ashika

TRANSMISSION REQUEST FORM

(In case of death of the sole holder)

Application No.		Date	D	D	M	M	Y	Y	Y	Y

(Please fill all the details in **Block Letters** in English)

To,
ASHIKA STOCK SERVICES LTD
Trinity, 226/1, A J C Bose Rd
7th Floor, Kol-700020

Dear Sir / Madam,

I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (in case ~~of~~ the claimant is a Minor- Date of Birth of the minor*) Relationship with the minor _____ request you to transmit the following securities due to the death of the sole account holder. Original Death Certificate / copy of Death Certificate (duly notarized / attested under seal by a Gazetted Officer) is attached herewith.

*Please attach relevant proof

Name of the deceased BO:
Account Number of the deceased BO:

DP ID									Client ID								
Date of the Deceased Sole Holder																	

Kindly transmit all securities in the deceased BO's account mentioned above to the BO account mentioned below.

Details of the Successor (s)

Sr. No	Name of the Successor (s)/Nominee / Legal Heir/Successor to the Estate of the deceased / Administrator of the Estate of the deceased	DP ID								Client ID							

Details of Transmission				
Sr. No	**Name of the Security**	**ISIN**	**Quantity of securities to be transmitted**	**Percentage**

Attach an annexure duly signed by the Nominee(s)/ Successor / Guardian of the successor or nominee(s) (in case of Minor), if the space above is insufficient.

(Nominees / Successor / Guardian of successor or nominee(s) (in case of Minor)

	Nominee(1) Successor/Guardian of successor/Nominee	**Nominee(2) Successor/Guardian of successor/Nominee**	**Nominee(3) Successor/Guardian of successor/Nominee**
Name			
Signature			

==========(Please tear here)==========

Acknowledgement Receipt

Application No. **Date: -**

We hereby acknowledge receipt of the instructions for transmission of securities from the deceased BO's account to the account of the Nominee(s) / Successor / Guardian of the successor or nominee(s) (in case of Minor), as per details given

on the transmission form.

Account number of the deceased BO

DP ID										Client ID								

Successor BO Name(s)		
First/Sole Holder	**Second Holder**	**Third Holder**
Documents Submitted		

Subject to verification.

Depository Participants Seal & Signature