## **TRANSMISSION REQUEST FORM**

(In case of death of the sole holder)

Application No.		Date D	D M M Y Y Y				
(Please fill all the details in <b>Block Letters</b> in English)							
To, NAVKAR SHARE & STOCK BROKERS PVT LTD 201/A SHIVALIK CORPORATE PARK B/H IOC PETROL PUMP SHIVRANJANI, SATELLITE AHMEDABAD – 380015.							
Dear Sir / Madam,							
PART - I: (whe	re nomination is recorded)						
I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (in case of Minor) request you to <b>transmit</b> the following securities due to the death of the sole account holder. Original Death Certificate / copy of Death Certificate (duly notarized / attested under seal by a Gazetted Officer) is attached herewith.  Name of the deceased BO:							
Account Number of DP ID	the deceased BO:	0 0 Client ID					
	1 2 0 2 6 8						
Kindly transmit all s	securities in the deceased BO's ac	count mentioned above to the BO	account mentioned below.				
Details of the Succe	Details of the Successor (s)						
Sr. No N	lame of the Successor (s)	DP ID	Client ID				
Details of Transn	nission						
Sr. Na	ame of the Security	ISIN	Quantity of securities to be transmitted				
Attach an annexure duly signed by the Nominee (s)/ Successor / Guardian of the successor or nominee (s) (in case of							
Minor), if the space above is insufficient.							
(Nominees / Successor / Guardian of successor or nominee(s) (in case of Minor))							
	Nominee(1) Successor/Guardian of successor/Nominee	Nominee(2) Successor/Guardian of successor/Nominee	Nominee(3) Successor/Guardian of successor/Nominee				
Name	1						

Signature

**PART – II :** (where nomination is not recorded)

## No Objection Statement from other heirs/successors who are non-applicants

1.	I/We, the deceased.	-	ned, resid	ding at				, am/a	are leg	jal hei	r(s) of	the said
2.	I/We do r whatsoeve who has/h	er in trans	smitting th	he said se	curities	in the	name(	s) of M	lr. / M	′s		objection
	In consider the herebyren future in regions of the system	unde ounce al espect of	r DP ID I my/our the afore	rights ex	C isting a	lient I	D		a	t my	reques	st, I/We
	Bank Mai	nager						Sig	ınatu	e of t	he lega	al heir
Ful	ll Name ar	nd Addre	ess of Ba	nk Mana	ger:							
	me dress	:										

## Note for all legal heirs/successors who are applicants / non-applicants:

Only one Transmission Request Form is to be submitted by claimants/non-claimants to the DP of the deceased BO for the transmission of securities wherein the intentions of the legal heirs/successors are collectively stipulated.

	======(Please tear here)====						
Acknowledgement Receipt Application No. Date: -							
	Date						
We hereby acknowledge receipt of the instructions for transmission of securities from the deceased BO's account to the account of the Nominee(s) / Successor / Guardian of the successor or nominee(s) (in case of Minor), as per details given on the transmission form.  Account number of the deceased BO							
DP ID	Client ID						
Successor BO Name(s)							
First/Sole Holder	Second Holder	Third Holder					
Documents Submitted							

Subject to verification.

**Depository Participants Seal & Signature**