

Email: ask@mindecapital.com • Website: www.mindexcapital.com

Nominee 9								
Nominee 10								

***Joint Accounts:**

Event	Transmission of Account / Folio to
Demise of one or more joint holder(s)	Surviving folder(s) through name deletion The surviving holder(s) shall inherit the assets as owners
Demise of all joint holders simultaneously – having nominee	Nominee
Demise of all joint holders simultaneously – not having nominee	Legal heir(s) of the youngest folder

**if % is not specified, then the assets shall be distributed equality amongst all the nominees (see table in 'Transmission aspects').

**Provide only number; PAN or Driving License or Aadhaar (last4). Copy of the document is not required.

**to be furnished only in following conditions / circumstances:

- Date of Birth (DOB): please provide, only if the nominee is minor.
- Guardian: It is optional for you to provide, if the nominee is minor.

I/We want the details of my / our nominee to be printed in the statement of holding, provided to me/us by the AMC / DP as follows; (please tick, as appropriate)

☐ Name of nominee(s)

☐ Nomination: Yes / No

1. I hereby authorize _____ (nominee number _____) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5 of the circular. He / She is authorized to encase my assets up to ____% of assets in the account / folio or Rs. _____
(strike off portions that are not relevant)

2. This nomination shall supersede any prior nomination made by me / us, if any.

Name(s) of holder(s)	Signature(s) of holder	Witness Signature
Sole / First Holder (Mr./Ms.)		
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

*Signature of two witness (es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature

This nomination shall supersede any prior nomination made by me / us, if any.

DECLARATION FORM FOR OPTING OUT OF NOMINATION

To

Date

D

D

M

M

Y

Y

Y

Y

Mindex Capital Market Pvt. Ltd.

CIN No. U74899DL1995PTC066020

Regd. Off. 1306, Padma Tower-1, Rajendra Place, New Delhi-110008

Tel. : +91 011-40904000 , 93110-93150

E-mail : ask@mindexcapital.com • Website : www.mindexcapital.com

DP ID

UCC

Sole/First Holder Name

Second Holder Name

Third Holder Name

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / 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 trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.

Name and Signature of Holder(s)*

1. _____ 2. _____ 3. _____

*Signature of witness, along with name address are required, if the account holder affixes thumb impression, instead of Signature