Form T1



REQUEST FOR TRANSMISSION OF UNITS (Deletion of name/s of Joint Holders in case of death of the 2<sup>nd</sup> or 3<sup>rd</sup> Holder)

То:		D	Date:	
The Trustees	,	Mutual Fund		
Sirs,				
	Request for deletion	of name(s) of the 2 <sup>nd</sup> /3 <sup>rd</sup> Ho	lder	
Sr.#	Scheme Name	Folio No	No. of Units	
1				
2				
3				
4				
	ving Unit holder/s in the above schemes/fortioned below –	olios regret to inform you the demis	se of the following joint holder(s	
Name(s) of th	e Deceased Unitholder(s)		Date of demise*	
2.Mr./Ms.			DD/MM/YYYY	
3.Mr./Ms.			DD / MM / YYYY	
certified copy	y of his/her/their Death Certificate/s is/are	attached herewith.		
Bank Mandate  Tomination (P	nk account details registered in the above		•	
	to continue the existing nomination mad			
	to make a fresh nomination and hereby ron Form to receive the Units held my/our			
Name & Signa	ture of the surviving Unit holder/s			
	Name	PAN	Signature	
1.				
2.				
Please tick (v	/) whichever is applicable.			
1 tto ohmonta				
Attachments:	: ath Certificate of the deceased unitholder			
	Mandate Form along with $\square$ Cancelled of	cheque of the new bank account		
	Form duly completed	•		
☐ KYC of the	surviving unit holder(s), if not already co	omplied earlier.		