

Relitrade Stock Broking Private Limited

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**Nomination Form**

UCC ID: _____

Date: __/__/____

Client ID: 12088400 _____

I/We wish to make a nomination. [As per details given below]			
Nomination Details			
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my/our account in the event of my/our death.			
Nomination can be made upto three nominees in the account.	Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1. Name of the nominee(s)			
2. Share of each Nominee	_____% _____% _____% Any odd lot after division shall be transferred to the first nominee mentioned in the form.		
3. Relationship With the Applicant			
4. Address of Nominee			
5. Mobile/Telephone No. of nominee(s)			
6. Email ID of nominee(s)			
7. Nominee Identification details [Please tick any one of following and provide details of same]	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> UID <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> UID <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> UID <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID

UCC ID: _____

Client ID: 12088400_____

Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:

8. Date of Birth {in case of minor nominee(s)}			
9. Name of Guardian			
10. Address of Guardian(s)			
11. Mobile/Telephone no. of Guardian			
12. Email ID of Guardian			
13. Relationship of Guardian with nominee			
14. Guardian Identification details [Please tick any one of following and provide details of same]	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> UID <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> UID <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> UID <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID
Name(s) of holder(s)			Signature(s) of holder*
Sole/First Holder			
Second Holder Name			
Third Holder Name			

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

Note:

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