

NOMINATION FORM

Trading and Demat Accounts

S.T. Coch		ARKET (INDIA) LTD. uilding, Veekshanam Roa	FORM FOR NOMINATION , (To be filled in by individual applying singly or jointly)									
Date		UCC/	OP ID			Client ID						
I/We wish to make a nomination. [As per details given below]												
Nomination Details												
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.												
Nomination can be made upto three nominees in the account.			Details of 1 st Nominee			Details of 2 nd	Nominee	Details of 3 rd Nominee				
1	Name of the nor	minee(s) (Mr./Ms.)										
2	Share of Equally each Nominee [if not equally,				%		%		%			
	Nominee	please specify percentage]	Any odd lot after division shall be transferred to the first nominee mentioned in the form.									
3	Relationship With the Applicant (If Any)											
4	Address of Nominee(s) City / Place: State & Country:											
		PIN Code										
5 Mobile / Telephone No. of nominee(s)												
6	6 Email ID of nominee(s)											
7	Nominee Identification details – [Please tick any one of following and attach copy of same]											
	☐ Photograph & S☐ Aadhaar ☐ account no. ☐ Demat Account											
Sr. Nos. 8 -14 should be filled only if nominee(s) is a minor:												
8	Date of Birth {in case of minor nominee(s)}											
9	Name of Guardian (Mr./Ms.) {in case of minor nominee(s) }											
10	Address of Gua	rdian(s)										

Signature(s) of Holders:(2)......(3)

	City / Place: State & Country:							
	PIN Code							
11	Mobile / Telephone no. of Guardian							
12	Email ID of Guardian							
13	Relationship of Guardian with nominee							
14	Guardian Identification details – [Please tick any one of following and provide details of same]							
	□ Photograph & Signature □ PAN □ Aadhaar Saving Bank account no. □ Proof of Identity □ Demat Account ID							
		er(s)			Signature(s) of	holder*		
Sole	e / First Holder (Mr./Ms.)							
Se	cond Holder (Mr./Ms.)							
Th	ird Holder (Mr./Ms.)							

Note:

This nomination shall supersede any prior nomination made by the account holder(s), if any.

The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

Please attach valid ID Proof of the Nominee(s) with this request form

^{*} Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature