



216,GLACIER COMPLEX, JETALPUR ROAD, VADODARA - 390007. PH - (0265) 2351355, FAX - (0265) 2351468

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	CDSL DP Id	1	2	0	4	4	4	0	0							_	\sqcup		Trading ID		_	_		_		—
		Ш						Ш			_	_				_	Щ		Nomination No.	_						
N	□ I /WE THE SOLE HOLDER / JOINT HOLDERS/ GUARDIAN (IN CASE OF MINOR) HEREBY DECLARE THAT: I/We wish to make nomination and do hereby nominate the follwing person(s) who shall receive all the assets held in my/our account in the event of my/our death [As per Details given Below]. This nomination shall supersede any prior nomination made by me/us and also any testamentary document executed by me/us.																									
	Nomination can be made up to three nominee in the account							Details of 1st Nominee									Details 2nd Nominee				Details of 3rd Nominee					
1	Name of the Nominee(s) (Mr./Mrs/Ms.)																									
	Share of Equally (if not					%										%				%						
2	each equally, please Nominee specify %)							Any odd lot after division shall be transferred to the first nominee mentioned in the form.																		
3	Relationship [if any]*	witl	h ap _l	plica	nt/	ВО																				
4	Address of N City / Place: State & Cou PIN Code																									
5	Mobile/Telephone No. of																									
6	Nominee(S) Email ID of N			<i>(</i>)																-						
7	Nominee Identification Details [Please tick any one of and provide details of same]							1) Aadhar/ PAN/ Other POI No								1) Aadhar/ PAN/ Other POI No				Pleas proo 2) Do A/c I Bank	1) Aadhar/ PAN/ Other POI No					
Sr	Nos 8-14	shoi	uld l	ne f	ille	d o	nlv	if no	mi	nee	(s) i	s a	mir	or:						-						
8	r. Nos. 8-14 should be filled on Date of Birth (in Case of Minor Nominees(s)																									
9	Name of Guardian (Mr/Ms.) {ir Case of Minor Nominees(s) :																									
10	Address of Guardian(s)* City / Place: State & Country:																									
11	Mobile/Telephone No. of Guardian(S)																									
12	12 Email ID of Guardian (s)															T				+						
13	Relationship Nominee				wit	h																				



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14	Guardian Identification Details [Please tick any one of and provide details of same]	Please specify proof of Identi 2) Demat / Sav A/c No. Bank/DP Detai 3) Photograph	ing Bank Proof	Please proof 2) Der A/c No Bank/	lhar/ PAN/ Other POI e specify other of Identity (POI) nat / Saving Bank Pro oc. DP Details etograph & Signature Please Across Photog	sign s the	Please s proof of 2) Dema A/c No. Bank/DF	P Details pgraph & Signature Please sign Across the Photograph		
			Name(s) of Acc	ount Ho				Holder/ Thumb impression of		
	ole/First Holder(in case of older is Minor)(Mr./Ms./Mr									
S	second Holder (Mr./Ms./Mr	s.)								
Т	hird Holder(Mr./Ms./Mrs.)									
	Guardian (in case sole hold ninor) (Mr./Ms./Mrs.)	ler is								