Account Status	Master File Level	Participant Level	110 - 52-11						
Dealings Suspension									
Trading Suspension									
Lifting of Dealings Suspension									
Lifting of Trading Suspension									
Please attach the necessary document	-S								
Letter from account holder explai	ning reasons	Proof of Residency in	Required for lifting of dealings suspensions mposed due to monthly statement returns)						
Other									
*For requests made by Participants to remove suspensions of a client account to recover sums due to the participant firm, the Participant firm shall submit all necessary documents in terms of CDS Rule 11.2(b)									
I/We hereby confirm that the information any liability for loss/damage occurred	-								
Signature of the Applicant(s)									
1									
2									
3									
For office	use only – To be cor	mpleted by the Partio	cipant						
We confirm the authenticity of the gi	ven information and	l attached	Authorized Signature and						
supporting documents. We have followerified the information given by the		KYC guidelines and	Stamp of the Participant						



INSTRUCTIONS TO FILL THE FORM

This application should be filled in English capital letters for the purposes of computerizing records.

The current CDS account number should be written on the form with the account holder's name as reflected in the CDS system.

Section A: Change of CDS Account Number

The duly completed form should be submitted with a copy of the NIC/Passport (certified as set out below) as applicable

In case of changing a NIC number from an existing number to a new number, the letter issued by the registrar of persons should be submitted.

Section B: Change of Name/Title

New name to be updated should be duly stated in the form.

To support the name change, a copy of the NIC/Passport/Marriage Certificate / Birth Certificate /Relevant other document (certified as set out below) which proves the relevant name change should be submitted.

Section C: Change of Correspondence Address

New correspondence address should be duly stated in the form.

Documentary proof for the permanent address as per rules issued by the FIU guidelines should be submitted.

Section D: Change of Account Status

In case of lifting of a dealings suspension imposed due to a returned monthly statement the account holder should submit a valid proof of residency if the registered address has been changed.

For requests made by Participants to remove suspension (imposed in terms of CDS Rule 11.2) of a client account to recover sums due to the participant firm, the participant shall submit all necessary documents in terms of CDS Rule 11.2(b)

General

Duly completed forms should be signed by the account holder(s)

If a third party is signing the document under a Power of Attorney, a true copy of such document should be attached.

For institutions, signatures and company seals (where applicable) should be placed as stated in the company's Articles of Association together with the capacity of the signatories.

The form and all the attachments should be certified by an authorized signatory of the Participant, as notified to the CDS.

Certification:

All supporting documents to be submitted to the CDS should be certified or attested or authenticated for purposes of validating by persons mentioned under (a) or (b) of item (4) of KYC Rules. Such certification should state that the document certified is a true copy.

(a) Certification for Non-Resident Applicants

- By the Company Registry or similar authority, where the documents were originally issued (applicable for corporate bodies) or,
- By a Sri Lankan diplomatic officer or Sri Lankan consular officer in the country where the documents were originally issued, or
- BY a Solicitor, Attorney-at-Law, Notary Public, practicing in the country where the applicant resides, or
- 4. Custodian Bank, or
- 5. Global Custodian The Custodian Bank should certify the authenticity of the signature of the Global Custodain, or
- 6. Broker (applicable only in respect of Individuals)

(b) Certification for Resident Applicants

- Registrar General of Companies or the Company Secretary (applicable in respect of Corporate Bodies), or
- 2. Attorney-at-Law/Notary Public, or
- 3. Broker, or
- 4. Custodian Bank

Note: The person certifying should place the signature, full name, address, contact telephone numbers and the official seal (not applicable for Brokers, Custodian Banks & Global Custodians)