



**AMT NIDHI LIMITED**

**Office Add:** 1<sup>ST</sup> Floor, Shankuntla Enclave, Opp -Street 2  
Village-Wazirabad Main Road, Delhi -110084  
**CIN : U65990DL2019PLC353858**  
Email -[info@amtnidhi.com](mailto:info@amtnidhi.com) Contact- 09871347292

**Correction/Update form**

(To be filled by the applicant correction for AMT NIDHI Ltd accounts, Use Block Letter)

Allotted Membership Number	M	Full Name	
Branch			

Update List	Tick	Details
1. Update my Aadhar Card No		
2. I would like to update my correspondence address.		
3. Update mobile number		
4. Update Pan details		
5. Update email		
6. Update Nominee		Nominee Name – Nominee Date of Birth - Nominee Address -
7. Upgrade or degrade my saving account to scheme name		Scheme Name - ..... I agree I need to maintain minimum balance of Rs .....
8. I would like to request to close my RD/FD account		RD/FD no ..... I am aware that I will get Rs ..... if my application is approved for the force closure of FD/RD for the above mention no. Date of opening of RD/FD ..... Date of Closure of RD/FD .....
9. Any other request ? Kindly provide the details		

**Declaration by Applicant\***

I hereby declare that I voluntarily opt for correction detailed above with AMT Nidhi Limited and shall abide by the existing rules and regulations of the company and also the amendments as take place from time to time. I also agree that AMT Nidhi Limited reserve the right to verify and keep my documents in their records. I have read and understood T&C associated.

Place: ..... Date: ..... Signature of Applicant .....