Nomination Form

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+ <u>+</u> +						FORM FOR NOMINATION																					
						(To be filled in by individual applying singly or jointly)																					
KNA SHARE BROKERS 405,Todi Chambers,					s																						
405	,Todi Chambers,																										
	l Bazar Street, Kolk	Y	Y	DP I	m	1	2	0	7	1	2 0	0		Client ID		T	Т					T					
Date D D M M Y						I I	DFI	D	I	2	v	ľ	1	20	V		Chefft IL										
	UCC Code:																										
I/We wish to make a nomination. [As per details given below]																											
N	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 up to three nominees in the account.					Details of 1st Nominee					Details of 2 nd Nominee							Details of 3 rd Nominee										
1	Name of the nomir	nee(s) (M	Ir./Ms.)																								
2	Share of Equally each Nominee				%							%							%								
			specify	-	Any odd lot after division shall be transferred to the first nominee mentioned in the form.																						
3	Relationship With Any)																										
4	4 Address of Nominee(s)																										
	City / Place: State & Country:																										
			PIN Cod																								
5	5 Mobile / Telephone No. of nominee(s)																					1					
6	Email ID of nomin	ee(s)																									
7	Nominee Identifi [Please tick any or provide details of sa Photograph & Signa	ne of fol ame]					minee pho cross signa							Vomin across					Nominee photo & across signature					:			
Sr. I	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 Guardian(s)																											

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	City / Place: State & Country:					
	State & Country.					1
		PIN Code				
11 Mobile / Telephone no. of Guardian						
12	Email ID of Gua	rdian				
13	Relationship of C nominee	Guardian with				
14	Guardian Identif [Please tick any and provide details	one of following				
	Account no. Pro-	of of Identity				
			Name(s) of holder(s)		Signature(s) of hold	ler*
Sole / First Holder (Mr./Ms.)						
Se	econd Holder (Mr./M	vIs.)				
Third Holder (Mr./Ms.)						

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

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)