

**TRANSMISSION REQUEST FORM**  
(In case of death of the sole holder)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
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(Please fill all the details in **Block Letters** in English)

To,

**Almondz Global Securities Ltd**

**F - 33 / 3, Okhla Phase - II**

**New Delhi - 110020**

Dear Sir / Madam,

I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (in case the claimant is a Minor- Date of Birth of the minor\*) Relationship with the 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.

**\*Please attach relevant proof**

Name of the deceased BO:

Account Number of the deceased BO:

DP ID										Client ID									
Date of the Deceased Sole Holder																			

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

Details of the Successor (s)

Sr. No	Name of the Successor (s)/Nominee / Legal Heir/Successor to the Estate of the deceased / Administrator of the Estate of the deceased	DP ID	Client ID

Details of Transmission				
Sr. No	Name of the Security	ISIN	Quantity of securities to be transmitted	Percentage

Attach an annexure duly signed by the Nominee(s)/ Successor / Guardian of the successor or nominee(s) (in case of Minor),

if the space above is insufficient.

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

	<b>Nominee(1) Successor/Guardian of successor/Nominee</b>	<b>Nominee(2) Successor/Guardian of successor/Nominee</b>	<b>Nominee(3) Successor/Guardian of successor/Nominee</b>
Name			
Signature			

===== (Please tear here) =====  
**Acknowledgement Receipt**

**Application No.**

**Date: -**

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

Account number of the deceased BO

DP ID											Client ID								
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<b>Successor BO Name(s)</b>		
<b>First/Sole Holder</b>	<b>Second Holder</b>	<b>Third Holder</b>
Documents Submitted		

Subject to verification.

**Depository Participants Seal & Signature**