

(To be given by new karta and other surviving members of HUF in the event of death of Karta)

To,

Date:

Axis Securities Ltd.  
Unit No. 1001, 10th Floor, Level – 6,  
Plot No. 4/TTC, Q2 Building,  
Aurum Q Parc, Thane Belapur Road,  
Ghansoli, Navi Mumbai-400710  
E-mail: **dphelp@axisdirect.in**,  
Tel. no.: 022 6851 5400

DP ID	I	N	3	0	4	2	9	5
Client ID								

1	Name of the HUF					
2	Name of Deceased Karta					
3	Death certificate of Karta is enclosed (Original/ Notarized / attested by gazette officer/attested by New Karta subject to verification with the original/ death certificate downloaded from the online portal of Government carrying digital or facsimile signature of the issuing authority) <i>[Please tick]</i> <input type="checkbox"/>					
4	I/We intend to continue the HUF in its current status even after the sad demise of Karta <i>[Please tick]</i> <input type="checkbox"/>					
5	I/We do not have any objection whatsoever in appointing new Karta as per following details <i>[Please tick]</i> <input type="checkbox"/>					
6	Details of Newly Appointed Karta					
	a) Eldest coparcener <input type="checkbox"/>					
	b). A coparcener appointed by an agreement reached amongst all the coparceners <input type="checkbox"/>					
	a) Name of New Karta					
	b) Date of Birth	c) Gender <i>(Please tick)</i>				
	d) PAN	Male				
	e) Aadhaar	Female				
<i>Photograph of new Karta of HUF</i>						
We state that the below list of surviving members is complete and exhaustive, and does not leave out any member of the HUF. We confirm that this list is accurate in all respect whatsoever. We also state that all the information provided herein is complete and accurate in all respect and that all the members of the HUF are fully aware of the above request made to the Participant and there is no pending dispute, difference, objection or claim to the same among any of the members of the HUF in this regard.						
7	List of Surviving members of HUF <i>[In case space for providing list of surviving member is not sufficient please use separate sheet]</i>					
	Sr. No.	Date of Birth (DD/MM/YY)	Gender	Relation with Karta	Coparcener/ Member (please specify)	Signature & Date (In case of a minor to be signed by Guardian)
	1					
	2					
	3					
8	Name of new Karta	Signature of New Karta				