

Nomination Form – Demat Account

(To be filled & signed by all holders in the demat account)

Prabhudas Lilladher Private Limited
 3rd Floor, Sadhana House, 570, P.B. Marg,
 Behind Mahindra Tower, Worli,
 Mumbai - 400018, Maharashtra, India.

Date

DP ID Client ID UCC

Nomination Details

I / We hereby nominate the following person(s) who shall receive all the assets held in my / our account / folio in the event of my / our demise, as trustee and on behalf of my / our legal heir(s)*

1st Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee
 (If the nominee is minor)

2nd Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee
 (If the nominee is minor)

3rd Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee
 (If the nominee is minor)

4th Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee

(If the nominee is minor)

5th Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee

(If the nominee is minor)

6th Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee

(If the nominee is minor)

7th Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee

(If the nominee is minor)

8th Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee

(If the nominee is minor)

9th Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee

(If the nominee is minor)

10th Nominee Details

Mandatory Details:

Name of Nominee

Postal Address

Relationship with the Applicant Share of Nominee (%)** %

Mobile No. Identity Number ***

E-mail ID

Additional Details****

Guardian Date of Birth Nominee

(If the nominee is minor)

*Joint Accounts:

Event	Transmission of Account / Folio to
Demise of one or more joint holder(s)	Surviving holder(s) through name deletion The surviving holder(s) shall inherit the assets as owners
Demise of all joint holders simultaneously - having nominee	Nominee
Demise of all joint holders simultaneously - not having nominee	Legal heir(s) of the youngest holder

** if % is not specified, then the assets shall be distributed equally amongst all the nominees (see table in 'Transmission aspects').

*** Provide only number: PAN or Driving Licence or Aadhaar (last 4). Copy of the document is not required.

**** to be furnished only in following conditions / circumstances:

- Date of Birth (DOB): please provide, only if the nominee is minor.
- Guardian: It is optional for you to provide, if the nominee is minor.

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

☐ Name of nominee(s) ☐ Nomination: Yes / No

2) I hereby authorize _____ (Nominee number _____) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5# of the circular. He / She is authorized to encash my assets up to _____% of assets in the account / folio or ₹ _____.

(Strike off portions that are not relevant)

#3.5 The regulated entity shall provide the investors having single holding / account / folio, the option to;

- a) empower, any one of the nominees (excluding minor nominee) to operate the investor's account / folio, if the investor is physical incapacitated, but still has the capacity to contract,
- b) specify either the percentage or absolute value of assets in the account/ folio that can be encashed by such nominee,
- c) change such mandate any number of times without any restriction.

3. This nomination shall supersede any prior nomination made by me / us, if any.

	Name(s) of holder	Signature(s) of holder	Witness Signature*
Sole / First Holder (Mr. / Ms. / Mrs.)			
Second Holder (Mr. / Ms. / Mrs.)			
Third Holder (Mr. / Ms. / Mrs.)			

*Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

Rights, Entitlement and Obligation of the Investor and Nominee:

- If you are opening a new demat account / MF folios, you have to provide nomination. Otherwise, you have to follow procedure as per 3.10 ## of this circular.
- You can make nomination or change nominee any number of times without any restriction.
- You are entitled to receive acknowledgement from the AMC / DP for each instance of providing or changing nomination.
- Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominees or for each nominee(s) to open separate single account / folio.
- In case all your nominees do not claim the assets from the AMC / DP, then the residual unclaimed asset shall continue to be with the AMC in case of MF units and with the concerned Depository in case of Demat account.
- You have the option to designate any one of your nominees to operate your account / folio, in case of your physical incapacitation. This mandate can be changed any time you choose.
- The signatories for this nomination form in joint folios / account, shall be the same as that of your joint MF folio / demat account. i.e.
 - 'Either or Survivor' Folios / Accounts - any one of the holder can sign
 - 'Jointly' Folios / Accounts - both holders have to sign

Regulated entities shall have the following online mechanism for existing and new investors, who want to opt-out of nomination;

- a. The online facility shall provide a mechanism for the investor to affirm their choice, in case of opting out of nomination. Upon choosing this option, the investor shall get an OTP
- b. Upon submitting this OTP, the investor shall have a choice to either
 - furnish the unique acknowledgement number of having submitted the declaration form to opt-out in physical mode with wet signature at any of the office of the concerned regulated entity
 - or
 - capture their opting-out through video recording by the regulated entity as per extant norms in this regard

Transmission Aspects

- AMCs / DPs shall transmit the folio / account to the nominee(s) upon receipt of 1) copy of death certificate and 2) completion / updation of KYC of the nominee(s). The nominee is not required to provide affidavits, indemnities, undertakings, attestations or notarization.
- Nominee(s) shall extend all possible co-operation to transfer the assets to the legal heir(s) of the deceased investor. In this regard, no dispute shall lie against the AMC / DP.
- In case of multiple nominees, the assets shall be distributed pro-rata to the surviving nominees, as illustrated below.

% share as specified by investor at the time of nomination		% assets to be apportioned to surviving nominees upon demise of investor and nominee 'A'			
Nominee	% share	Nominee	% initial Share	% of A's share to be apportioned	Total % share
A	60%	A	0	0	0
B	30%	B	30%	45%	75%
C	10%	C	10%	15%	25%
Total	100%	-	40%	60%	100%

For PL-HO Office use only:

Demat A/c Nomination
Registration No.

Registration Date