

Where No Nominee is Registered



Tick (☐ → ☒) the boxes wherever applicable and fill in the details legibly.

Date

M

M

M

D

D

Y

Y

Y

Y

<City> - <Pincode

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[Name(s) of the legal heir(s)/claimant(s)], on my/our behalf. I/We, am/are furnishing the documents as mentioned below for transmission of the securities in our name:

S. No.	Document	Submitted	Remarks
1	Original Transmission Request Form (duly filled and signed).	☐	
2	Verifiable death certificate (as per SEBI circular dated July 23, 2026) of the deceased holder.	☐	
3	Copy of the Statement of account (SOA) if available or Original security certificate, where applicable.	☐	
4	If the claimant is a minor, copy of birth certificate or school leaving certificate or passport, or masked Aadhaar showing the last four digits and date of birth duly attested by the natural or legal guardian.	☐	
5	KYC of the Guardian (in case of nominee /claimant being a minor / of unsound mind.	☐	
6	Nomination Form or Nomination Opt-Out form	☐	
7	FATCA-CRS Declaration in a prescribed format, wherever applicable.	☐	
8	Signature of the Nominee/ Claimant shall be attested only by a Notary Public or a Judicial Magistrate First Class (JMFC) or banker attestation of signature in their letter head with claimant name, PAN, address as per bank records and attested officer's Name, Emp. No., Designation, Branch name Branch Address.	☐	
9	Document evidencing relationship between the claimant and the deceased security holder (applicable only where claimant is parent, spouse, child or parent-in-law).	☐	
10	Transmission Request Form-cum-Undertaking on plain paper as per specified format.	☐	

☐ KYC Acknowledgment attached ☐ KYC form attached

Tax Status: ☐ Resident Individual ☐ Resident Minor (through Guardian) ☐ NRI ☐ PIO / OCI ☐ Others (please specify)

Mobile No.									Tel. No.	STD -									
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Email Address

Above email belongs to: ☐ Self ☐ Spouse ☐ Dependent parent(s) ☐ Son ☐ Daughter

Address Line 1																
Address Line 2																
City:					State					PIN						

Bank Name																						
Account No.											11-digit IFSC											
A/c. Type (✓)	☐ SB	☐ Current	☐ NRO	☐ NRE	☐ FCNR	9-digit MICR No.																
Name of bank branch																						
City																						
State																PIN						

Please attach & tick (✓) ☐ Cancelled cheque with claimant's name printed OR ☐ Claimant's Bank Statement/Passbook

PART E - DECLARATION AND RESPONSIBILITY CLAUSE

I/We confirm that the above documents have been submitted and that the information, facts, and particulars furnished by me/us in this undertaking and the accompanying documents are true, correct, and complete to the best of my/our knowledge and belief, and no material information / fact has been concealed or misrepresented therein.

I/We further undertake and confirm that in the event any information, declaration, or document furnished by me/us herein is subsequently found to be false, incorrect, incomplete, forged, or fraudulent, the responsibility and liability for resolving the resultant discrepancy, dispute, or claim - including any consequential loss, cost, or legal action - shall rest solely and exclusively with me / us, the claimant(s), and I/We shall keep the Company/ AMC / RTA / Depository Participant / Depository fully indemnified and harmless against any loss, claim, demand, or liability arising directly or indirectly therefrom. I/We also knowledge to share the above demise information to the regulatory authorities or statutory authorities or to the entities entrusted by the regulatory/statutory authorities from time to time for onward circulation/dissemination to all applicable regulated entities.

Claimant(s) Signature														
Place						Date	D	D	M	M	Y	Y	Y	Y

Note: Where any person required to sign this document is unable to sign, he/she may affix his/her left thumb impression in lieu of signature.

ANNEXURE-A: PROOF OF RELATIONSHIP

A self-attested copy of the proof of relationship referred to above is enclosed herewith:

Tick against the document* given as proof of relationship

- ☐ Birth certificate which lists the parent's name
- ☐ School leaving certificate
- ☐ School records/service records mentioning the parent's name
- ☐ Passport
- ☐ Marriage Certificate
- ☐ Ration Card
- ☐ Voter ID
- ☐ Aadhar
- ☐ Permanent Account Number
- ☐ Will
- ☐ Legal Heirship Certificate
- ☐ Court Decree
- ☐ Letter of Administration
- ☐ Succession Certificate
- ☐ Probate of Will (where available)

*In case none of the above documents are available, a notarized Affidavit in the format given below

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AFFIDAVIT

To be executed on Non-Judicial Stamp Paper of appropriate value (as applicable in the relevant State where the claimant resides) and notarized / attested by a Gazetted Officer or Judicial Magistrate First Class (JMFC)

I/We, _____ Son/
daughter/legal heir of _____
residing at _____

do hereby solemnly affirm and state on oath as follows.

That Mr. / Mrs. _____ ("Name
of the Deceased Holder") held the following securities:

S. No.	Name of Mutual Fund Scheme / Company	Folio No. / Client ID / DP ID / Certificate No.	No. of Units / Securities Held	Certificate Number (for physical shares / securities)	Distinctive No. (if applicable)
1				NA	From: NA To: NA
2				NA	From: NA To: NA
3				NA	From: NA To: NA

That the aforesaid deceased holder died leaving behind the following persons as the legal heirs without registering any nominee:

S. No.	Name of Legal Heir(s)	Address & Contact Details	Age	Relationship with the Deceased
1				
2				
3				

That among the aforesaid legal heirs, Master/ Kumari. _____ aged _____

years is a minor and is being represented by Mr./Ms. _____

("Name of the Guardian") being his / her father / mother / legal guardian.

Signature of the Deponent: X _____

Note: Where any person required to sign this document is unable to sign, he/she may affix his/her left thumb impression in lieu of signature.

VERIFICATION

I /We hereby solemnly affirm and state that what is stated herein above is true and correct and nothing has been concealed therein and that we 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 _____

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

* ~~strikeout~~ whichever is not applicable.

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