

SMS ALERT FACILITY. Refer to Terms & Conditions given as **Annexure - 2.4** MOBILE NO.+91

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[Mandatory, if you are giving Power of Attorney (POA)]

(If POA is not granted & you do not wish to avail of this facility, cancel this option).

I / We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

EASI

To register for Easi please visit our website www.cdslindia.com

Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.

OTHER DETAILS

GROSS ANNUAL INCOME DETAILS (Income Range per annum)

- UP TO RS. 1 LAC RS. 1 LAC - RS. 5 LAC RS. 5 LAC - RS. 10 LAC
 RS. 10 LAC - RS. 25 LAC MORE THAN RS. 25 LAC

NET WORTH AS ON DATE (NOT OLDER THAN 1 YEAR)

VALUE IN Rs. _____

DATE (DD/MM/YYYY)

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Occupation Type* S-Service (Private Sector Public Sector Government Sector)
 Student Professional Self Employed Retired Housewife
 B-Business Agriculturist O-Others (Please Specify) _____

AFFILIATIONS: POLITICALLY EXPOSED PERSON (PEP) RELATED TO A POLITICALLY EXPOSED PERSON (RPEP)

ANY OTHER INFORMATION:

FIRST/SOLE HOLDER SIGNATURE [9]

SECOND HOLDER SIGNATURE

THIRD HOLDER SIGNATURE



X

Nomination Form
[Annexure A to SEBI circular No. SEBI/HO/OIAE/OIAE_IAD-3/P/CIR/2026/12676
dated MAY 29, 2026]

TM / DP									FORM FOR NOMINATION								
Upstox Securities Private Limited 30th Floor, Sunshine Tower, Senapati Bapat Marg, Dadar (W), Mumbai - 400 013									(To be filled in by individual applying singly or jointly)								
DATE	D	D	M	M	Y	Y	Y	Y									
I/We wish to make a nomination. [As per details given below]																	
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 demise, as trustee and on behalf of my / our legal heir(s)																	
Nomination Details																	
NOMINEE	NAME OF NOMINEE *							SHARE OF NOMINEE % (equal share if % is not specified)				RELATIONSHIP with the applicant*					
Nominee 1																	
Nominee 2																	
Nominee 3																	

Any odd lot after division shall be transferred to the first nominee mentioned in the form.
The aforesaid details shall be optionally provide for the Guardian, in case of nominee is a minor.

Fields marked with (*) asterisk indicates Mandatory details

1) I / We want the details of my / our nominee to be printed in the statement of holding or statement of account, provided to me/us by the DP as follows; (please tick, as appropriate)

Name of nominee(s)

Nomination: Yes / No.

NOMINEE	MOBILE NUMBER AND E-MAIL (Please note that the DP/MF RTA will be able to reach out to your nominee if you provide the contact details)	IDENTITY NUMBER (Aadhaar last 4 digits, PAN, Driving Licence, Passport)	D.O.B. OF NOMINEE*	GUARDIAN
Nominee 1				
Nominee 2				
Nominee 3				

2) Signature(s) - As per the mode of holding in demat account(s)

Name(s) of Holder(s)	Signature(s) of holder/thumb impression
Sole / First Holder (Mr. / Ms.)	
Second Holder (Mr. / Ms.)	
Third Holder (Mr. / Ms.)	

If nomination is submitted:

Online: Validate through Digital Signature Certificate or Aadhaar-based e-sign or by using any other e-sign facility recognized under Information Technology Act, 2000 or two factor authentication (2FA) in which one of the factors shall be a One-Time Password (OTP) sent to the registered mobile number and email address.

Physical / Offline: Wet signature (signature of witness shall not be required). However, if thumb impression (instead of wet signature) is affixed, then the same shall be witnessed by two persons and details of such witness (name and address) shall be fully provided in this form

Note:

- Investors can provide, changes or cancel nominations any number of times.
- The signature of all joint holders shall be obtained for providing / changing nominations regardless of mode of operations.
- The nomination shall supersede any prior nomination made by the investor(s), if any.
- Investors can change nomination any number of times.
- Investor have the right to receive acknowledgement of the nomination form for each instance of nomination / subsequent change.

Declaration Form for opting out of nomination
[Annexure B to SEBI circular No. SEBI/HO/OIAE/OIAE_IAD-3/P/
CIR/2026/12676 dated MAY 29, 2026]

To	Date	D	D	M	M	Y	Y	Y	Y
Trading Member/Participant's Name	Upstox Securities Private Limited								
Trading Member/Participant's Address	30th Floor, Sunshine Tower, Senapati Bapat Marg, Dadar (W), Mumbai - 400 013								
UCC/DP ID									
Client ID (only for Demat account)									
<p>I hereby confirm that I do not wish to appoint any nominee(s) to my demat account/ mutual fund folio at this point of time. I understand that --</p> <p>(i) The nomination helps to quickly identify the person for transfer of securities and helps in faster and smoother transmission of my securities to my legal heir(s) after my demise.</p> <p>(ii) In the absence of a nomination, my legal heir(s) may require the submission of certain additional legal or court-issued documents which may delay the process of transmission securities to my legal heir(s).</p> <p>(iii) If no claim is made on the account/folio for a prolonged period after my demise, the holdings may be treated as unclaimed assets and they may be transferred to Investor Education and protection Fund Authority (IEPF) in accordance with the applicable regulatory framework.</p> <p>I confirm that I have understood above implications and that my decision to opt out of nomination is voluntary.</p>									
Name and Signature of Holder(s)*									
<p>1. _____ 2. _____ 3. _____</p>									
*Witness Details									

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