

## Nomination Form

**To,  
The Depository Participant Name  
Address**

Dear Sir/ Madam,

- I/We hereby confirm that I/We **do not wish to appoint any nominee in my demat account** and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the demat account.

[Strike out what is not applicable.] [Signatures of all account holders should be obtained on this form].

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

Note:

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination / opt out nomination].

- I/We **nominate** the following person/s who is entitled to receive all Assets / security balances lying in my/our account, particulars whereof are given below, in the event of the death of the Sole holder or the death of all the Joint Holders.

BO Account Details															
DP ID										Client ID					
Name of the Sole / First Holder															
Name of Second Holder															
Name of Third Holder															

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name :			
*First Name:	.....	.....	.....
Middle Name:	.....	.....	.....
*Last Name	.....	.....	.....
*Percentage of allocation of securities:			
<input type="checkbox"/> Equally [If not equally, please specify percentage]	%	%	%
<b>Or</b>			
<input type="checkbox"/> Share of each Nominee			

<i>Any odd lot after division shall be transferred to the first nominee mentioned in the form</i>			
Nomination Identification Details – [Please tick any one of following and provide details of same]	Nominee 1	Nominee 2	Nominee 3
<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID <b>[Optional Fields]</b>			
*Address:			
*City:			
*State:			
*Pin:			
*Country:			
Mobile no. / Telephone No: <b>[Optional Fields]</b>			
Email ID: <b>[Optional Fields]</b>			
Fax No: <b>[Optional Fields]</b>			
*Relationship with the BO:			
<b>To be filled only if nominee(s) is a minor:</b>			
Date of birth (mandatory if Nominee is a minor):			
Name of the Guardian of Nominee (if the nominee is minor):			
*First Name:	.....	.....	.....
Middle Name:	.....	.....	.....
*Last Name	.....	.....	.....
*Address of the Guardian of nominee:			

*City:			
*State:			
*Country:			
*Pin:			
Age			
Mobile /Telephone no.: [Optional Fields]			
Email ID: [Optional Fields]			
Fax No: [Optional Fields]			
*Relationship of the Guardian with the Nominee:			
Guardian Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar Saving Bank account no. Proof of Identity <input type="checkbox"/> Demat Account ID [Optional Fields]			

**Note :** Residual securities: incase of multiple nominees, remaining after distribution of securities as per percentage of allocation. shall be transferred to the first nominee.

**\* Marked is Mandatory field**

Note:

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination / opt out nomination.

Details of the Witness	
	<b>Witness Details</b>
Names of Witness	
Address of Witness	
Signature of Witness	

