

**Request for Transmission of Securities by Nominee or Legal  
Heir(s)/Claimant(s) on death of the holder(s)**

**Appendix -A  
(ISR 5)**

To:

**State Bank of India**  
 Shares & Bonds Deptt  
 Corporate Centre,  
 State Bank Bhawan,  
 Madam, Cama Road,  
 Mumbai-400021

**M/s Alankit Assignments Ltd\***,  
 (Unit: State Bank of India )  
 205-208,Anarkali Complex,  
 Jhandewalan Extension,  
 New Delhi-110 055

\*In case of change of RTA, address will be changed accordingly.

<b>Name of the Claimant(s)</b> Mr./Ms.		
Name of the Guardian	<i>in case the claimant is a minor →</i>	Date of Birth of the minor**
Mr./Ms.		
Relationship with Minor:	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed Guardian**	
[Multiple PAN may be entered] PAN (Claimant(s)/Guardian): <input type="text"/>   KYC Acknowledgment attached   KYC form attached		
Tax Status: Resident Individual Resident Minor (through Guardian)		<input type="checkbox"/> NRI <input type="checkbox"/> PIO <input type="checkbox"/> Others (please specify)

*\*\*Please attach relevant proof*

I/We, the claimant(s) named hereinabove, hereby inform you about the demise of the below mentioned Securities Holder(s) and request you to transmit the securities held by the deceased holder(s) in my/our favour in my/our capacity as –

Nominee     Legal Heir     Successor to the Estate of the deceased    Administrator of the Estate of the deceased

<b>Name of the deceased holder(s)</b>	<b>Date of demise***</b>
1)	DD / MM / YYYY
2)	DD / MM / YYYY
3)	DD / MM / YYYY

*\*\*\*Please attach certified copy of Death Certificate.*

**Securities(s) & Folio(s) in respect of which Transmission of securities is being requested**

Name of the Company	Folio No.	No. of Securities	% of Claim@
1)			
2)			
3)			
4)			

*@As per Nomination OR as per the Will/Probate/Succession Certificate/Letter of Administration/ Legal Heirship Certificate (or its equivalent certificate)/ Court Decree, if applicable.*

## Contact details of the Claimant (s)

**Address** (Please note that address will be updated as per address on KYC form / KYC Registration Agency records)

Address Line 1	
Address Line 2	
Address Line 3	
City:	State
	PIN

## **Bank Account Details of the Claimant**

Bank Name	
Account No.	11-digit IFSC
A/c. Type (✓) <input type="checkbox"/> SB <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR	9-digit MICR No.
Name of bank branch	
City	
PIN	

Please attach & tick ✓  Cancelled cheque with claimant's name printed OR  Claimant's Bank Statement/Passbook (duly attested by the Bank Manager)

I/We also request you to pay the UNCLAIMED amounts, *if any*, in respect of the deceased securities holder(s) by direct credit to the bank account mentioned above.

**Additional KYC information** (Please tick✓ whichever is applicable)

**Occupation**  Private Sector Service  Public Sector Service  Government Service  
 Business  Professional  
 Agriculturist  Retired  Home Maker  Student  Forex Dealer  Others  
  
(Please specify)

The Claimant is a  Politically Exposed Person       Related to a Politically Exposed Person     Neither (Not applicable)

<b>Gross Annual Income (₹)</b>	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs
<input type="checkbox"/> 25 Lacs-1crore	>1 crore			

#### FATCA and CRS information

Country of Birth _____	Place of Birth _____
Nationality _____	

Are you a tax resident of any country other than India?  Yes  No  
If Yes, please mention all the countries in which you are resident for tax purposes and the associated Taxpayer Identification Number and its identification type in the column below

Country	Tax-Payer Identification Number	Identification Type

#### Nomination\$ (Please √ one of the options below)

- |  |
|--|
| <input type="checkbox"/> I/We <b>DO NOT</b> wish to make a nomination. ( <i>Please tick √ if you do not wish to nominate anyone</i> )  |
| <input type="checkbox"/> I/We wish to make a nomination and hereby nominate the person/s more particularly described in the <b>attached Nomination Form</b> to receive the securities held in my/our folio in the event of my / our death. |

\$ *Guardian of a minor is not allowed to make a nomination on behalf of the minor*

#### Declaration and Signature of the Claimant(s)

- I/We have attached herewith all the relevant / required documents .
- I/We confirm that the information provided above is true and correct to the best of my knowledge and belief.
- I/We undertake to keep State Bank of India /its RTA informed about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required by the RTAs.
- I/We hereby authorize State Bank of India and its RTA to provide/ share any of the information provided by me/us including my holdings in the (State Bank of India) to any governmental or statutory or judicial authorities/agencies as required by law without any obligation of informing me/us of the same.

Place:	
Date :	Signature of Claimant(S)

#### Documents Attached

- Copy of Death Certificate of the deceased holder
- Copy of Birth Certificate (in case the Claimant is a minor)
- Copy of PAN Card of Claimant / Guardian

- KYC Acknowledgment OR
  - KYC form of Claimant
  - Cancelled cheque with claimant's name printed OR  Claimant's Bank Statement/Passbook
  - Nomination Form duly completed
  - Annexure B - Individual Affidavits given by EACH Legal Heir
  - Original security certificate(s)
  - Annexure C - Bond of Indemnity furnished by Legal Heirs
  - Annexure D - NOC from other Legal Heirs

**Appendix- B**

**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 NO  
NOMINATION has been registered)**

*Each Deponent (legal heir) shall sign separate Affidavits.*

(To be executed on a non-judicial stamp of Rs.100 and Notarized)

I, \_\_\_\_\_ Son / daughter  
of \_\_\_\_\_

residing \_\_\_\_\_ at \_\_\_\_\_

\_\_\_\_\_ do hereby solemnly affirm and state on oath  
as follows.

That Mr. /Mrs. \_\_\_\_\_<sup>®</sup> ("the  
deceased holder") held the following securities in his / her name as single  
holder:

Company Name	Folio No.	No. of securities held
1)		
2)		
3)		

That the aforesaid deceased holder died *intestate* leaving behind him/her,  
the following persons as the only surviving heirs as per the Succession  
Certificate/ Legal Heirship Certificate (or its equivalent certificate)/Court  
Decree dated \_\_\_\_\_ / according to the Law of Intestate  
Succession by which he/she was governed at the time of his/her death and  
without registering any nominee. \*

OR  That the aforesaid deceased  
holder died leaving behind the following persons as the legatees as per the  
Will/ Probated Will/ Letter of Administration dated \_\_\_\_\_ and without  
registering any nominee. \*

A copy of the **Succession Certificate\*/ Probate of Will\*/ Will\*/ Letter of Administration\*/ Legal Heirship Certificate\*(or its equivalent certificate) \*/ Court Decree\*** is attached herewith.

Name of the Legal Heir(s)	Address and contact details	Age	Relation with the Deceased
1)			
2)			
3)			

That among the aforesaid legal heirs, Master/Kum. \_\_\_\_\_ aged \_\_\_\_\_ years is a minor and is being represented by Mr./Ms. \_\_\_\_\_ \$ being his / her father / mother / legal guardian.

Signature of the Deponent:

X \_\_\_\_\_

### **VERIFICATION**

I hereby solemnly affirm and state that what is stated herein above is true and correct and nothing has been concealed therein and that I am competent to contract and entitled to rights and benefits of the abovementioned securities of the deceased.

**Solemnly affirmed at**

**Signature of the Deponent:**

**Signed before me**

Place: \_\_\_\_\_

Date : \_\_\_\_\_

X -----

Signature of Notary with Official Seal of Notary& Regn. No.

\* *strikeout whichever is not applicable*

@ = *Name of the deceased security holder*

\$ = *Name of the Guardian*

**Appendix -C**

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

**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 Rs.500 value)**

**[For Transmission of Securities on death of Security Holder(s), where no nomination has been registered]**

I/We do hereby solemnly affirm and state on oath as follows:

That Mr. /Ms. \_\_\_\_\_ Name of the deceased holder \_\_\_\_\_ was holding  
the following securities in State Bank of India:

<b>Certificate No.</b>	<b>Distinctive No.</b>		<b>Folio No.</b>	<b>No. of Securities held</b>
	<b>From</b>	<b>To</b>		
1				
2				
3				
4				

That the aforesaid deceased holder died *intestate* on \_\_\_\_\_, without registering any nominee, leaving behind him/her the following persons as the only surviving legal heirs, according to the laws of intestate succession applicable to him/her by which he/she was governed at the time of his/her death.

<b>Name of the Legal Heir(s)/Claimant(s)</b>	<b>Address and contact details</b>	<b>Age</b>	<b>Relationship with the Deceased</b>
1			
2			
3			
4			

OR

That the aforesaid deceased holder died on \_\_\_\_\_, without registering any nominee, leaving behind him/her the following persons as the only surviving legal heirs, according to the laws of testamentary succession.

<b>Name of the Legal Heir(s)/Claimant(s)</b>	<b>Address and contact details</b>	<b>Age</b>	<b>Relationship with the Deceased</b>
1			
2			

3			
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Therefore, I/We, the Legal Heir(s)/Claimant(s) and deponent(s) herein has/have, approached State Bank of India/its RTA with a request to transmit the aforesaid securities in the name of the undersigned Mr. /Ms.

[Name(s) of the legal heir(s)/claimant(s)] #, on my/our behalf, without insisting on production of a Succession Certificate/ Probate of Will / Letter of Administration or any Court order, for which we execute an indemnity as is herein contained and on relying on the information herein given by us, believing the same to be true.

In consideration therefore of my/our request to transmit the above said securities to the name of the undersigned Mr. /Ms. [Name(s) of the legal heir(s)/claimant(s)] #,

I/We hereby jointly and severely agree and undertake to indemnify and keep indemnified, saved, defended, harmless, State Bank of India/Its RTA and its successors and assigns for all time hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages, etc., whatsoever which they may suffer and/or incur by reason of transferring the said securities as herein above mentioned, at my/our request to the undersigned Mr./Ms. [Name(s) of the legal heir(s)/claimant(s)] #,

without insisting on production of a Succession Certificate / Probate of Will / Letter of Administration or any Court order.

IN WITNESS WHEREOF the said 1) Mr. /Ms. \_\_\_\_\_ (Name and signature of the witness)

And 2) Mr. /Ms. \_\_\_\_\_ Name and signature of the witness \_\_\_\_\_, have hereunto set their respective hands and seals this day of \_\_\_\_\_ . Signed and delivered by the said legal heir/s.

Name the Legal Heirs	Signature of the Legal Heirs
1	X
2	X
3	X

(#) = Name of the claimant/s

Signed before me

at: \_\_\_\_\_

on: \_\_\_\_\_

Signature of Notary

Official stamp & seal of the Notary & Regn. No.:

**Appendix-D**

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

[To be submitted in non-judicial stamp paper of Rupees 100/-]

**No-Objection Certificate from the Legal Heir(s)**

**Format of NOC from other Legal Heir(s) for Transmission of  
Securities in favour of the Claimant(s) wherein the Security Holder(s)  
is/are deceased, and NO NOMINATION has been registered**

**DECLARATION**

I/We, the legal heir(s) of late Mr. / Ms \_\_\_\_\_ (name of the deceased holder) declare as follows –

(i) That the above-named deceased holder was holding the following securities in his / her name as single holder:

Name of the Company	Folio No.	No. of securities held
1)		
2)		
3)		

(ii) That the deceased had died intestate on D D / M M / Y Y Y Y and without registering any nominee.

(iii) That the following Claimant(s) has/have applied for the transmission of the aforesaid securities:

Name of the Claimant(s)	Address and contact details	Age	Relationship with the deceased
1)			
2)			
3)			

(iv) That I / We are the legal heir(s) of the deceased holder, apart from the Claimant(s) who has/ have applied for transmission of the aforesaid securities and our details are as follows:

Name of the Legal Heir(s)	Address and contact details	Age	Relationship with the deceased
1)			
2)			
3)			

(v) I / we hereby declare that, I / we do not desire to make any claim in respect of the title to the aforesaid securities held by the deceased and I / we hereby wilfully relinquish & renounce all my /our rights in respect of the aforesaid securities and shall have no legal claim upon said securities in future.

(vi) Accordingly, I / we declare that I / we have NO OBJECTION WHATSOEVER in \_\_\_\_\_ State Bank of India transmitting the aforesaid securities in favour of the Claimant(s) Mr. / Ms. \_\_\_\_\_.

(vii) I / we hereby state that whatever is stated herein above are true to the best of my/our knowledge and nothing has been concealed therein.

Name(s) and Signature(s) of Legal Heir(s) who are Non – Claimant(s):

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

#### VERIFICATION

We hereby solemnly affirm and state that what is stated herein above is true to our knowledge and nothing has been concealed therein and that we are competent to contract and entitled to rights and benefits of the above-mentioned securities.

Solemnly affirmed at \_\_\_\_\_

Deponent(s) (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

## SURETY FORM

(Form to be filled if the market value of the security(ies) to be transmitted is more than Rs. 5 lakh and upto Rs. 10 lakh)

**Private & Confidential**

1.	Full Name of the Surety:				
2.	Date of Birth	Date	Month	Year	
3.	Age				
4.	PAN (attach self-attested copy)				
5.	Permanent Residential Address:				
6.*	Details of Employment	Name of the employer	Place of the employment	Annual salary	Other emoluments (if any)
7.*	Details of immovable property owned (absolute ownership)	Within Municipal limits	Address	Value	Annual rent realised
8.*	Details of Business Owned (absolutely in own name and not as partner)	Nature of Business and location	Annual Turnover		Annual Profits

(Signature of the Surety)

Date:

Full Name, Address  
(Branch Manager / Notary)

Signed in the presence of  
(Bank Manager / Notary)

Regd. No. of Notary : Notarial stamps	Official Seal of Magistrate / Notary
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\*(From Column No. 6-8, please fill the column as applicable to the surety)