

Central Depository Services (India) Limited

Convenient # Dependable # Secure COMMUNIQUÉ TO DEPOSITORY PARTICIPANTS

CDSL/OPS/DP/POLCY/2025/65

January 27, 2025

AMENDMENTS TO DP OPERATING INSTRUCTIONS CHAPTERS 2 & 3

DPs are advised to note that amendments have been incorporated in CDSL's DP Operating Instructions [OI] Chapter 2 – Account Opening and Chapter 3 – Account Administration and Maintenance wherein the changes for updation of choice of nomination in the eligible BO accounts.

The said amendments to the DP OI are provided in track changes mode in attached **Annexure** – **A, Annexure 2.1, Annexure 2.8, Annexure 3.2A, Annexure 3.3B.**

DPs are advised to take note of the same and ensure compliance.

Queries regarding this communiqué may be sent to CDSL – Helpdesk through e-mail on dprtasupport@cdslindia.com or call us on 022-6234-3333.

For and on behalf of Central Depository Services (India) Limited

Nilesh Shah Asst. Vice President – Operations

sd/-

CDSL: your depository

KEYWORD: Operating Instructions

Sr. No.	Chapter-3- ACCOUNT ADMINISTRATION AND	MAINTENANCE
	Existing Process	New Process
3.3	 Annexures Annexure 3.1: Account Details Addition/Modification/Deletion Request Form. Annexure 3.2: Nomination form. 	 Annexure 3.1: Account Details Addition/Modification/Deletion Request Form. Annexure 3.2 A: Nomination form. Annexure 3.2 B: Declaration for opting out of Nomination form.
3.4.2	Addition of nomination	Addition of nomination
3.4.2.1	 This transaction allows the DP to setup a nomination request for a BO. The DP should mandatorily obtain a nomination form (Annexure 3.2) from the BO (Individual/NRI/Foreign National categories), duly filled and signed by all the holders. 	 This transaction allows the DP to setup a nomination request for a BO. The DP should mandatorily obtain a nomination form (Annexure 3.2A) in case of nomination details opted for from the BO (Individual/NRI/Foreign National categories), duly filled and signed by the all the holder (s).
	 The DP shall ensure that the nomination is given by individuals only. Non-individuals including society, trust, corporate body, partnership firm, HUF, AOP, holder of POA, cannot appoint a nominee. A minor can nominate through a guardian. An NRI can nominate. The DP shall also ensure that the nominees appointed by the BO(s) are individuals. A body corporate, trust, society, partnership firm, HUF and AOP cannot be appointed as a nominee. An NRI can be appointed as a nominee subject to the Foreign Exchange Control Regulations in force from time to 	 The DP shall ensure that the nomination is given by individuals only. Non-individuals including society, trust, corporate body, partnership firm, HUF, AOP, holder of POA, cannot appoint a nominee. A minor can nominate through a guardian. An NRI can nominate. The DP shall also ensure that the nominees appointed by the BO(s) are individuals. A body corporate, trust, society, partnership firm, HUF and AOP cannot be appointed as a nominee. An NRI can be appointed as a nominee subject to the Foreign Exchange Control Regulations in force from time to

time. A minor can be appointed as a nominee represented by a guardian.

- The DPs should maintain a record of the nominees registered in a nomination register. The register can be in physical form or in electronic form. Each nomination entered in the register should be given a serial number. This serial number should be written on the nomination form along with date of entry of the nominations in the nomination register.
- In case of physical nomination request is received duly signed by all holders [wet signature] in this case witness will not be required.
- In case the demat account holder affixes the thumb impression instead of the signature, in this case DP shall ensure that the nomination form has to be signed by one witness also. The name, address and signature of witness are required to be mentioned on the nomination form.
- In case of nomination request is received online through web portal of the DP and the same is e-signed by the demat account holder in this case witness signature will not be required.
- If a BO does not wish to nominate, the option: "I/WE DO NOT WISH TO NOMINATE" in the Nomination Form should be selected.
 The DP should ensure that the nomination

- time. A minor can be appointed as a nominee represented by a guardian.
- All new investors shall continue to be required to mandatorily provide the 'Choice of Nomination' for demat accounts (except for jointly held Demat Accounts).
- The DPs should maintain a record of the nominees registered in a nomination register.
 The register can be in physical form or in electronic form. Each nomination entered in the register should be given a serial number.
 This serial number should be written on the nomination form along with date of entry of the nominations in the nomination register.
- In case of physical nomination request is received duly signed by all holder_(s) [wet signature] in this case witness will not be required.
- In case the demat account holder affixes the thumb impression instead of the signature, in this case DP shall ensure that the nomination form has to be signed by one witness also. The name, address and signature of witness are required to be mentioned on the nomination form.
- In case of nomination request is received online through web portal of the DP and the same is e-signed by the demat account holder in this case witness signature will not be required.
- If a BO does not wish to nominate, the <u>BO</u> should provide confirmation by ticking option:
 "I/WE DO NOT WISH TO NOMINATE"_in
 Annexure 3.2B_in the Nomination Form

form is duly signed by all the account holders.

- A BO can appoint multiple nominees (upto three) in a demat account.
- If a BO chooses to appoint multiple nominees, the BO has to specify the share of securities in terms of percentage which will be distributed ISIN wise equally and the same should total to 100%.
- In case of multiple nominations, if the no of securities are not exactly divisible in the specified proportion in respect of a particular ISIN, the same shall be divided at ISIN level to the extent the securities are divisible and for the remaining securities which are in odd nos will be credited.

should be selected. The DP should ensure that the **Declaration for opting out of** nomination form is duly signed by all the account holder(s).

- A BO can appoint multiple nominees (upto three) in a demat account.
- If a BO chooses to appoint multiple nominees, the BO has to specify the share of securities in terms of percentage which will be distributed ISIN wise equally and the same should total to 100%.
- In case of multiple nominations, if the no of securities are not exactly divisible in the specified proportion in respect of a particular ISIN, the same shall be divided at ISIN level to the extent the securities are divisible and for the remaining securities which are in odd nos numbers will be credited to the first nominee.
- 3.4.2.2 The DP shall, at all times, irrespective of subsequent variations and cancellations, maintain an updated "Register of Nominations" which shall contain the following information:
 - a) Nomination Registration Number.
 - b) Date of Registration.
 - c) BO Account Number for which nomination is being received.
 - d) Name of nominee(s).
 - e) Percentage of share to be paid to the nominee.
 - f) Address of nominee(s).
 - g) If Nominee is a minor, then scheduled date of at attaining majority

- a) The DP shall, at all times, irrespective of subsequent variations and cancellations, maintain an updated "Register of Nominations" which shall contain the following information: -
- b) Nomination Registration Number.
- c) Date of Registration.
- d) BO Account Number for which nomination is being received.
- e) Name of nominee(s).
- f) Percentage of share to be paid to the nominee.
- g)-Date of Birth mandatary if nominee is minor Address of nominee(s).

	h) Name/address of the guardian, if nominee	h)g) <u>If Nominee is a minor, then</u>
	is a minor.	scheduled date of at attaining majority
	i) Remarks.	i)h) Name /address of the guardian, if nominee
		is a minor.
		j) i <u>)</u> Remarks.
3.4.2.3	After verification of the documents for	After verification of the documents for
	adding/changing nomination, particulars of the	adding/changing nomination, particulars of the
	nomination details should be recorded in the CDSL	nomination details should be recorded in the CDSL
	system.	system.
3.4.2.3	In case the DP has not entered the details of	In case the DP has not entered the details of
	nomination in the Nomination Register and in the	nomination in the Nomination Register and in the
	CDSL system, the BO account will be considered	CDSL system, the BO account will be considered as
	as "without nomination".	"without nomination".
3.4.2.4		DPs are required to encourage the demat account
		holders to update 'choice of nomination' by sending
		a communication on fortnightly basis by way of
		emails and SMS to all such demat account holders
		who have not provided the 'choice of nomination'.
		The communication shall provide the guidance for
		demat account holders to provide 'choice of
		nomination'.
		DPs shall encourage the existing investors to
		provide the 'choice of nomination', a pop-up shall
		be provided on web/mobile application/platform to the investors by DPs, while logging into
		(including other platforms providing online
		execution services) their Demat account. This
		pop-up may be shown only to those clients whose
		demat account(s) do not have 'choice of
		nomination'.

Additional KYC Form for Opening a Demat Account For Individuals **Depository Participant Name/Address** (To be filled by the Depository Participant) Date Application No. DP Internal Reference No. DP ID Client ID (To be filled by the applicant in **BLOCK LETTERS** in English) I/We request you to open a demat account in my/ our name as per following details:-**Holders Details** UID Sole / First UCC Holder's Name Exchange Name & ID Second Holder's PAN UID Name Third Holder's PAN UID Name Name * *In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above. Type of Account (Please tick whichever is applicable) Sub - Status ■ Individual ☐ Individual Resident ■ Individual-Director ☐ Individual Director's Relative ☐ Individual HUF / AOP ■ Minor ■ Individual Promoter ☐ Individual Margin Trading A/C (MANTRA) □ Others(specify) □ NRI ■ NRI Repatriable ■ NRI Non-Repatriable ☐ NRI Repatriable Promoter ☐ NRI Non-Repatriable Promoter ■ NRI – Depository Receipts ☐ Others (specify) □ Foreign National □ Foreign National ☐ Foreign National - Depository Receipts ☐ Others (specify) Details of Guardian (in case the account holder is minor) Guardian's Name PAN Relationship with the applicant I / We instruct the DP to receive each and every credit in my / our account [Automatic Credit] ☐ Yes (If not marked, the default option would be 'Yes') I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end ☐ Yes ■ No (If not marked, the default option would be 'No') Account Statement ■ As per SEBI Regulation ■ Weekly ■Monthly Daily □Fortnightly Requirement I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID ☐ Yes ■ No I / We would like to share the email ID with the RTA ☐ Yes ■ No I / We would like to receive the Annual Report ☐ Physical / ☐ Electronic / ☐ Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical) I/ We wish to receive dividend / interest directly in to my bank account as given below through ECS (If not marked, the default option would be 'Yes') ☐ Yes ■ No [ECS is mandatory for locations notified by SEBI from time to time] **Bank Details [Dividend Bank Details]** Bank Code (9 digit MICR code) IFS Code (11 character)

Account number

Account type	☐ Sa	/ing □	Current	☐ Others (s	pecify)				
Bank Name									
Branch Name									
Bank Branch Address		1							
City	State			Country	PIN code				
 (i) Photocopy of the ca (ii) Photocopy of the Ba (iii) Photocopy of the Pa (iv) Letter from the Ban In case of opt document. 	ink Statement ha ssbook having na	ving name ar ame and addr	d address ess of the	of the BO BO, (or)					
Other Details Gross Annual Income Details	Gross Annual Income ☐ Up to Rs.1,00,000 ☐ Rs 1,00,000 to Rs 5,00,000 ☐ Rs 5,00,000 to Rs 10,00,000								
Occupation	☐ Private / Publ☐ Retired ☐			Service 🖵 Busi	iness Pro	fessional			_
Please tick , if applicable	□Politica	lly Exposed P	erson (PEI	P) Rela	ated to Politic	ally Expos	sed Pe	rson	(RPEP)
Any other information:									
SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4 Easi	(if POA is not option). To register fo	if you are given granted & your easi, please BO to view his	u do not v	of Attorney (I vish to avail of vebsite <u>www.cc</u> ances, transact	this facility, ca				
Nomination Details			N	omination Re	egistration N	No.	I	Date	d
] I/We hereby confirm tha	t I/We do not w	ish to appo	int any n	ominee in m	y demat a	ccount	and u	ınde	rstan
I/We hereby confirm that the issues involved death of all the acc documents / inform include documents assets held in the death	in non-appo count holder(s nation for clain issued by Co	intment os), my / ou ming of as urt or oth	f nominar legal l sets held	ee(s) and funeirs would I in my / ou	urther are need to so remat ac	aware ubmit a ccount,	that all the which	in o e re h ma	ase o quisito ay also
the issues involved death of all the acc documents / inform include documents assets held in the do	in non-appo count holder(s nation for clain issued by Co emat account First/Sole Hole	intment os, my / ouming of as urt or oth	f nomin ur legal sets held er such	ee(s) and funeirs would I in my / ou	urther are need to so remat ac	aware ubmit a ccount, based	that all the which	in o e re h ma ne va	ase o quisito ay also
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death of all the acc documents / inform include documents assets held in the do	in non-appo count holder(station for claim issued by Commat account First/Sole Holdardian (in case	intment of s), my / ou ming of as urt or oth der or of Minor) ddress are requirementation	f nomingur legal sets helder such See	ee(s) and function and function would be in my / ou competent cond Holder	arther are need to s r demat ac authority,	aware ubmit a count, based Thire	that all the which on the	in ce re h mane value va	sase of quisitor ay also alue of alue

Mandatory Details

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name :			
*First Name:			
Middle Name:			
*Last Name			
*Percentage of			
allocation of securities			
E11			
Equally [If not equally, please specify percentage]			
	%	%	%
Or			
Share of each Nominee			
Any odd lot after division shall be	e transferred to the first nominee r	nantioned in the form	
Any oud for after division shall be	e transferred to the first nonlinee i	nentioned in the form	
*Relationship with the BO:			
*Date of birth and Name of	Guardian to be provided in	case of minor nominee (s)	
N	Non - mand	atory details	
Nomination Identification	N	N	N · · · · ·
Details - [Please tick any	Nominee 1	Nominee 2	Nominee 3
one of following and provide details of same			
Provide details of Same			
☐ Photograph &			
Signature			
= PAN			
□ Aadhaar			
□ Saving Bank account			
no.			
□ Proof of Identity			
□ Demat Account ID			
[Optional Fields]			
*Address of Nominee (s)			
/ Guardian in case of			
Minor:			
*0": /			
*City /place			
*State & Country			
*Pin Code:			
*Country Mobile no_/Telephone No			
of the Nominee (s)			
/Guardian in case of			
Minor.			
Optional Fields]			
Email ID of the nominee			
(s) / Guardian in case of			
minor:			
[Optional Fields]			
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Nominee/Guardian I		
incase of minor) Details		
[Dlages felt are a re-		
- [Please tick any one of		
following and provide		
details of same]		
-		
☐ Photograph &		
Signature		
□ PAN_		
□ Aadhaar		
☐ Saving Bank account		
no.		
□ Proof of Identity		
□ Demat Account ID		
*Relationship with the		
BO:		
To be filled only if nomine	ee(s) is a minor:	
Date of birth (mandatory		
if Nominee is a minor)		
dd-mm-yyyy		
Name of the Guardian of		
Nominee (if nominee is a		
minor)		
*First Name:		
-Middle Name:		
*Last Name		
*Address of the guardian		
of nominee:		
*City		
*State		
*Country		
*PIN		
Age		
Mobile /Telephone no		
· ·		
[Optional Fields]		
Email ID:		
Optional Fields]		
[Optional rields]		
Fax No.		
Optional Fields		
*Relationship of the		
Guardian with the		i l
Guardian with the		l l
Nominee		
Nominee		
Nominee Guardian Identification		
Guardian Identification details – [Please tick		
Guardian Identification details – [Please tick		
Guardian Identification details — [Please tick any one of following		
Guardian Identification details – [Please tick any one of following and provide details of		
Guardian Identification details – [Please tick any one of following and provide details of same]		
Guardian Identification details – [Please tick any one of following and provide details of		
Nominee Guardian Identification details – [Please tick any one of following and provide details of same] □ Photograph &		
Nominee Guardian Identification details – [Please tick any one of following and provide details of same] □ Photograph & Signature		
Guardian Identification details – [Please tick any one of following and provide details of same] Photograph &		

Saving Bank account no. Proof of Identity		
☐ Demat Account ID Optional Fields]		
Tables and a second		

Note: Residual securities: in case of multiple nominees remaining after distribution of securities as per percentage of allocation shall be transferred to the first nominee . -

* Marked is Mandatory field

Note:

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination /negative nomination

Details of the Witness	
	Witness Details
Name of witness	
Address of witness	
Signature of witness	

The Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

I / We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
*Name			
<u>*</u> Signatures			

(Signatures should be preferably in blue ink).

 Marked is Mandatory fie 	lc
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Acknowledgement Receint

Application No.:

Date:

We hereby acknowledge the receipt of the Account Opening and nomination Application Form:

Name of the Sole / First Holder	
Name of Second Holder	
Name of Third Holder	

		Depository Participant Sear and Signature
 (Please	Tear Here)	

Additional information to be obtained along with the SARAL Account Opening Form for Resident Individuals

							Date	D	D	M	M	Υ	Υ	Υ	Y
		Б													
be filled by the De	epository	Participa	ant)				Data	D	Ь	N/I	N/I	\/	\/	\/	V
oplication No. P Internal Referen	ce No						Date	D	D			Y	Y	Y	Ϋ́
P ID	10.					Clie	ent ID								\neg
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olders Details															
Sole / First								UID							
Holder's Name															$\perp \perp$
	İ							PAN							++
Second Holder's								UCC	2000						++
Name								Excha Name	_	,					
	İ							UID							$\dagger \dagger$
Third Holder's								PAN							
Name								UID							
Name															
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*In case of Firms opened in the r															
Unregistered Tr							or the rii	iii, A330	Ciatio	11 01 1 0	130113 (ΑΟΙ),	i di di c	тэттр	,
<u> </u>															
Status		Sub –	Statu	S											
☐ Individual		☐ Indi	vidual	Resid	ent										
I / We would like										- v					
my /our account v		•				סדו ודס	m my/oui	ena		☐ Yes		0			
(If not marked, the Account Statemer		option v	would	be in	5)										
Requirement	ıı	☐ As	per SE	BI Re	gulati	ion	Daily		Wee	kly	□For	tnightl	У		lonthly
I / We request	you to	send Ele	ectroni	c Tra	nsact	tion-c	cum-Holdi	ng Stat	emer	t at t	he ema	ail ID			
		_											☐ Ye	es	□ No
I / We would like													<u>□ Ye</u>		□ No
I / We would like (Tick the applicab							Physical /				I Both	Physica	al and	Electi	onic
(тіск іне арріісав	ie box. 1	1 1100 111	arkeu	uie u	eraur	t opti	on would	DE III P	Hysica	ai <i>)</i>					
I/ We wish to re	eceive div	ridend /	interes	st dire	ctlv i	n to	mv bank	accour	nt as	aiven i	n SARA	L			
AOF through ECS										J			Yes		No
[ECS is mandator	y for loca	tions not	tified b	y SEE	3I fro	m tim	ne to time]							
Other Details		come R) 000 t- D	00 (200	- n- i	- 00 00	0 +- D-	10.00	000	
Gross Annual Income Details		Up to R					0,000 to R	s 5,00,0 I More t			5,00,00 0 000	υ το κε	10,00	,000	
Income Details		et worth						4 Y	v I	v v	Rs				
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Occupation		Private /	/ Publi	r Ser			Govt. Sei				□ Prof		A	aricul	ure
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Please tick , if app							on (PEP)				Political	ly Expo	sed Pe	erson	(RPEP
Any other informa												-			

SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4	MOBILE NO. +91	
E asi	To register for e asi, please visit our website <u>www.cdslindia.com</u> . E asi allows a BO to view his ISIN balances, transactions and value of the portfolio online.	

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Nomination Registration No.	Dated

\Box	I/We hereby confirm that I/We do not wish to appoint any nominee in my demat account and understand the
_	issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s),
	my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our
	demat account, which may also include documents issued by Court or other such competent authority, based on the value
	of assets held in the demat account

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures			

Note:

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination / opt out nomination -

☐ I/We <u>wish_to make_nomination_eand_do here by nominate</u> the following person_(s)_-who_shall_is/are_entitled to receive <u>all the assests held_security balances lying</u> in my/our account, particulars where of are given below, in the event of my / our death.

Mandatory Details

Nominee 1	Nominee 2	Nominee 3
%	%	%
transferred to the first nominee n	nentioned in the form	
Guardian to be provided in	n case of minor nominee (s)	
	% transferred to the first nominee r	

	Non - mand	atory details	
Nomination Identification Details [Please tick any one	Nominee 1	Nomince 2	Nominee 3
of following and provide details of same]			
☐ Photograph & Signature ☐ PAN			
☐ Aadhaar Saving Bank account no.			
☐ Proof of Identity ☐ Demat Account ID			
[Optional Fields]			
*Address of Nominee (s) / Guardian in case of			
Minor:			
*City_/place:			
*State & Country :			
*Pin_Code :			
*Country			
Mobile no/Telephone No. <u>of</u>			
the Nominee (s) /Guardian in case of			
Minor:			
[Optional Fields]			
Email ID of the nominee (s) / Guardian in cae of			
minor:			
÷ [Optional Fields]			
Nominee/Guardian I incase of minor)			
Identification Details – [Please tick any one of			
following and provide			
details of same]			
☐ Photograph & Signature			
□ PAN_			
☐ Aadhaar☐ Saving Bank account			
no. □ Proof of Identity			
□ Demat Account ID			
EAV No.			
FAX No.: [Optional Fields]			
*Relationship with the BO: Date of birth (mandatory if			
Nominee is a minor)			
Name of the Guardian of			
Nominee (if nominee is a minor)			
*First Name:			
-Middle Name:			
<u> </u>	II.	1	I

*Last Name		
*Address of the guardian of		
nominee:		
*City		
*State		
*Country		
*PIN		
Age		
Mobile Telephone no.:		
[Optional Fields]		
Email ID:		
[Optional Fields]		
Fax No.		
[Optional Fields]		
To be filled only if nomined	(s) is a minor:	
*Relationship of the		
Guardian with the Nominee		
Guardian Identification		
details – [Please tick any		
one of following and provide		
details of same]		
☐ Photograph & Signature		
□ PAN		
Bank account no. Proof of		
Identity		
Demat Account ID		
[Optional Fields]		
*		
<u> </u>		

Note: Residual securities: in case of multiple nominees, remaining after distribution of securities as per percentage of allocation. shall be transferred to the first nominee.

* Marked is Mandatory field

Note

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature <u>_fin both the cases i.e. nomination / opt out_nomination</u>

Details of the Witness	
	Witness Details
Name of witness	
Address of witness	
Signature of witness	

This nomination shall supersede any prior nomination made by the account holder(s), if any.

I / We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures			

(Signatures should be preferably in black ink).

* Marked is Mandatory field

Name of the Sole / First Holder Name of Second Holder Name of Third Holder

The Depository Participant shall provide	acknowledgement of the nomination form to the acco	ount holder(s)
	==== Please Tear Here) =============	
Application No.:	Acknowledgement Receipt Date:	
We hereby acknowledge the receipt of th	he Account Opening and nomination Application Form:	

Depository Participant Seal and Signature

Nomination Form

To,		
The Depository	Participant	Name
Address		

Dear Sir/ Madam,														
<u>I/We hereby confir</u>	rm that I	/We do ne	ot wish	to app	oint a	ny non	ince ir	my d	emat	acco	unt a	nd u	nders	sta
issues involved in holder(s), my / our														
in my / ourv demat	t account	, which ma	ay also i	include d	ocume	nts issue	d by Cou	rt or oth	ier su	ch con	npete	nt au	thori	t y
on the value of ass	ets held	in the demi	at acco	unt.										
[Strike out what is	not appli	i cable.] [Si	ignature	es of all a	eccount	: holders	should b	e obtain	red or	this f	orm].			
	First/Sole Holder			2	econe	 Holde			Thir	d Hok	der			
	1 11 5 6 7 5													
Name														
Signature														
														_
Note:														
Signature of witness	ss along	with name	and a	ddress a	re regu	ired if t	ne accou	nt holde	r affi	es the	ımh ir	nnre	ssion	_
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or organization [iii zota				, opt out										
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Holders.	-	the event o				eath /our			r acc	ount_ ,				
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BO Account Deta	ails First Hold					eath /our	death t		r acc	ount_ ,				
BO Account Deta DP ID Name of the Sole / I	nils First Hold					eath /our	death t		r acc	ount_ ,				
BO Account Deta DP ID Name of the Sole / I Name of Second Ho	nils First Hold			death of	my de	cath /our	ient ID		r acc	ount_ ,				
BO Account Deta DP ID Name of the Sole / I Name of Second Ho	nils First Hold			death of	my de	eath /our	ient ID		r acc	ount_ ,				
BO Account Deta DP ID Name of the Sole / I Name of Second Ho Name of Third Holde Nomination Deta	iils First Hold Ider er	der		death of	my de	cath /our	ient ID	e Sole †	r acc	ount_ ,	e dea	th o		th
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Nomination Deta Nominee Name: *First Name: *Last Name	iils First Hold Ider er	der	of the d	death of	my de	cath /our	ient ID	e Sole †	r acc	ount_ ,	e dea	th o	f all 	th
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Nomination Deta Nominee Name: *First Name: *Last Name *Percentage of allocation of securities:	iils First Hold Ider er	der	of the d	death of	my de	cath /our	ient ID	e Sole †	r acc	ount_ ,	e dea	th o	f all 	th
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Nomination Deta Nominee Name: *First Name: *Last Name *Percentage of allocation of securities: Equally [If not equally, please specifipercentage]	First Hold lder er	der	Nomine	death of	my de	cath /our	ils Nomine	e Sole †	r acc	ount_ ,	e dea	omir	f all	th

*Relationship with the			
BO:			
* Date of birth and Name	of Guardian to be provided i	n case of minor nominee (s)	
	·		•
	Non - mano	datory details	
Nomination			Namina a O
Identification Details [Please tick any one	Nominee 1	Nominee 2	Nominee 3
of following and			
provide details of			
same]			
□ Photograph &			
Signature			
□ PAN			
□ Aadhaar			
□ Saving Bank			
account no. □ Proof of Identity			
□ Proor or identity □ Demat Account ID			
Optional Fields			
[Opinorial Fiction]			
*Address of Nominee			
(s) / Guardian in case			
of Minor:			
*City_/place_:			
*State & Country :			
*Pin_Code :			
*Country: Mobile no. /			
Telephone No <u>of the</u>			
Nominee (s)			
/Guardian in case of			
Minor:			
Optional Fields			
Email ID of the			
nominee (s) / Guardian in cae of			
Guardian in cae of minor:			
Optional Fields			
Fax No:			
Optional Fields]			
Nominee/Guardian I			
incase of minor)	Nominee 1	Nominee 2	Nominee 3
Identification Details –			
Please tick any one of following and			
provide details of			
same]			

<u>Signature</u>			
□ PAN			
□ Aadhaar			
□ Saving Bank			
account no.			
☐ Proof of Identity			
□ Demat Account ID			
Demat Account 1D			
40 1 11 11			
*Relationship with the			
BO:			
To be filled only if nomi	inee(s) is a minor:	I	I
Date of birth			
(mandatory if			
Nominee is a minor):			
Name of the Guardian			
of Nominee (if the			
nominee is minor):			
*First Name:			
-Middle Name:			
*Last Name			
*Address of the			
Guardian of nominee:			
Guardian or nominee.			
*City:			
*State:			
*Country:			
*Pin:			
Age			
Malaila /Talaalaaa			
Mobile /Telephone			
no.:			
[Optional Fields]			
Email ID:			
[Optional Fields]			
[] karamar (lenga)			
Fax No:	1		
[Optional Fields]			
*Relationship of the			
Guardian with the			
Nominee:			
- ·····-			
Guardian Identification			
details – [Please tick any			
one of following and			
provide details of same?			
provide details of same]			
☐ Photograph &			
Signature PAN Aadhaar			
Saving Bank account no.			
Proof of Identity			
□ Demat Account ID			
[Optional Fields]			

Annexure	3	.2	Α
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Note : Residual s allocation. shall be * Marked is Mar	e transferred	to the first nominee.	iees, rema	ining after distribution	of secul	I rities as per percentage of	
Note: Signature of witne of signature [in bo	ess, along wi	th name and address i.e. nomination / opt	s are requ out nomir	ired, if the account ho nation.	lder affi	xes thumb impression, insi	tead
Details of the Witr	ness						
				Witness Deta	i ls		
Names of Witness							
Address of Witnes	SS						
Signature of Witne	ess						
Tills normanon o	dii supersecce	my pnoi no mmanon	auc oy u.c.	account holder(s), if any.	-		
Place:			Date:				
Place:	Firs	st/Sole Holder		Second Holder		Third Holder	
Place:	Firs					Third Holder	
	Firs					Third Holder	
Name Signature		st/Sole Holder	5	Second Holder	lder affi.	Third Holder xes thumb impression, inst	tead
Name Signature Note: Signature of witner	ess, along wi	st/Sole Holder	5	Second Holder	lder affi.		tead
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Signature of Witness																				
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Place:							Da	ate:				_								
The Depository Particip	ant	shall n	rovio	de acl	know	ledge	men	nt of	the n	omin	ation form to the	e accoi	unt ho	older(s)					
The Bepository Funderp	um	onun p	7011	ac acı	alio w	reage	111011	11 01	uic ii		ation form to the	e acco		/IGCI (3)					
(To be filled by DP))																			
Nomination Form acce	epte	ed and	reg	istere	ed w	ide K	legis	strat	ion i	No				date	d				_•	
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Depository Participant Seal and Signature

Declaration for Opting Out of Nomination Form

To, The Depository Participant Name **Address**

Dear Sir/ Madam,

I/We hereby confirm that I/We do not wish to appoint any nominee in my /our demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the demat account.

[Strike out what is not applicable.] [Signatures of all account holders should be obtained on this form].

	First/Sole Holder	Second Holder	Third Holder
<u>Name</u>			
<u>Signature</u>			

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

Details of the Witness	
	Witness Details
Names of Witness	
Address of Witness	
Signature of Witness	

(To be filled by DP) Nomination Form accepted and registered wide Registration No. dated For Depository Participant (Authorised Signatory) **Acknowledgement Receipt** Received nomination from: DP ID Client ID <u>Name</u> <u>Address</u>

Registered on

 $\underline{\text{The Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)}\\$

■ Would like to opt out nomination.

Depository Participant Seal and Signature

No Nomination

Registration No.