# <u>ANNEXURE O</u> TRANSMISSION FORM

Date D D M M Y Y Y

To, Name of Participant Address of Participant

(1) I/We, the undersigned, being the			
Executor(s) of the Will		Legal heir(s)	
Administrator(s) of the Estate		Joint holder(s)	
Successor(s) to the Estate		Nominee	
Survivors of HUF			
of Mr./Mrs./Ms.			, Mr./Mrs./Ms.
		and	d Mr./Mrs./Ms.
		, the deceased, of which	ch *nomination / probate/
letter of administration / succession certific	ate was duly	granted to me / us on	the day of
of hereby requ	uest you to re	gister me/us as the ben	eficial owner(s) in respect
of the securities standing in the name of the	said decease	d under Client ID	DP ID,
the details of which are as follows:			

ISIN	Name of Company	No. of securities		

(2) I/We give hereunder the details of my/our account with a Participant to which the security balances are requested to be transmitted:

Name	Client ID	DP ID

# (3) List of Documents enclosed (for Individual accounts) (tick as applicable):

A For surviving holder(s) in a joint account

Copy of Death Certificate duly attested by a Notary Public or by a Gazetted Officer.

B For nominee of the deceased:

Copy of Death Certificate duly attested by a Notary Public or by a Gazetted Officer.
C For legal heir(s)/legal representative(s) where deceased was a sole holder and no nomination in the account - Value of holding not exceeding Rs.5 lakh on the date of application
Copy of Death Certificate duly attested by a Notary Public or by a Gazetted Officer
Indemnity (format given at Annexure OC)
Affidavit (format given at Annexure OD)
No objection certificate(s) (format given at Annexure OE)
Family Settlement Deed [as an alternate to No objection certificate(s)]
D For legal heir(s)/Legal representative(s) where deceased was a sole holder and no nomination in the account - Value of holding was Rs. 5 lakh or more on the date of application
Copy of death Certificate duly attested by a Notary Public or by a Gazetted Officer
Succession certificate
Letter of Administration
Probate of the Will

(4) Declaration:

(Applicable only for legal heir(s)/legal representative(s) where deceased was a sole holder and no nomination in the account - Value of holding not exceeding Rs. 5 Lakh on the date of application)

We declare that the below mentioned person(s) are the only legal heir(s) of the deceased and there are not other legal heir(s). Of these, as specified below, some/all of them are claimants and some of them have given a No Objection Certificate in favour of other legal heir(s). Details are given below:

Sr. No.	Name of the legal heir(s)	Specify whether a claimant or given a No Objection Certificate

(5) List of Documents enclosed (for HUF accounts) (tick as applicable):

A Value of holding not exceeding Rs.10 lakh on the date of application. [Where there is an objection

from any member of HUF, documents mentioned at B below must be submitted]
Copy of Death Certificate duly attested by a Notary Public or by a Gazetted Officer.
Indemnity (format given at Annexure OF)
Affidavit (format given at Annexure OG)
B Value of holding was Rs. 10 lakh or more on the date of application.
Copy of Death Certificate duly attested by a Notary Public or by a Gazetted Officer
Court Decree
Deed of Partition
C Separation/ partition of HUF:
Copy of Death Certificate duly attested by a Notary Public or by a Gazetted Officer
Settlement Deed
Deed of Partition
Court Decree

# (6) Signatures:

Sr. No.	Name of claimant	Signature of claimant

Notes:1. This request form should be signed by the surviving joint holder(s)/ legal heir(s)/ legal representative(s)/ nominee / all surviving members of the HUF, as the case may be. 2. \* Strike off whichever is not applicable.

Indemnity to be executed on Non-judicial Stamp paper of appropriate value

# ANNEXURE OC LETTER OF INDEMNITY

(to be given by legal heir(s)/legal representative(s) - value of holding not exceeding Rs.5 lakh on the date of application)

To, DP and NSDL Address

Dear Sirs,

## Sub : Transmission of securities standing in the name of Late Mr./Mrs.

\_\_\_\_\_

I/We hereby inform you that Mr./Mrs.\_\_\_\_\_\_ the deceased, was holding a Client account no.\_\_\_\_\_ with \_\_\_\_\_ a Depository Participant having DP ID \_\_\_\_\_\_. The said deceased was holding the following securities :

ISIN	Name of Company	No. of securities

The said deceased died intestate without leaving a Will on the \_\_\_\_\_ day of \_\_\_\_\_.

We further inform you that he/she left behind him/her as his/her only surviving heirs and next of kin, the following persons according to the Law of Intestate Succession applicable to him/her by which he/she was governed at the time of his/her death.

(a)	
(b)	
` '	

(c) \_\_\_\_\_

We have, therefore, approached you with a request to transfer the aforesaid securities in the name of the undersigned Mr./Mrs./Ms.\_\_\_\_\_\_ on my/our behalf without insisting of production of a succession certificate or an order of the court of competent jurisdiction and you have kindly agreed to do so on my/our executing an indemnity as is herein contained and on relying on the information herein given by us believing the same to be true.

In consideration therefore of your having at our request agreed to transfer securities to the name of the undersigned \_\_\_\_\_\_\_I/we hereby jointly and severally agree and undertake to indemnify and keep indemnified, saved, defended, harmless you and your successors and assigns for all time hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages etc., whatsoever which you may suffer and/or incur by reason of your, at my/our request, transferring the said securities as herein above mentioned, to the undersigned \_\_\_\_\_\_ without insisting on production of a succession certificate or an order of the court of competent jurisdiction.

IN	WITNESS	WHEREOF	THE	said		 [name(s)	of
app	licant(s) ] ha	ve here unto	set their	r respe	ctive hands and seals this	 day	of
	of						

Signed, sealed and delivered by the said applicant(s)

Signature(s) of applicant(s)

#### **SURETY**

I the undersigned certify that the above facts are true to the best of my knowledge and bind myself as surety to make good all claims, charges, costs, damages, demands, expenses and losses which the Participant/NSDL, its successors and assigns may sustain, incur or be liable for in consequence of complying with the request contained above of the applicant(s) herein and the Participant/NSDL and its successors, assigns will be entitled to claim and realise all claims, charges, costs, damages, demands, expenses and losses from me or from my properties, as the case may be.

			Sig	nature of Surety
		Nat	ne :	
Date :				
Place :				
	-			
		Ī	Signature of Ma	gistrate/Notary)
		(	U	0, 1,
		Full Name and		
		Notary:		
		PI		
Use space below to affix:		1050.110.		
	Notarial/Court Fee Stamp			Official Seal of
	1			Magistrate/Notary

Note: This indemnity is to be executed in the presence of a first class judicial or stipendiary Magistrate/Public notary.

This affidavit is to be executed on Non-judicial Stamp paper of appropriate value.

#### ANNEXURE OD AFFIDAVIT

(to be given by legal heir(s)/legal representative(s) - value of holding not exceeding Rs.5 lakh on the date of application)

ISIN	Name of Company	No. of securities
1.That Mr./Mrs Depository Participant having DP	the deceased, was holding an account havin ID The said deceased was holding	e
oath and state as under :-		
	residing at	do hereby solemnly affirm on
I	son/daughter/spou	use of

2. That the deceased had died intestate on \_\_\_\_\_\_ at \_\_\_\_\_.

3. That the following are the only legal heir(s) of late Mr./Mrs.

	Name	Address	Age	Relationship with the deceased
1				
2				
3				
4				

4. That out of aforesaid legal heirs Master/Kum.\_\_\_\_\_\_ aged \_\_\_\_\_years is a minor and he/she is being represented by his/her father/mother and natural guardian Mr./Mrs. \_\_\_\_\_\_.

5. That all the legal heirs of my deceased \_\_\_\_\_\_ have applied to \_\_\_\_\_\_ (**DP name**) to register the aforesaid securities in my/our individual/joint beneficial owner account and have executed a Letter of Indemnity in favour of the Participant/NSDL holding the Participant/NSDL indemnified against any loss, cost, expenses or damages which may be caused to them in consequence of any claim which may be made by or on behalf of any person claiming any interest in the said shares.

#### DEPONENT

#### VERIFICATION

Full Name and

Pin :

Address of Magistrate/

Notary:

Regd. No

I hereby solemnly affirm and say that what is stated herein above are true to my knowledge and nothing has been concealed therein and that I am competent to contract and entitled to rights and benefits of the above securities.

Solemnly affirmed at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ of \_\_\_\_\_.

Signed in the presence of

(Signature of Magistrate/Notary)

Use space below to affix:

Notarial/Court Fee Stamps	Official Seal of Magistrate/Notary
Notes: 1 This affidavit is to be avacuted in the presence of a first	alass indicial or stinandiary Magistrate/Dublic notary

Notes: 1. This affidavit is to be executed in the presence of a first class judicial or stipendiary Magistrate/Public notary.2. This affidavit should be signed by each deponent separately.

#### ANNEXURE OE

### **NO OBJECTION CERTIFICATE**

(to be given by legal heir(s)/legal representative(s) - value of holding not exceeding Rs.5 lakh on the date of application)

Date D D	M	YYYY
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To, Name of Participant Address of Participant

Dear Sirs,

Re : Transmission of security balances standing in the name of late \_\_\_\_\_ Under Client ID \_\_\_\_\_ DP ID \_\_\_\_\_.

1. In connection with the above, I wish to inform you that Mr./Mrs. \_\_\_\_\_\_ expired on \_\_\_\_\_\_ and was holding the following securities under the Client ID \_\_\_\_\_\_ and DP ID \_\_\_\_\_\_.

ISIN	Name of Company	No. of securities

2. I the undersigned, residing at \_\_\_\_\_, am a legal heir of the said deceased.

3. I do not desire to make any claim of title of the said securities and have no objection whatsoever in transmitting the said securities in the name(s) of Mr./Mrs. \_\_\_\_\_\_ who has/have opened a beneficial owner account(s) under Client ID\_\_\_\_\_ and DP ID \_\_\_\_\_.

4. In consideration of registration of the aforesaid securities in the client account of Mr./Mrs.\_\_\_\_\_ under DP ID\_\_\_\_\_\_ Client ID \_\_\_\_\_\_at my request, I hereby agree to renounce all my rights existing as well as they may accrue to me in future in respect of the aforesaid securities.

Signed in the presence of

Bank Manager

Signature of the legal heir

Full Name and Address of Bank Manager

Note: This No Objection Certificate should be signed by each legal heir separately.

Deed of Indemnity provided by each of the surviving members of the HUF indemnifying NSDL from and against all losses, liability, costs and expenses including legal fees

## (Rs.200 stamp paper) <u>ANNEXURE OF</u> DEED OF INDEMNITY

(Value of holding not exceeding Rs.10 lakh on the date of application)

THIS DEED OF INDEMNITY is made at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ of \_\_\_\_\_

By:				
Sr. No.	Name of Applicant	Age	Gender	Address

(Collectively, "Surviving Members")

IN FAVOUR OF:

(Name of Participant), and having its registered address at and acting as a duly registered Participant under the provisions of The Depositories Act, 1996, Regulations and Bye Laws made thereunder (hereinafter referred to as "Participant", which expression shall, unless it be repugnant or contrary to the context thereof, mean and include its successors and permitted assigns)

AND

**National Securities Depository Limited (NSDL),** and having its registered address at 4th Floor, Trade World, "A" Wing, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel, Mumbai 400 013 and acting as a duly registered Depository under the provisions of The Depositories Act, 1996, Regulations and Bye Laws made thereunder (hereinafter referred to as "NSDL", which expression shall, unless it be repugnant or contrary to the context thereof, mean and include its successors and permitted assigns)

#### WHEREAS:

A. The Surviving Members are members of Hindu Undivided Family ("**HUF**"), which holds a beneficial owner account in the name of \_\_\_\_\_\_, the Deceased Karta, with the Participant bearing Client ID \_\_\_\_\_\_ ("**the said beneficial owner account**"), with Participant having DP ID ;

B. \_\_\_\_\_("the Deceased Karta") was named as the account holder in the said beneficial owner account.

C. The Deceased Karta passed away on \_\_\_\_\_

D. \_\_\_\_\_\_ is the new Karta of our HUF and shall hold the securities lying to the credit of the said Demat Account.

E. The surviving members have requested the Participant to transmit the securities held in the said beneficial owner account held in the name of the Deceased Karta to the beneficial owner account opened in the name of the new Karta and bearing Client ID \_\_\_\_\_\_ held with \_\_\_\_\_\_ (Name of Participant) DP ID\_\_\_\_\_\_ and to effect the change in beneficial ownership.

F. The surviving members have requested the Participant to effect the foregoing change by transmitting the securities held in the said beneficial owner account held by the Deceased Karta to the beneficial owner account held in the name of the new Karta, who has been solemnly affirmed on oath to be the newly elected Karta, without insisting on production of a succession certificate or an order of the court of competent jurisdiction, which we undertake to file with the Participant no sooner than the same is available to us, and which we shall pursue in right earnest.

THIS DEED WITNESSTH that in consideration of \_\_\_\_\_\_ the Participant agreeing to process the aforesaid request for change of account holder by transmitting the securities held in the said beneficial owner account held in the name of the Deceased Karta to the beneficial owner account held in the name of the new Karta (Client ID \_\_\_\_; DP ID\_ \_\_\_\_\_), that we hereby jointly and severally indemnify the Participant and NSDL and agree to keep indemnified and hold the Participant and NSDL saved, harmless and defended for all time hereafter from and against all losses, claims, legal proceedings, actions, demands, risks, charges, taxes, duties, damages, costs, expenses, including attorney and legal fees and penalties whatsoever which may be initiated against the Participant or NSDL by reason of the Participant having agreed at our request to change the name of the account holder of the said beneficial owner account from the Deceased Karta to the new Karta as aforesaid without insisting on production of a succession certificate or an order of the court of competent jurisdiction. If called upon by the Participant or NSDL to do so, we shall join any proceedings that may be initiated against the Participant and or NSDL and we shall defend at our cost any such proceedings. Further, we shall initiate such proceedings as may be considered necessary by the Participant and or NSDL, if called upon by the Participant and or NSDL to do so, in order to protect the Participant's and or NSDL's interests and to further and perfect the indemnity granted hereby in favour of NSDL.

# IN WITNESS WHEREOF:

Dated this \_\_\_\_ day of \_\_\_\_\_ of \_\_\_\_\_

Signed and delivered by the Surviving Members:

Name of Surviving Member(s)	Signature(s)

Before me Notary Public

### **SURETY**

I the undersigned certify that the above facts are true to the best of my knowledge and bind myself as surety to make good all claims, charges, costs, damages, demands, expenses and losses which the Participant/NSDL, its successors and assigns may sustain, incur or be liable for in consequence of complying with the request contained above of the applicant(s) herein and the Participant/ NSDL and its successors, assigns will be entitled to claim and realise all claims, charges, costs, damages, demands, expenses and losses from me or from my properties, as the case may be.

	Signature of Surety
	Name :
	Address:
Date :	
Place :	
	(Signature of Magistrate/Notary)
	Full Name and
	Address of
	Magistrate/
	Notary:
	PIN:
	Regd. No.

Use space below to affix:

Notarial/Court Fee Stamp	Official Seal of
	Magistrate/Notary

**Note:** This indemnity is to be executed in the presence of a first class judicial or stipendiary Magistrate/Public notary.

Affidavit from the surviving members of the HUF declaring that the person designated by them is indeed the new Karta of the HUF and as to completeness and accuracy of the information provided.

# ANNEXURE OG

# <u>AFFIDAVIT</u>

(Value of holding not exceeding Rs. 10 lakh on the date of application)

We, the applicants listed below, residing at the respective addresses set out below,

Sr. No.	Name of Applicant	Age	Gender	Address

do hereby solemnly affirm on oath and state that as under:

1. \_\_\_\_\_\_ ("the Deceased Karta") was holding a beneficial owner account bearing Client ID \_\_\_\_\_\_; DP ID \_\_\_\_\_\_ ("the said beneficial owner account") with \_\_\_\_\_\_, (Name of the Participant), as the Karta for and on behalf of our HUF.

2. The Deceased Karta passed away on \_\_\_\_\_.

3. We are all the surviving members of a Hindu Undivided Family ("HUF").

4. We state and declare that the aforesaid list of surviving members is complete and exhaustive, and does not leave out any member of the HUF. We affirm that this list is accurate in all respects whatsoever.

5. The said Deceased Karta was holding the following securities in the said Demat Account: (Applicants to reproduce from the latest Transaction Statement or Statement of Holdings)

6. \_\_\_\_\_\_ is the new Karta for our HUF and shall hold the securities lying to the credit of the said beneficial owner account. We confirm to \_\_\_\_\_\_ (Name of the Participant) that the new Karta is indeed the new Karta of our HUF.

7. We have requested that the securities be transmitted from the said beneficial owner account held by the Deceased Karta to the beneficial owner account opened in the name of the Designated Karta (Client ID \_\_\_\_\_; DP ID\_\_\_\_\_) and have filed a Transmission Form on \_\_\_\_\_\_ (date). We state that all the information provided therein and in this Affidavit is complete and accurate in all respects and that all the members of the HUF are fully aware of the above request made to the Participant and there is no pending dispute, difference, objection or claim to the same among any of the members of the HUF in this regard.

# VERIFICATION

We hereby solemnly affirm and say that what is stated herein above are true to my knowledge and nothing has been concealed therein.

Solemnly affirmed at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_ of \_\_\_\_\_:

Sr. No.	Name of Applicant (s)	Signature

Before me Notary Public