

TRANSMISSION REQUEST FORM

(In case of death of one / more of the joint holders)

Application No.					D	ate	D	D	M	M	Υ	Y	Y	Υ
(Please fill all the deta	ils in Block	Letters	in Englis	h)	•						•			
(Please fill all the deta O, Asit C. Mehta Investn Pantomath Nucleus H Saki Vihar Road, Andh Mumbai - 400072, Maharashtra Dear Sir / Madam, I / We undersigned, th DP ID To DP ID	n ent Interr ouse, eri (E),	mediate:	s Limited	d,					es ba	lance	from	:		
Due to the death of														
Original Death Certifi attached herewith. I/We declare that all t							tteste	d und	ler se	eal by	/aG	azette	ed O	fficer) is
		Firs	t / Sole	Holder		Secor	nd Ho	lder				Third	Hol	der
Name(s) of the surviving	holder(s)													
Signature(s) of the survive holder(s	/ing													
============	======	======	=====	==(Plea	se te	ar here)=====	====		====			====		====
			Acknow	ledger	nent F	Receipt								
Application No.							Da	te: -						
We hereby acknowled	lge the rec	eipt of th	e follow	ing inst	ructio	ns for transmi	ssion	from:						
DP ID						Client ID								
То														
DP ID						Client ID								
Surviving Holder(s)														
Fi	rst/Sole H	older						Seco	nd H	oldei				
Documents Submitt	ed													
Subject to verification														

Subject to verification

Depository Participants Seal & Signature

Bond of Indemnity to be furnished jointly by all Legal Heir(s) including the claimant(s) (To be submitted on Non-judicial Stamp Paper of appropriate value)

[For Transmission of Securities on death of Sole Securities' Holder, where no nomination has been registered)

Bond of Indemnity

To, Asit C. Mehta Investment Intern Pantomath Nucleus House, Saki Vihar Road, Andheri (E), Mumbai - 400072,	mediates Limited,				
Maharashtra					
Dear Sirs,					
Sub: Transmission of securities	standing in the name	of Late Mr./Mrs			
I/We do hereby solemnly affirm	and state on oath a	s follows:			
Mr./Mrs		the dec	eased, was	holding a	Client account nowith
said deceased BO was holding th	ne following securitie		sitory Partio	cipant hav	ving DP ID The
		-			Niverbay of
ISIN		Name of Con	npany		Number of securities
That the aforesaid deceased hole registering any nominee, leaving laws of intestate succession app	s behind him/her the	following persons		nt the time	
Heir(s)/Claimant(s)	contact details			Deceas	ed
1					
2					
3					
4					
That the aforesaid deceased hole leaving behind him/her the foll succession.	·	OR e only surviving leg	gal heirs, ad		t registering any nominee, to the laws of testamentary
Name of the Legal Heir(s)/Claimant(s)	Address and contact	t details	Age	Relation	nship with theDeceased
1		_			
2					
3					
4					

Therefore, I/We, the Legal Heir(s)/Claimant(s) and deponent(s) herein has/have , approached you with a request to transfer the aforesaid securities in the name of the undersigned Mr. / Mrs. /Ms. _____on my/our behalf without insisting on the production of a Succession Certificate/ Probate of Will / Letter of Administration or an Order of the Court of competent jurisdiction and you have kindly agreed to do so on my/our executing an indemnity asis herein contained and on relying on the information herein given by us believing the same to betrue.

undersigned Mr.	/Ms. [Name(s) of the legal heir(s)/claimant(transmit the above said securities to the name of the s)] #,without of Will / Letter of Administration or any Court order.
you and your suc charges, expenses transferring the sa	ccessors and assigns for all time hereafter s, damages, etc., whatsoever which you may aid securities as herein above mentioned, to	emnify and keep indemnified, saved, defended, harmless against all losses, costs, claims, actions, demands, risks, suffer and/or incur by reason of your, at my/our request, the undersignedwithoutinsisting on production of a on or anOrder of the Court of competent jurisdiction.
IN WITNESS WHEI		(Name and signature of
the And 2) Mr. /Ms hands and seals th		e of the witness #, have here unto set their respective of .Signed and
delivered by the sa		
Sr.No	Name the Legal Heirs	Signature of the Legal Heirs
1.		
2.		
3.		
Name of the dece	acced cocurity holder (#\ New	a of the claimant /c
Name of the dece	ased security holder (#) Nam	e of the claimant/s
Signed before me		
Date:		
Place:	(Sig	nature and Seal of Magistrate/Notary)
Full Name and Ad	dress of Magistrate /Notary:	
Name	:	
Address	:	
PIN		<u></u>
Registration No:		
Use space below t	o affix:	Official Seal of
Notari	ai / Court ree Stamp	Magistrate / Notary

<u>Affidavit</u>

Individual Affidavits to be given by ALL the Legal Heirs OR Legal Heirs named in Succession Certificate*/
Probate of Will*/ Will*/ Letter of Administration*/ Legal Heirship Certificate*(or its equivalent certificate)*/Court Decree*

(For Transmission of securities on death of Sole Holder where ${\color{red}{\rm NO\,MINATION}}$ has been registered)

Each Dep	oonent (legal heir) shall sign separate	Affidavits.	
l,	son/daughter/spouse of		
	residing at		
do herebysolemnly affirm and state of	n oath as under: -		
That Mr. / Mrs			
the deceased was holding aClient Acc	count Nowith		
	aDep	oository Particip	pant having DP ID
	Th	e said decease	d was holding thefollowing
securities:			
ISIN	Name of Company	No	o. of securities
	ed holder died intestate leaving beh		
	per the Succession Certificate/ Loated/ac	-	
	he was governed at the time of h	-	
nominee. *			
	OR		
	holder died leaving behind the folk ill/ Letter of Administration dated	• .	•
	ertificate*/ Probate of Will*/ Will*/		inistration*/ Legal Heirship
Certificate*(or its equivalent	certificate)*/ Court Decree* is attack	nea nerewith	
Name of theLegal	Address and contactdetails	Age	Relationship withthe
Heir(s)			deceased

2

4

		esaid legal heirs N				age
					y his / her father/mother	/ legalguardian
1411. / 1411	٥					<u></u> ·
		legal heirs				DP name) to reg
the afo Indemnit expenses	resaid secur y in favour or damages	rities in my/our of the Participar	individual/joi nt/CDSL holdi caused to the	nt beneficial ng the Partic m in consequ	owner account and ha ipant / CDSL indemnific ience of any claim whic	ve executed a Lette ed against any loss,
					Signature of [DEPONENT
			VERIFI	CATION		
					true and correct and no benefitsof the above me	
Solemnly affirm	ed at		on	the	day of	of
_						
					Signature of	the Deponent
ned before me						
ll Name and Ad	dress of Mag	gistrate / Notary				
Signed in the	resence of					
Name	:					
Address	:					
		City	Pin			
Dogistration	No					
Registration	No:					
			(5	Signature d	of Notary with Offic	rial Seal of Nota
			(-		,,	
* strikeout wh	ichever is no	t applicable				
# = Name of th \$ = Name of th	_	@ = Name of the o	leceased secui	rity holder		
Use space bel	ow to affix:					
	Notaria	al Stamps			Official Seal of N	lotary

NO Objection Certificate

Note: To be executed in the presence of a Public Notary / Gazetted Officer

[To be submitted in non-judicial stamp paper of appropriate value] No-Objection Certificate from the Legal Heir(s)

Format of NOC from other Legal Heir(s) for Transmission of Securities in favour ofthe Claimant(s) wherein the Sole Holder is deceased and NO <u>NOMINATION has been registered</u>

DECLARATION

I/We, the legal heir(s) of late M declare as follows –	r. / Ms			_(name of thed	eceased	holder)
(i) That the above named dece his / her name as single		Account No			with D	:
Name of the Comment		ICIN	No of			
Name of the Company 1)		ISIN	NO. OT S	securities held		
2)						
3)						
(ii) That the deceased had died		e on DD/MM/YYYYa				
Name of the Claimant(s)	Addr	ess & contact details	Age	Relationship	with	the
				deceased		
1)						
2)						
Name of the LegalHeir(s)	Address an	d contact details	Age	Relationship deceased	with	the
1)						
2)						
3)						
(v) I / we hereby declare that, I / by the deceased and I / we securities and shall have no (vi) Accordingly, I / we declare the aforesaid securities in fac	hereby w legal clain that I / we	ilfully relinquish & renoun nupon said securities in fut e have NO OBJECTION WH/	ce all my /our rig ure.	ghts in respect (of the af	foresaid
(vii)I / we hereby state that nothing has been concealed		is stated herein above a	ire true to the b	est of my/our	knowled	lge and
Name(s) and Signature(s) of	Legal Hei	r(s) who are Non – Claiman	t(s):			
. tame(s) and signature(s) or	_					

VERIFICATION							
		ove is true to our knowledge and nothing has d entitled to rights and benefits of the above					
Solemnly affirmed at							
Deponent(s) (1)	(2)	(3)					

Asit C. Mehta Investmen Pantomath Nucleus Hou Saki Vihar Road, Andher Mumbai - 400072, Maharashtra	se,	es Limited,		Date :	
Dear Sir / Madam,					
Sub: Intimation of de	nise informa	tion.			
Ref .: PAN	Demat acco	unt no	Trading accou	ınt no	
= -	Demat Accoun	t / Trading Accou	nt, where I / We is	-	me of the deceased person) joint holder(s) / registered
2) Self-attested cop	aded / self-atte by of the Decea	ested copy of the I ased person PAN o) proof	for your kind action. proof.
In this context :					
☐ Please find attached	duly filled up T	O ransmission Requ	R		he unit in my / our favor. ssary supporting documents
to transmit the unit in	-		n / contact as belov	w:	
Details	First Holder /	/ Nominee 1	Second Holder / Nominee 2		Third holder / Nominee 3 / legal Heir
Name					, 0
PAN					
Mobile					
Email					
Address					
Relation with Demise account holder					
knowledge and belief. In misrepresenting, I/We an the respective statutory ror manner, all / any of the when provided by me to	case any of the n/are aware the equirements. I e information	above specified in at I/We may be lia /We hereby autho provided by me, i	nformation is found able for it for any fir orize you to discloso ncluding all change	d to be fals nes or cons e, share, re es, update	prrect to the best of my/our se or untrue or misleading or sequences as required under ely, remit in any form, mode, s to such information as and
Signature:					
First Holder / Nomir	First Holder / Nominee1 Second Holder2 / Nominee2 Third Hodder / Nominee3 / Legal				
☐ Death Certifi☐ PAN or othe	r ID proof of D	l downloaded or s eceased person –	Self-attested copy Self-attested copy r any other self-att		d ID proof.