

P SURYAKANT SHARE & STOCK BROKERS PVT.LTD.

D.P.OFFICE: A/ 305-308-403, Premium House, OPP. Gandhigram Railway St. Ellisbridge , Ahmedabad – 380 006.

TEL::079-30223350,26575972 MO.:9979883933 , FAX: 079-3000 0089 E- mail ID.: psdp.help@psjsecurities.com

REGD. OFFICE: Bld .No.5, 5th Floor , Rajabahadur Compound, B.S Marg , Mumbai – 400 001, TEL::022- 4220 5220 Website : www.psjsecurities.com

TRANSMISSION REQUEST FORM

(In case of death of the sole holder)

A 12 12	. NI.										-1-		1		1	-							
Application										L	ate												
•		etails in Blo			• ,																		
PART – I : Dear Sir / M		e nomina	tion is	recor	aea)																		
I/we, Nomir		uccessor/ G	uardian	of the	successo	r or no	minee	(s) (ir	n case	of Min	or) red	quest yo	ou to tra	nsmit t	he follo	owing s	securit	ies du	e to th	e dea	th		
of the sole a																							
herewith.			DO.																				
		e deceased Imber of the		ed BO														-					
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•		ccessor (s)	iii uie u	ecease	cu bo s at	ccount	mendo	iieu a	above	to the	bo acc	Louilt II	ientione	u below									
Sr. No		Name of t	he Suc	cessoi	r (s)		DP ID									Client ID							
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3																							
Detail	le of Tra	ansmissi	on				I		-1			I		1	ı			ļ	1	ļ			
Sr. No	ty	v ISIN									Quantity of securities to be transmitted												
1		-,										.,						_					
2							AS PER HOLDING																
3																							
4																							
Attach an a	nneviire (luly signed l	ny the No	omine	e (s)/ Suc	ressor	/ Guar	dian (of the	SUCCES	sor or	nomine	l e (s) (ir	rase n	f Minor	·) if th	e snac	e hov	e is inc	ufficie	nt		
(Nominees											301 01		.c (5) (II	i case o	1 1 111101), ii ai	c spac	.c bov	C 15 1115	anneic			
	Nominee(1) Successor/Guardian of						Nominee(2) uccessor/Guardian o								f Nominee(3) Successor/Guardian of								
	successor/Nominee					s	ucces	sor/	Nom	inee			successor/Nominee										
Name																							
Signature	€																						
PART – II	: (wher	e nomina	tion is	not i	ecorde	d)								1									
No Objection																							
1. I/We, the	e undersig	ned, residir	ng at	of +:+1	of the s	, a	m/are l	egal l	heir(s) of the	said o	lecease	ed.	-n-mi ll i	na tha	anid a	i+i.	aa in t	.ha nar	no(a)	~£ N/.		
2. I/We do	not desire	who ha	iy ciaiiii s/have o	nened	a henefic	aiu sec rial owi	ner acc	anu n onnt(iave i 's) iin	der Clie	.uon w nt ID	naisoe	vei iii u	a1151111U	ng une and Γ	Salu Si DP ID _	ecui itii	es III t	He Hall	ne(s)	OI MI		
3. In consid	deration of	f registration	of the	afores	aid securi	ities in	the clie	ent ac	count	of Mrs	. / Mrs	S	L	nder DI	_una 2 P ID		CI	lient I	D		—· а		
/ Mrswho has/have opened a beneficial owner account(s) under Client ID and DP ID 3. In consideration of registration of the aforesaid securities in the client account of Mrs. / Mrs under DP ID Client ID my request, I/We hereby renounce all my/our rights existing as well as those that may accrue to me/us in future in respect of the aforesaid securities. Signed in the presence of																							
Signed in t	the prese	nce of																					
													_										
Bank Mana													S	ignature of the legal heir									
Full Name a	and Addi	ame :								_													
Address : _ Note for al	II legal h	eirs/succe	ssors w	ho ar	e applica	ants /	non-a	oplica	ants:	Only o	ne Tr	ansmiss	sion Red	uest Fo	orm is	to be	subm	itted	by clai	mants	_ s/non		
claimants to	o the DP o	of the decea	sed BO f	or the	transmis	sion of	securit	ies w	hereir	n the in	tentior	ns of th	e legal h	eirs/su	ccessor	s are c	ollecti	vely s	tipulate	ed.			
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Application	n No.						AU	KIIOW	neuge	SIIICIII	receil	,,				D	ate: -						
We hereby a	acknowle													unt to t	he acco	ount of	the N	lomine	ee(s) /	Succe	essor		
/ Guardian o				s) (in c	ase of Mi	inor), a	s per d	etails	giver	on the	trans	mission	form.										
Account nur DP ID	mber of the	ne deceased 2	0 RO	7	4	8	Ι ο		0	Client	ıŊ												
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Successor BO Name(s) First/Sole Holder				Second Holder								rd Hold	er										
Document	ts Submitt	ed																					
Subject to v	verification	١.																					

Depository Participants Seal & Signature