

Request for Transmission of Securities by Nominee or Legal Heir (For Transmission of securities on death of the Sole holder)

Annexure C ISR - 5

To: The Listed Issuer/RTA, (Address) (Name of the Listed Issuer/RTA) Name of the Claimant(s) Mr./Ms. Name of the Guardian ☐ in case the claimant is a minor → Date of Birth of the minor* Mr./Ms Relationship with Minor:

Father ☐ Mother ☐ Court Appointed Guardian* [Multiple PAN may be entered] PAN (Claimant(s)/Guardian): ____ | __ KYC Acknowledgment attached

KYC form attached Tax Status: ☐ Resident Individual ☐ Resident Minor (through Guardian) ☐ NRI ☐ PIO ☐ Others (please specify) Please attach relevant proof I/We, the claimant(s) named hereinabove, hereby inform you about the demise of the below mentioned Securities Holder(s) and request you to transmit the securities held by the deceased holder(s) in my/our favour in my/our capacity as -☐ Legal Heir ☐ Successor to the Estate of the deceased ■ Nominee ☐ Administrator of the Estate of the deceased Name of the deceased holder(s) Date of demise** DD / MM / YYYY 1) 2) 3)

Securities(s) & Folio(s) in respect of which Transmission of securities is being requested

		No. of Securities	% of
Name of the Company	Folio No	. Securities	Claime
1)			
2)			
3)			
4)			

@As per Nomination OR as per the Will/Probate/Succession Certificate/Letter of Administration/ Legal Heirship Certificate (or its equivalent certificate)/ Court Decree, if applicable.

Contact details of the Claimant (s) [Provision for multiple entries may be made]

Mobile No.+91	Tel. No. STD -		
Email Address			

^{**}Please attach certified copy of Death Certificate.



Address (Please note that address will be updated as per address on KYC form / KYC Registration Agency records)

Address Line 1		
Address Line 2		
City:	State PIN	
Bank Account Details of the	e Claimant	
Bank Name		
Account No.		11-digit IFSC
A/c. Type (√) □SB □Current	□NRO □NRE □FCNR	9-digit MICR No.
Name of bank branch		
City PIN		
	elled cheque with claimant's na July attested by the Bank Manag	•
Occupation Private Sect	(Please tick√ whichever is app or Service □Public Sector Se	,
□Business □Professional	_	
□ Agriculturist □ Retired □ H	lome Maker □ Student □Fore: (Please specify)	x Dealer Others
The Claimant is □ a Politica Person □ Neither (Not appli	ılly Exposed Person □ Relaticable)	ted to a Politically Exposed
Gross Annual Income (₹) 25 Lacs-1 crore □ >1 crore	□Below 1 Lac □1-5 Lacs □	5-10 Lacs
FATCA and CRS informatio		
Country of Birth		Place of Birth
Nationality	, country other than India?	□Vee □Ne
Are you a tax resident of any	e countries in which you are res	∃Yes □No ident for tax purposes and the
	cation Number and its identifica	
Country	Tax-Payer Identification Numb	
	<u>*</u>	



√ one of the options below)		
th to make a nomination. (Ple	ase tick√ if you do	o not wish to
ttached Nomination Form to		
or is not allowed to make a no	mination on behalf	of the minor
rewith all the relevant / require	ed documents as in	dicated in the attached
information provided above	is true and corre	ect to the best of my
undertake	to	keep (Name of the
•		e above information in
hereby		authorize (Name of the
Name of the Company) to a	ny governmental	_ ded by me/us including or statutory or judicial
Signatur	e of Claimant(s)	
ficate of the deceased holder cate (in case the Claimant is a of Claimant / Guardian ent OR ant vith claimant's name printed k	a minor) OR □ Clai	imant's Bank
	e a nomination and hereby not ttached Nomination Form to of my / our death. In the claim of the Company of the Name of the Company) to a serequired by law without any of the Claim of Cla	e a nomination and hereby nominate the personattached Nomination Form to receive the secur of my / our death. To ris not allowed to make a nomination on behalf atture of the Claimant(s) The rewith all the relevant / required documents as in the remark. The information provided above is true and correspondent to the reake to provide any other additional information hereby A to provide/ share any of the information provided above is required by law without any obligation of inform some of the Company) to any governmental as required by law without any obligation of inform Signature of Claimant(s) Final Provide of the deceased holder cate (in case the Claimant is a minor) of Claimant / Guardian the took and the company of the claimant is a minor) of Claimant / Guardian the company of the claimant is a minor of Claimant / Guardian the company of the claimant is a minor of Claimant / Guardian the company of the claimant is a minor of Claimant / Guardian the company of the claimant is a minor of Claimant / Guardian the company of the claimant is a minor of Claimant / Guardian the claimant is a minor of Claimant / Guardian the claimant is name printed OR the claiman

*Note: For transmission service requests, Form ISR-4 as per SEBI circular SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2022/8 dated January 25, 2022 will not be required.

Individual Affidavits to be given by ALL the Legal Heirs OR Legal Heirs named in Succession Certificate*/ Probate of Will*/ Will*/ Letter of Administration*/ Legal Heirship Certificate*(or its equivalent certificate)*/Court Decree*

(For Transmission of securities on death of Sole Holder where NO NOMINATION has been registered)

Each Deponent (legal heir) shall sign separate Affidavits.

(To be executed on a non-judicial stamp of appropriate value and Notarized)

Companded at the deceased hold will/ Letter of Accession Certif	der died <i>intestate</i> leave Succession Certificate / a e time of his/her death Or der died leaving behind Administration dated	ring behind hin ate/ Legal He ccording to the and without red the following and w	n/her, the foirship Certife Law of Ingestering and persons as without regist	ollowing persons as the ficate (or its equivalent testate Succession by nominee. * the legatees as pertering any nominee. *
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irs as per the Decree dated _ governed at the deceased hold Will/ Letter of Accession Certif	e Succession Certificate	ate/ Legal He ccording to the and without red the following and w	irship Certife Law of In egistering ar persons as rithout regist	ficate(or its equivalent etestate Succession by my nominee. * the legatees as per tering any nominee. *
	ivalent certificate)*/ C	Court Decree*	is attached	Relation with the
ir(s)	Address & Conta	————	Age	Deceased
nd is being repr				
		aforesaid legal heirs, Master/Kumnd is being represented by Mr./Ms	Address & Contact Details Address & Contact Details Aforesaid legal heirs, Master/Kum aforesaid legal heirs, Master/Kum and is being represented by Mr./Ms ardian.	Address & Contact Details Age Age Age Age Age Age Age Age

VERIFICATION

I hereby solemnly affirm and state that what is stated herein above is true and correct and nothing has been concealed therein and that we I am competent to contract and entitled to rights and benefits of the abovementioned securities of the deceased.

Solemnly affirmed at	Signature of the Deponent:
Signed before me	
Place:	
Date :	
	Signature of Notary with Official Seal of Notary& Regn. No.

Note: To be executed in the presence of a Public Notary / Gazetted Officer

Bond of Indemnity to be furnished jointly by all Legal Heir(s) including the Claimant(s) (To be submitted on Non-judicial Stamp Paper of appropriate value) [For Transmission of Securities on death of Sole Securities' Holder, where no nomination has been registered]

L			,	
I/We do hereby so	lemnly affirm and sta	ate on oath as follow	/S:	

: паt IVI 	r. /Ms	was	holding the followir	ig securities:	
S.No	Name of the Company	Certificate No.	Distinctive No.	Folio No.	No. of securities
1.					
2. 3.					
4.					
5.					
nomine	ne aforesaid deceased lee, leaving behind him/he intestate succession app	r the following pers	ons as the only sur	viving legal l	neirs, according to t
S.No	Name of the Legal Heir(s)	Address & Co	ontact Details	Age	Relation with the Deceased
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
ehind	e aforesaid deceased hold him/her the following pentary succession. Name of the Legal Heir(s)		nly surviving legal		•
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

		_		and deponent(s) herein has/have,approached
			•	e Company/RTA) with a request to transmit the I Mr. /Ms, or
				a Succession Certificate/ Probate of Will / Letter of
•	•	·		ute an indemnity as is herein contained and on relying
		-	by us, believing the	
				sfer/transmit the above said securities to the name of
I/We here	by jointly	y and seve	rely agree and und	ertake to indemnify and keep indemnified, saved
defended,	harmless	s, [Name of	the Company/ Issuer	and any RTA] and its successors and assigns for al
time herea	after agai	nst all losse	es, costs, claims, act	ions, demands, risks, charges, expenses, damages
		•		by reason of transferring the said securities as hereir
				ned Mr./Ms.
	J	production	of a Succession Ce	rtificate / Probate of Will / Letter of Administration of
any Court		HEREOF the	o ooid	
1) Mr.	/Ms		2) N	1r. /Ms
Signature			Sigr	nature
have here	unto set t	their respect	ive hands and seals	this day of
Signed an	d delivere	ed by the sa	id legal heir/s.	
S.No	·	Name the L	egal Heirs	Signature of the Legal Heirs
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
				_1
Signed be	_			
On:	- f N - t			

Signature of Notary Official stamp & seal of the Notary & Regn. No.:

Note: To be executed in the presence of a Public Notary / Gazetted Officer

[To be submitted in non-judicial stamp paper of appropriate value]

No-Objection Certificate from the Legal Heir(s)

Format of NOC from other Legal Heir(s) for Transmission of Securities in favour of the Claimant(s) wherein the Sole Holder is deceased and NO NOMINATION has been registered

I/We, the legal heir(s) of late Mr. / Ms______ (name of the deceased holder)

declare as follows:

DECLARATION

1.	Name of the Company	Certificate No.	Distinctive No.	Folio No.	No. of securitie
2.					
3. 4.					
5.					
	the deceased had died in				
S.No	Name of the Claimant(s)	Address & Co	ontact Details	Age	Relation with t Deceased
1.					
2.					
3.					
4.					
5.					
pplied	Name of the			as follows:	Relation with t
S.No	I for transmission of the a	foresaid securities	and our details are		1
S.No	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3. 4.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3. 4. 5.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3. 4. 5.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3. 4. 5. 6. 7.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3. 4. 5. 6. 7.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3. 4. 5. 6. 7.	Name of the	foresaid securities	and our details are	as follows:	Relation with t
S.No 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.	Name of the	Address & Co	make any claim in	Age respect of the & renounce	e title to the afore

1)				
2)				
2)				
•				
7)				
		VERIFICATION		
We hereby sole	mnly affirm and sta	te that what is stated here	n above is true to our know	ledge and nothing
			contract and entitled to righ	
the above menti	ioned securities. So	olemnly affirmed at		
Deponent(s)	(1)	(2)	(3)	
	(4)	(5)	(6)	
	(7)	(8)	(9)	

 $\left(vii \right)$ I / we hereby state that whatever is stated herein above are true to the best of my/our knowledge and

nothing has been concealed therein.

Name(s) and Signature(s) of Legal Heir(s) who are Non – Claimant(s):