

Date:

DP ID

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 Client ID

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(a) I / We are receiving the assets of the deceased's demat account as a trustee to his / her legal heir(s).

(b) I / We shall extend all co-operation in transferring such assets to the legal heir(s) either suo moto or when approached by the latter.

(c) The Participant legally and validly discharged upon transmission of assets to the nominee(s). In case I / We fail to discharge my / our liability, or if there is any dispute between me / us and the legal heir(s) of the deceased, then the Participant or NSDL, shall not be party to such disputes.

Sr.No.	Name of the Nominee(s)	Signature
1		
2		
3.		

DEMISE REPORTING

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

[illegible]

Dear Sir/Madam,

Sub.: Intimation of demise information.

Ref.: PAN Client ID Deceased date of birth

I/We regret to inform you about the demise (Name of the deceased person) _____
having the above PAN / Account, where I/We is/are the joint holder(s) / registered nominee(s) in the accounts maintained with your organisation / entity. Original downloaded / self-attested copy of the Death Certificate is attached for your kind action. I/We am/are enclosing the self-attested PAN copy of claimant or any other valid ID proof for necessary validation.

Please let us know the procedure and documentation requirements to transmit the units in my/our favour. Also, note my/our contact details for necessary communication / contacts in this regard and not for updation in KYC records or in any of the accounts.

Details

Legal Heir / Joint Holder / Nominee	
Name	
PAN	
Mobile	
Email	
Address	
Relationship with Deceased holder	

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be liable for it for any fines or consequences as required under the respective statutory requirements. I/We hereby authorize you to disclose, share, rely, remit in any form, mode, or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the KYC Registration Agency(ies) for necessary action.

~~Joint Holder1 / Nominee1~~

~~Joint Holder~~ / Nominee

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.