

CDS	ACCOU	INT HO	DLDER	MASTER	FILE	CHANGES

CDS ACCOUNT N	UMBER:													
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														
A. CHANGE OF CDS ACCOUNT NUMBER														
NEW NIC/PASSPORT NUMBER :														
Certified Copy of NIC Passport Other							ched.							
B. CHANG	E OF NAM	IE /TITLE (1	ītle/Surna	me/Initia	lls/Other	Name	es should	be chan	ged as	follov	vs)			
TITLE : MR. MRS. MISS. DR. REV. VEN. OTHER:														
LAST NAME:														
LAST NAME.														
INITIALS:	INITIALS:													
NAMES DENOT	ED BY INI	TIALS:												
		\rightarrow		++	++	_	\square	\square		_	\square	_	\downarrow	\square
	+++	++	+++	++	++	+	\vdash	\vdash		_	\vdash	_	+	\vdash
	+++	++	+++	++	++	+	\vdash	\vdash		+	\vdash	+	+	\vdash
Certified Copy of INIC PASSPORT MARRIAGE CERTIFICATE COMPANY NAME CHANGE														
Other(Please specify the document)														
C. CHANG	ge of cof	RRESPONE	DENCE AD	DRESS										
									Π					
				\square			++		\square	\top	\square		Π	
Original/Cert	tified Copy	y of $\square V$	Vater Bill		ctricity I	Bill 🖂	∣ Telep	hone Bil		Bank	stat	emen	ь t,	
Other														
(Please specify the document) residency.														



D. CHANGE OF CDS ACCOUNT ST	ATUS AT THE REQU	EST OF THE ACCOUN	IT HOLDER	
Change to the Account Status	Master File Level	Participant Level		
Dealings Suspension				
Trading Suspension				
Lifting of Dealings Suspension				
Lifting of Trading Suspension				
Please attach the necessary document			Required for lifting of dealings suspensions	
Letter from account holder explain	ning reasons		mposed due to monthly statement returns)	
*For requests made by Participants to remove the Participant firm shall submit all neces				
I/We hereby confirm that the informat any liability for loss/damage occurred of the sector of the se	-			

Signature of the Applicant(s)

-

- 1.
- 2.
- 3.

For office use only – To be completed by the Partic	ipant
We confirm the authenticity of the given information and attached supporting documents. We have followed the necessary KYC guidelines and verified the information given by the account holder(s).	Authorized Signature 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,
- 2. By a Sri Lankan diplomatic officer or Sri Lankan consular officer in the country where the documents were originally issued, or
- 3. 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)