

I/We hereby nominate the following person(s) who shall receive all the assets held in my/our account/folio in the event of my /our demise, as trustee and on behalf of my /our legal heir(s)\*

### Nomination Details

Mandatory Details				Additional details			
	Name of nominee	Share of nominee	Relationship	Mobile number & Email-mail	Identity Number	D.O.B. of nominee	Guardian
Nominee1							
Address							
Nominee2							
Address							
Nominee3							
Address							
Nominee4							
Address							
Nominee5							
Address							
Nominee6							
Address							
Nominee7							
Address							
Nominee8							
Address							
Nominee9							
Address							
Nominee10							
Address							

Joint Accounts:

Event	Transmission of Accounts /Folio to
Demise of one or more joint holder(s)	Surviving holder (s) through name deletion The surviving holder(s) shall inherit the assets as owners
Demise of all joint holders simultaneously –having nominee	Nominee
Demise of all joint holders simultaneously –not having nominee	Legal heir(s) of the youngest holder

\*\*\*Provide only number: PAN or Driving Licence or Aadhaar (last4). Copy of the document is not required. However, in case of NRI / OCI / PIO, Passport number is acceptable.

\*\*\*\*to be furnished only in following conditions / circumstances:

- Date of Birth (DoB): please provide, only if the nominee is minor.
- Guardian: It is optional for you to provide, if the nominee is minor.

☐ I/We want the details of my/our nominee to be printed in the statement of holding or statement of account, provided to me/us by the AMC /DP as follows; (please tick, as appropriate)




☐ Name of nominee(s)

☐ Nomination: Yes / No



☐ I here by authorize \_\_\_\_\_(nominee number..... ) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5 of the circular. He / She is authorized to encase my assets up to .....% of assets in the account / folio or Rs. ....(Optional) (strike off portions that are not relevant)

☐ This nomination shall supersede any prior nomination made by me / us, if any.

☐ Signature(s) – As per the mode of holding in demat account(s) / MF folio(s)

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature of Client			

\* Signature of two witness (es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

	First/Sole Witness	Second Witness
Name / Address of Witness		
Signature of Witness	