TRADEJINI

TRANSMISSION FORM REQUEST

(In case of death of the sole holder)

Tradejini Financial Services Pvt Ltd
DP-ID: 76500
Sebi Regn. No. IN-DP-CDSL-681-2013
Corp. Off.: Vasavi Square, 2nd Floor
No-75/757 10th Main, 4th Block Jayanagar
Bangalore-560011 Ph:91-80-4020 4020
Email: dp@tradejini.com

Application No.		Date	D	D	M	M	Y	Y	Y	Y

(Please fill all the details in **Block Letters** in English) To,
Depository Participant Name Address

Dear Sir / Madam,

PART – I : (where nomination is recorded)

I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (in case of Minor) request you to transmit 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 the deceased BO:

DP ID									Client ID								

Kindly transmit all securities in the deceased BO's account mentioned above to the BO account mentioned below. Details of

the Successor (s)

Sr. No	Name of the Successor (s)	DP ID								Client ID							

Details of Transmission

Sr. No	Name 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			
Signature			

==========(Please tear here)==========

Acknowledgement Receipt

Application No. **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