

NOMINATION FROM FOR TRADING AND DEMAT ACCOUNTS (To be filled in by individual applying singly or jointly)

Religare Broking Limited

Club 125 (Tower A) A-3,4 & 5, Sector- 125, Noida-201301 (U.P.)

Ph.: 0120-4866666 Fax: 0120-4866275 E-mail : wecare@religareonline.com Website : www.religareonline.com

N	OMINATION DETA	AIL .			PART - 1											
	Nomination Regi	stration No. :						Da	te:) D		M	ΥY	Y	Υ	
	UCC (Trading Code)		DP ID Client ID													
	I/We wish to mak	ce a nomination	n. [As per de	[As per details given below]												
			nomination and do hereby nominate the following person(s) who shall receive all the assets held i event of my/our death.													
	Nomination can three nominees in	be made upto n the account.	Details of	of 1st No	ominee	Deta	ils of 2	nd No	minee		Detai	ls of 3	rd N	omin	ee	
1	Name of the nomin (Mr. / Ms.)	nee(s)														
2	Share of each Nor	minee			%					%					%	
	Equally [If not equally, please specify percentage]		Any odd lot after division shall be transferred to the first nominee mentioned in the for												m.	
3	Relationship With the Applicant (If any)															
4	Address of Nomin	ee(s)														
		City/Place														
		State														
		Pin Code														
		Country														
	Æ				A						6	À				

5	Mobile/Telephone No. of Nominee(s)#								
6	Email ID of Nominee(s)#								
7	Nominee Identification details#:	Photograph of Photograph of	Photograph of						
	[Please tick any one of following and provide details of same]	1st nominee 2nd nominee	3rd nominee						
	☐ Photograph & Signature	Signature of Nominee Signature of Nominee Signature of Nominee	Signature of Nominee						
	Signature	Signature of Norman Signature of Norman across photograph across photograph across photograph across photograph across photograph	Signature of Norman across photograph Signature of 3rd nominee						
	Gigilatare		Signature of ord norminoe						
	PAN								
	Aadhaar	x x x x x x x x x x x x x x x x x x x	x x x x x x x x x						
	Proof of Identity	DP ID DP ID	DP ID						
	☐ Demat Account ID	Client ID Client ID	Client ID						
	Saving Bank Account No.								
		Name(s) of Holder(s)	Signature(s) of Holder						
S	Sole/First Holder (Mr./Ms.)								
S	Second Holder (Mr./Ms.)		·A						
T	hird Holder (Mr./Ms.)		A						
		Signature of Witness for Nomination*							
١	lame of the Witness	Address	Signature of Witness						

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

Sr. Nos. 8-14 should be filled only if nominee(s) is a minor: PART-2																												
8	Date of Birth (in case of r	minor nominee(s)}	D D	M	M	Υ	Υ	Υ	Υ] [M	M		/	Υ	Υ	Υ) [M	M	Υ	Υ	Υ	Υ
9	9 Name of Guardian (Mr. / Ms.) {in case of minor nominee(s)}			•							•				•	'			•			'	'	'		•		
10	10 Address of Guardian(s)																											
	_																											
		City/Place																										
		State																										
		Pin Code																										
		Country				•																		·				
11	Mobile/Telephone No	o. of Guardian#																										
12	Email ID of Guardia	an [#]													-													
13	Relationship of Guardia	n with Nominee																										
14 Guardian Identification details#:										Г																		
	[Please tick any one of following and provide details of same]			Photograph of Guardian						Photograph of Guardian							Photograph of Guardian											
	☐ Photograph & Signature			Signature of Guardian across photograph					Signature of Guardian across photograph						Signature of Guardian across photograph													
		Signature		Signature of 1st nominee						Signature of 2nd nominee								Signature of 3rd nominee										
	PAN									_															T			
Aadhaar		ххх	(x	х	x	x			х	х	x	x >	κx	Х	х				х	х	х	x	x :	х				
	☐ Proof of Identity													_						_								
	☐ Demat Account ID		DP ID Client I	D				+			P II lien			+				+	+	_	P ID lient				+		+	+
	☐ Saving Bank Acc	ount No.			_																							
	<u> </u>		Name(s) of Holder(s)										Signature(s) of Holder															
Sole/First Holder (Mr./Ms.)													A															
Second Holder (Mr./Ms.)													Lo															
Third Holder (Mr./Ms.)													L															
		Signature of Witness for Nomination*																										
Name of the Witness			Address										Signature of Witness															

^{*}Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature. # Optional Fields (Information required at Serial nos. 5,6,7,11,12 & 14 is not mandatory).