

Nomination Form

To, VARDHAMANGLOBAL SHARECOM PVT LTD SHOP NO G-1, PLOT NO A19, B37 38 SDC OASIS JAIPUR- 302004										FORM FOR NOMINATION <i>(To be filled in by individual applying singly or jointly)</i>													
Date	D	D	M	M	Y	Y	Y	Y	UCC/ DP ID							Client ID							
I/We wish to make a nomination. <i>[As per details given below]</i>																							
Nomination Details																							
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets/ security balances held/lying in my/our account in the event of my / our death.																							
Nomination can be made upto threenominees in the account.						Details of 1st Nominee						Details of 2nd Nominee						Details of 3rd Nominee					
1	Name of the nominee(s) (Mr./Ms.)																						
	First and Last Name																						
2	*Percentage of allocation of securities																						
	<input type="checkbox"/> Equally <small>[If not equally, please specify percentage]</small>					%						%						%					
	OR																						
	<input type="checkbox"/> Share of each Nominee																						
<i>Any odd lot after division shall be transferred to the first nominee mentioned in the form.</i>																							
3	Relationship With the Applicant/BO(If Any)																						
4	Address of Nominee(s)																						
	City / Place:																						
	State &																						
	Country:																						
	PIN Code																						
5	Mobile / Telephone No. of nominee(s)																						
6	Fax No.																						
7	Email ID of nominee(s)																						
8	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"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID																						
Sr. Nos. 9-17 should be filled only if nominee(s) is a minor:																							
9	Date of Birth {in case of minor nominee(s)}																						
10	Name of Guardian (Mr./Ms.) {in case of minor nominee(s)}																						
11	Address of Guardian(s)																						



	City/ Place: State & Country:						
		PIN Code					
12	Age						
13	Mobile / Telephone no. of Guardian						
14	Fax No.						
15	Email ID of Guardian						
16	Relationship of Guardian with nominee						
17	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"/> Aadhaar <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 (Mr./Ms.)							
Second Holder (Mr./Ms.)							
Third Holder (Mr./Ms.)							

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.

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

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.

=====(Please Tear Here)=====

Acknowledge Receipt

Application No.:

Date:

We hereby acknowledge the receipt of the Nomination form:

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