

NSDL - Name Deletion In Joint Account Upon Transmission Annexure II

Aurum Q P Level – 6, F	_	nit No. 1001, 10th Floor, hane - Belapur Road, ode - 400710	Date: DD MM YYYY				
Account N	umber		_				
DP ID		Client ID					
Account	holder's details						
Account	Holder Indicator	Name of Joint Account Holder(s)	Tick against the holder(s) who has/have deceased				
First Hol	der						
Second I	Holder						
Third Holder							
Self-attested copy of death certificate of the deceased holder or subject to verification with the original or Original death certificate or copy of the death certificate duly attested by a notary public or by a gazetted officer or death certificate downloaded from the online portal of Government carrying digital/facsimile signature of the issuing authority.							
Declarat	ion:						
I/We, the undersigned, being the surviving holder(s) in the joint account, hereby request you to delete the name of the deceased account holder(s) and continue to maintain the account in the sole or joint surviving names in the same order.							
		I not be held liable for any impact on the pending ue to deletion of the name and monitoring of all s	requests related to i.e. demat / remat / conversion / re-conversion uch pending requests, if any will be done by us.				
(Please tick anyone) I/We confirm that there are no changes in the residential address(es), mobile number(s), email address(es), bank account details, annual income, and nominee(s) of the surviving holder(s).							
Or	Or						
I/We inform that there are changes in the residential address(es), mobile number(s), email address(es), bank account detail(s), annual income and nominee(s) of the surviving holder(s) and I/We wish to update such changes in the demat account at the time of processing transmission requests. # # Participants are advised to collect the required information as per the extant norms of SEBI/NSDL.							
Or I/We inform that there are changes in the residential address(es), mobile number(s), email address(es), bank account details, annual income, and nominee(s) of the surviving holder(s). The updated information will be provided as per the extant guidelines of SEBI/NSDL after the transmission							
of securities.							
(Please tick if applicable) - Pursuant to the name deletion of the deceased holder(s), the joint account becomes a Sole/single-holding account, and the choice of nomination was not provided earlier, I request ASL to update the choice of nomination nomination or opt out of opt out of nomination as per the enclosed request form							
Signature of surviving joint holder(s)							
Sr.No.	Name of the Sur	viving Joint Holder(s)	Signature				



			DEMISE RE	PORTING				
To, Axis Securities Ltd. Aurum Q Parć, Q2 Bui Level – 6, Plot No. 4/1 Navi Mumbai, Pin Cod	LTTC, Thane - B		li,			Date: D	D MM	1
Dear Sir/Madam,								
Sub.: Intimation of der	nise informatior	l .						
Ref.: PAN		Client ID			Deceased da	ite of birth		
I/We regret to inform	you about the d	emise (Name of the o	deceased person))				
having the above PAN tion / entity. Original of attested PAN copy of	/ Account, whe downloaded / se	re I/We is/are the joi If-attested copy of th	nt holder(s) / reg ne Death Certific	istered nom ate is attach				
Please let us know the for necessary commun								ontact details
Details								
		Legal He	ir / Joint Holder	/ Nominee				
Name								
PAN								
Mobile								
Email								
Address								
Relationship with Deceased holder								
I/We acknowledge and of the above specified for it for any fines or cremit in any form, modern provided by me to any	information is fonsequences as de, or manner, all of the KYC Reg	ound to be false or u required under the r l / any of the informa	Intrue or mislead espective statuto tion provided by for necessary ac	ling or misre ory requirem me, includir tion.	presenting, I/\ ents. I/We hei	Ve am/are av eby authoriz	ware that I/ e you to dis	We may be liab close, share, rel

Encl.: Death certificate – Original downloaded or self-attested copy. PAN or other ID proof of Deceased person – by the claimant. Self-attested PAN card copy(ies) or any other valid ID proof.





KNOW YOUR CLIENT (KYC)							
(Rease fill the form in ENGLISH and in BLOCK LETTERS) A) IDENTITY DETAILS							
1. Name of the Applicant							
1. Name of the Applicant							
2. Father's / Husband's Name							
3. a. Gender Male Female Transgender 3 b. Marital status Sing	gle Married						
3. c. Date of Birth DD MM YYYYY	€ 1st Holder Signature						
4. a. Nationality	-						
4. b. Status Resident Individual Non-Resident Foreign National							
5. a. PAN 5 b. Aadhaar Number, if any	\times \times \times \times \times \times						
6. Specify the proof of the Identity submitted Pan Card Any Others (Please specify							
B) OCCUPATION & INCOME (PLEASE TICK)							
Private Sector Public Sector Govt. Service Business Professional	Agriculturist						
Retired House-Wife Student Other							
	More than 25 Lac As onOR						
Net worth is Rs (Should not be older than 1	year)						
C) ADDRESS DETAILS 1. Residence / Correspondence Address	ress						
The state is a first state of the state of t							
City / Town / Village	PIN Code						
State State	Country						
Specify the Proof of address submitted for Residence / Correspondence Address:							
3. Contact Details:	#Mobile No is "Other then Self" Please select following details. Self Spouse Dependent Parent Dependent children						
Tel (O _{ff}) Tel. (Res.)	#Email ID is "Other then Self" Please select following details.						
Mobile No. Fax No.	Self Spouse Dependent Parent Dependent children						
Email ID							
4. Permanent Address (If different from above, Mandatory for Non-Resident Applicant to spe	eciry overseas address)						
City / Town / Village	PIN Code						
State	Country						
D) DECLARATION							
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief, and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue, or misleading or misrepresenting, I am aware that I may be held liable for it I/we understand that as an SEBI Registered Intermediary, Axis Securities Limited is required to upload / submit my / our KYC details along with a copy of my / our Aadhaar Card and other documents to KRA / CERSAI. I / we herewith give our consent to the Axis Securities Limited to upload / submit my / our Aadhar Card and other documents along with required details to KRA / CERSAII am/we are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digi Locker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only. Place: Signature of the Applicant							
Pidce:							
OFFICE USE ONLY							
☐ Originals verified and Self-Attested Document copies received							
In-Person-Verification (IPV) Done a. Name of the Person							
l. Decimation							
b. Designation							
c. Name of Organisation							
Date: Para Lylylyly							





(Rease fill the form in ENGLISH and in BLOCK LETTERS) A) IDENTITY DETAILS						
1. Name of the Applicant						
2. Father's / Husband's Name						
3. a. Gender Male Female Transgender 3 b. Marital status Single Married						
3. c. Date of Birth DD MM YYYY						
4. a. Nationality Indian Other (Please specify)						
4. b. Status Resident Individual Non-Resident Foreign National						
5. a. PAN 5 b. Aadhaar Number, if any XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX						
6. Specify the proof of the Identity submitted Pan Card Any Others (Please specify)						
B) OCCUPATION & INCOME (PLEASE TICK)						
☐ Private Sector ☐ Public Sector ☐ Govt. Service ☐ Business ☐ Professional ☐ Agriculturist						
Retired House-Wife Student Other						
Income per annum: Rs. <1 Lac 1 to 5 Lac 5 to 10 Lac 10 to 25 Lac More than 25 Lac As onOR						
Net worth is Rs (Should not be older than 1 year)						
C) ADDRESS DETAILS						
1. Residence / Correspondence Address Correspondence Address Residence Address						
City / Town / Village PIN Code						
State Country Country						
2. Specify the Proof of address submitted for Residence / Correspondence Address:						
3. Contact Details: #Mobile No is "Other then Self" Please select following details. Self Spouse Dependent Parent Dependent children						
Tel (O ff) #Email ID is "Other then Self" Please select following details.						
Mobile No. Self Spouse Dependent Parent Dependent children						
Email ID						
4. Permanent Address (If di fferent from above, Mandatory for Non-Resident Applicant to specify overseas address)						
City / Town / Village PIN Code						
State Country Country						
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief, and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue, or misleading or misrepresenting, I am aware that I may be held liable for it I/we understand that as an SEBI Registered Intermediary, Axis Securities Limited is required to upload / submit my / our KYC details along with a copy of my / our Aadhaar Card and other documents to KRA / CERSAI. I / we herewith give our consent to the Axis Securities Limited to upload / submit my / our Aadhar Card and other documents along with required details to KRA / CERSAII am/we are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digi Locker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.						
Dutc.						
OFFICE USE ONLY						
Originals verified and Self-Attested Document copies received						
In-Person-Verification (IPV) Done- a. Name of the Person						
b. Designation						
c. Name of Organisation						
Date:						



First /Sole Holder /Authorised Signatory

Account Details Addition/Modification Request Form (Trading/Demat A/c)

	(ITauling / Delitat A	./C/
CDSL DP ID 1 2 0 4	9 2 0 0 -	Date: DD MM YYYY
	0 4 2 9 5 -	PAN
Dear Sir/Madam.		TRADING Code
I/We request you to upd		our all Trading Account/s (Primary & Sub accounts - if any) & ng managed by the same set of Authorised signatory/ies - in case of
Please fill all the details in	n BLOCK LETTER in english & fill separate requ	uest for NSDL & CDSL (Please mark on the appropriate column)
FATCA Declaration: I/we of POA or Mandate hold		nality/ Citizenship/ Tax Residency/ Address/ Telephone No./ Addres
(If answer to your question	on is 'No', then please submit FATCA Declaration	on seperately for each holder.)
PART A - ADDRESS &	CONTACT DETAILS Please fill and submit the	KRA KYC form seperately
Correspondence	Permanent / Registered Both (Use sep	perate forms if correspondence and permanent address are different)
Address		
	City	
PIN*	State	Country
Mobile	Belongs to Self Spouse	☐ Dependent Parent ☐ Dependent Children
Email Id		
	Belongs to Self Spouse	Dependent Parent Dependent Children
PART B - OTHER DEAT	rils	
OCCUPATION AND INC		
Occupation:		
☐ Private Sector ☐ Retired Income per annum (in	Public Sector Govt. Service House-Wife Student	Business Professional Agriculturist Other
		25 Lac to 1 Crore Above 1 Crore
Networth: (in Rs.)		(Networth should not be older than 1 year)
		of income / financial is mandatory. (Plesae refer checklist)
BANK MODIFICATION Default Bank A/c for	//C / ! !! / ! !	count Dividend Account#] For all account shall be considered as default bank account for Crediting the funds, fo s an additional bank accounts)
Bank Name & Branch A	ddress	
Bank A/c No.		A/c Type
MICR No		IFSC Code
# Demat Bank details fo	r Dividend account (If different from above)	
Bank Name & Branch A	ddress	
Bank A/c No.		A/c Type
MICR No		IFSC Code
DEMAT MODIFICATION		ut Additional non-default account added demat a/c will be considered as default demat a/c for securities payout)
DP Name	DPID	Demat Account Number
		Link De-link
		Link De-link
tion is found to be false, mislead on this form changes or become	ling, or misrepresented, I/We may be held responsible for it.	the best of my/our knowledge and belief. I/We understand that if any of the inform I/We also agree to inform Axis Securities Limited within 7 days in case any informations and conditions outlined on page 2 In case of email/mobile updation, I/We herel/mobile number.
Namo	Namo	Namo

Second Holder Signature

DOCUMENTATION REQUIRED FOR PROCESSING ACCOUNT MODIFICATION REQUESTS

Annexure - I: Documents Required

- Supporting documents (applicable as per below matrix) must be
- attested by Sole/all Joint Holders/ Authorized signatories as per mode of operations For Non-Individual accounts
- duly certified as 'Verified with Original' by Branch Official under branch stamp (with his/her Full Signature mentioning Name, Designation and Employee code)
- Trading Account Holder must be Sole/ First holder in Bank/ Demat Account to be linked with Trading Account
- If multiple bank accounts are available but not specified, the Axis Bank account will be considered the default for crediting funds.
 Accounts with other banks will be linked as additional bank accounts
- If multiple demat accounts are available but not specified, the newly added demat account will be considered the default for securities payout
- The modification request form (alongwith applicable supporting documents) are required to be dispatched/ submitted to:

Axis Securties Limited, Operations Department

Aurum Q Parć, Q2 Building, Unit No. 1001, 10th Floor, Level – 6, Plot No. 4/1 TTC, Thane - Belapur Road, Ghansoli, Navi Mumbai, Pin Code – 400710.

A) Common Documents:

- Application Form Duly Filled and signed by All Holders/ Authorized signatories as per mode of operations – For Non-Individual accounts
- Proof of Identity (Of Sole Holder or either of Holders Visiting the Branch and with Identifiable Photograph)- Copy of any of the following documents
- 1) PAN Card
- 2) UIDAI (Unique Identification Authority of India)- Aadhaar Card
- 3) Passport, which is valid
- 4) Voter ID Card
- 5) Driving License which is valid

C) Additional Documents: Addition of Bank Details

- Proof of Bank Account (In the name of Sole/First Holder)-Copy of any of the following documents consisting MICR details:
- 1) Personalized Cancelled Cheque Leaf
- 2) Bank Statement/ Passbook (with transaction not older than three month)
- 3) Branch MICR confirmation letter with the bank details
- If you wish to give Bank Mandate Letter (BML) for your Axis Bank Account, BML needs to be signed by the client and all joint holders in bank account to be linked with trading account.

B) Additional Documents: Change of Address

- KRA-KYC Form
- Proof of New Address –
 Copy of any of the following documents
- 1) UIDAI (Unique Identification Authority of India)- Aadhaar Card
- 2) Valid Passport
- 3) Valid Driving License
- 4) Voter ID
- 5) NREGA

D) Additional Documents: Addition of Demat Details with Trading Account

- Proof of Demat Account (In the name of Sole/First Holder)-Copy of Client Master List (CML) / Holding Statement duly attested by issuing Depository
- Demat Debit and Pledge Instruction (DDPI) Duly executed on non-judicial stamp paper of Rs. 500/- or with franking of equivalent amount & signed by Client & all Joint holders in Demat account to be linked with the Trading Account.
- SMS Alert Facility must be enabled in New Demat Account to be linked with Trading Account(Separate Request for enabling SMS Alert facility needs to be obtained if already not activated)

E) Finacial income proof for Derivatives / F&O segment clients: (Any one)

- 1) Copy of ITR Acknowledgement (Gross annual income exceeding INR 2,00,000)
- 2) In case of salary income Salary Slip, Copy of Form 16 (Minimum INR 18,000 gross monthly salary)
- 3) Copy of demat account holding statement (Minimum value of Free Balance ISIN of INR 50,000)
- 4) Any other relevant documents substantiating ownership of asset (Income of more than INR 2,00,000)
- 5) Copy of Annual Accounts Net worth certificate (Income of more than INR 5,00,000)
- 6) Bank account statement for last 6 months (Minimum credit of more than INR 10,000 in a month)
- 7) Self declaration with relevant supporting documents (Income of more than INR 2,00,000)

Terms and conditions related to FATCA declaration.

I/We understand that Axis Securities Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. The Axis Securities Limited is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

- 1) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- 2) I/We agree that as may be required by domestic regulators/tax authorities, Axis Securities Limited may also be required to report reportable details to CBDT or close or suspend my account.
- 3) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.
- 4) I/We permit/authorise Axis Securities Limited to collect, store, communicate and process information relating to the Account and all transactions therein, by Axis Securities Limited and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- 5) I / We hereby accept and acknowledge that Axis Securities Limited shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me / us to Axis Securities Limited.

I/We shall indemnify Axis Securities Limited for any loss that may arise to Axis Securities Limited on account of providing incorrect or incomplete information

Form Type

Sr. Nos.9 should be filled mandatorily if nominee(s) is a minor:

Name of Guardian (Mr./Ms./Others)

9

First Name Middle Name Last Name



FORM FOR NOMINATION (To be filled in by individual applying singly or jointly) Date: D D Nomination Registration No. _ NSDL CDSL (Please select any one) Trading ID NSDL DP ID I N 3 0 4 2 9 5 CDSL DP ID 1 2 0 4 9 2 0 0 Demat Client ID NOMINATION OPTION I/we the sole holder / joint holders hereby declare that : I/ We hereby nominate the following person(s) who shall receive all the assets held in my/ our account/ folio in the event of my/ our demise, as trustee and on behalf of my/ our legal heir(s)* I / We hereby confirm that I / we do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appoinment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assests held in the trading / demat account. NOMINATION DETAILS Nomination can be made upto three nominees in the account. Details of 1st Nominee Details of 2nd Nominee Details of 3rd Nominee Name of the nominee(s) (Mr./Ms./Others) First Name Middle Name Last Name Share of each Nominee A) For NSDL Equally [% [If not equally, please specify Any odd lot after division shall be transferred to the first nominee mentioned in the form. percentage] Percentage of allocation For CDSL B) of securities Residual Securities (please tick any one nominee. If tick not marked default will be first nominee): Note: Residual securities in case of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distributing of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any. Relationship with the applicant 3 Address of Nominee(s) City: State: Pin: Country: Mobile/Telephone No. of nominee(s) Email ID of nominee(s) 6 PAN 7 Aadhaar / UID (Last 4 Digits) Driving License Passport 8 D D M M M Date of Birth

10	Address of Guardian(s)			
	City:			
	State:			
	Pin:			
	Country:			
11	Mobile/Telephone No. of Guardian			
12	Email ID of Guardian			
13	Relationship of Guardian with nominee			
14	Guardian Identification details:			
	PAN			
	Aadhaar / UID (Last 4 Digits)			
	Driving License			
	Passport			
(please	want the details of my/ our nominee to be tick, as appropriate) me of nominee(s) Nomination: \(\bigcap \)		moralis, provided to me, as by t	ne / inc / or as follows.
Name & Signature of Account Holder(s)		Sole/1st Holder	2nd Holder	3rd Holder
Name(s) of holder (s)				
Signa	ture(s) of holder (s)	Signature of 1st Holder	Signature of 2nd Holder	Signature of 3rd Holder
	ture(s) or floract (s)	Signature of 15t Holdes	orginature of Error forder	Jightatare of ord Holder
Detai	ls of Witness for Nomination	Witness 1		Witness 2
Name of the Witness		VVIIIIess 1		VVILLIESS Z
Addre	ess of Witness			
Signa	ture of Witness			
Place :			Date	

Notes:

- 1. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
- 2. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
- 3. The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
- 4. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
- 5. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
- 6. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
- 7. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.