

## TRANSMISSION REQUEST FORM

(In case of death of the sole holder)

|         |              |            |                         |         |                  | (        | cuse or          | ucutii t | ,, c    | 50.0    |        | · · · · |       |        |       |       |      |      |        |       |          |       |                        |
|---------|--------------|------------|-------------------------|---------|------------------|----------|------------------|----------|---------|---------|--------|---------|-------|--------|-------|-------|------|------|--------|-------|----------|-------|------------------------|
| Applic  | cation No    | э.         |                         |         |                  |          |                  | Date     | e       |         |        |         |       |        |       |       |      |      |        |       |          |       | ]                      |
| (Pleas  | e fill all t | he deta    | ils in <b>Blo</b>       | ck Let  | <b>ters</b> in E | nglish)  |                  |          |         |         |        | •       |       |        |       |       |      |      |        |       |          |       | _                      |
| _       |              |            |                         |         |                  |          |                  |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
| To,     |              |            |                         |         |                  |          |                  |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
|         |              |            | <b>NANCI</b><br>hna Nag |         |                  |          | ITED<br>oad, Gha | tkopar ( | (E), Mu | umbai   | 400    | 077.    |       |        |       |       |      |      |        |       |          |       |                        |
| I/we,   |              | e(s) / Su  |                         |         |                  |          |                  |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       | ationship<br>te / copy |
| of Dea  | ath Certi    | ficate (d  | duly nota               | rized / | attested         | under    | seal by a        | Gazett   | ed Offi | icer)   | is att | tach    | ed he | erewit | th.   |       |      |      |        |       |          |       |                        |
| *Plea   | se atta      | ch rele    | vant pro                | oof     |                  |          |                  |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
| N       | 6.11         |            | L DO                    |         |                  |          |                  |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
|         | of the d     |            | 1 BO:<br>e deceas       | sed BO: |                  |          |                  |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
| DP ID   | 1            | 2          | 0                       | 9       | 4                | 0        | 0                | 0        | Clien   | t ID    |        |         |       |        |       |       |      |      |        |       | Т        |       |                        |
| Date of | the Dec      | eased S    | ole Hold                | er      |                  |          | 1 -              |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
|         |              |            |                         |         |                  |          |                  |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
| Kindly  | transmi      | it all sec | urities in              | the de  | ceased E         | 30's acc | count me         | ntioned  | above   | e to th | e BC   | ) aco   | count | men    | tione | ed be | low. | Deta | ils of | the S | Succ     | essor | (s)                    |
| Sr.     | Na           | me of t    | he Suc                  | essor   | (s)/No           | minee    | / Legal          |          |         |         |        | DF      | ) ID  |        |       |       |      |      |        | Clie  | nt I     | D     |                        |
| No      | Heir/        | Succes     | sor to t                | he Est  | ate of           | the d    | lecease          |          |         |         |        |         |       |        |       |       |      |      |        |       |          |       |                        |
|         | Ad           | ministi    | rator of                | tne Est | tate or          | tne ae   | ceasea           |          |         |         |        |         |       | 1      |       |       |      |      |        |       |          | Τ     |                        |
|         |              |            |                         |         |                  |          |                  |          | + +     | +       |        |         |       |        |       |       |      |      |        |       | <b> </b> | +     |                        |

| Details of 1 | <b>Transmission</b>  |      |  |            |
|--------------|----------------------|------|--|------------|
| Sr.<br>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 |  |  |   |



|  | ======================================   |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Application No.  | Date: -  |  |  |  |  |  |
| We hereby acknowledge receipt of the instructions for transmission Successor / Guardian of the successor or nominee(s) (in case of Minor | n of securities from the deceased BO's account to the account of the Nominee(s)/r), as per details given on the transmission form. |  |  |  |  |  |

| First/Sole Holder | Second Holder | Third Holder |
|-------------------|---------------|--------------|
|                   |               |              |
|                   |               |              |
| ments Submitted   | •             | •            |
|                   |               |              |

Subject to verification.

**Depository Participants Seal & Signature**