

**NOMINATION FORM**

To be filled in by individual applying singly or jointly

**LAKSHMISHREE INVESTMENT AND SECURITIES PVT. LTD**

2nd Floor, 57 Gandhi Nagar, Sriga, Varanasi - 221 010

 Date   -   -     UCC / DP ID         Client ID        

I/We wish to make a nomination. [ As per details given below ]




**NOMINATION DETAILS**

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.

Nomination can be made upto three nominees in account.		Details of 1 <sup>st</sup> Nominee	Details of 2 <sup>nd</sup> Nominee	Details of 3 <sup>rd</sup> Nominee
1	<b>Name of the nominee(s) (Mr./Ms.)</b>			
2	<b>Share of each Nomination</b> <b>Equally</b> (if not equally, Please specify percentage )	%	%	%
		Any odd lot after division shall be transferred to the first nominee mentioned in the form		
3	<b>Relationship with the applicant (if Any )</b>			
4	<b>Address of Nominee(s) :</b>  City / Place :  State & Country :  PIN Code :			
5	<b>Mobile / Telephone No. of nominee(s)</b>			
6	<b>E-mail ID of Nominee(s)</b>			
7	<b>Nominee Identification details-</b> [ Please tick any one of following and provide details of same ] <input type="checkbox"/> Photograph & Signature , <input type="checkbox"/> PAN, <input type="checkbox"/> Saving bank A/C No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			

**Sr. Nos. 8-14 should be filled only if nominee(s) is a minor :**

8	<b>Date of Birth { In case of Minor Nominee(s)}</b>			
9	<b>Name of Guardian ( Mr./Ms.) {in case of minor nominee(s)}</b>			
10	<b>Address of Guardian(s)</b>			
4	<b>Address of Nominee(s) :</b>  City / Place :  State & Country :  PIN Code :			

5	<b>Mobile / Telephone No. of nominee(s)</b>			
6	<b>E-mail ID of Nominee(s)</b>			
7	<b>Nominee Identification details-</b> [ Please tick any one of following and provide details of same ] <input type="checkbox"/> Photograph & Signature , <input type="checkbox"/> PAN, <input type="checkbox"/> Saving bank A/C No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat			
<b>Name(s) of holder(s)</b>				<b>Signature(s) of holder</b>
Sole / First Holder (Mr. / Ms.)				 Signature of Client
Second Holder (Mr. / Ms.)				 Signature of Client
Third Holder (Mr. / Ms.)				 Signature of Client
* Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature  Note:- This nomination shall supersede any prior nomination made by the account holder(s), if any. the trading Member / Depository Participant shall provide acknowledgment of the nomination form to the account holder(s).				

## LAKSHMISHREE INVESTMENT AND SECURITIES PVT. LTD

### DECLARATION FORM FOR OPTING OUT OF NOMINATION

To		Date	D	D	-	M	M	-	Y	Y	Y	Y	
Trading Member / Participant's Name													
Trading Member / Participant's Address													

UCC / DP ID	1	2	0	5	9	1	0	0	Client ID ( only for Demat Account )					
	Prefix		First Name				Middle Name				Last Name			
Sole / First Holder Name														
Second Holder Name														
Third Holder Name														

I/ We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / Demat account and understand the issue involved in non-appointment 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 assets held in the trading / Demat account.

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_



Signature of Client



Signature of Client



Signature of Client

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