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# TRANSMISSION REQUEST FORM

(IN CASE OF DEATH OF THE SOLE HOLDER)

	Application No.		Date (dd/mm/yyyy)								
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(Please fill all the details in Block Letters in English)

Dear Sir / Madam,

**PART – I** : (where nomination is recorded)

I, Nominee / Successor/ Guardian of the successor or nominee (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	of the c	lecease	d BO									
Accour	nt Numl	ber of t	he dece	eased B	0							
DP ID	1	2	0	8	1	8	0	Client ID				

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

Succes	sor BO	Accour	nt Num	ber							
DP ID							Client ID				
Name											

#### Details of Transmission

Sr. No.	Name of the Security	ISIN	Quantity of securities to be transmitted
1.			
2.			
3.			
4.			

Attach an annexure duly signed by the Nominee / Successor / Guardian of the successor or nominee (in case of Minor), if the space above is insufficient.

	First / Sole Holder	Second Holder	Third Holder
Name			
Signature			

(Nominees / Successor / Guardian of successor or nominee (in case of Minor))

#### **PART – II** : (where nomination is not recorded)

### No Objection Statement from other heirs/successors who are non-applicants

- 1. I/We, the undersigned, residing at\_\_\_\_\_\_, am/are legal heir(s) of the said deceased.
- I/We do not desire to make any claim of title of the said securities and have no objection whatsoever in transmitting the said securities in the name(s) of Mr. / Mrs. \_\_\_\_\_\_\_\_\_ who has/have opened a beneficial owner account(s) under Client ID \_\_\_\_\_\_ and DP ID \_\_\_\_\_\_.

## Signed in the presence of:

(Bank Manager)

(Signature of the legal heir)

Full Name of the Bank Manager	
Address of the Bank Manager	

#### Note for all legal heirs/successors who are applicants / non-applicants:

Only one Transmission Request Form is to be submitted by claimants/non-claimants to the DP of the deceased BO for the transmission of securities wherein the intentions of the legal heirs/successors are collectively stipulated.

	 (Please Tear Here)					
	Acknowledgement Rece	ipt				
Application No.	Date (dd/mm/yyyy)					

We hereby acknowledge receipt of the instructions for transmission of securities from the deceased BO's account to the account of the Nominee / Successor / Guardian of the successor or nominee (in case of Minor), as per details given on the transmission form.

Account number of the deceased BO:

DP ID	1	2	0	8	1	8	0	Client ID					
Successor BO Name(s)       First / Sole Holder     Second Holder     Third Holder													
First / Sole Holder Second Holder Third Holder													
Docum	ents sı	Ibmitte	d -										