

Request for Transmission of Securities by the Nominee or Legal Heir (For Transmission of securities on death of the Sole Holder)	Annexure C - ISR5
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To,

The

___ RTA Name _____

___ RTA Address _____

___ Name of the Issuer Company _____

Name of the Claimant(s) Mr./Ms.					
Name of the Guardian in case the claimant is a minor → Date of birth of the minor* Mr./Ms.					
Relationship with Minor:	Father	Mother	Court Appointed Guardian*		
[Multiple PAN may be entered] PAN (Claimant(s)/Guardian):					
KYC Acknowledgement attached			KYC form Attached		
Tax Status:					
Resident Individual	Resident Minor (through Guardian)	NRI	PIO	Others (Please Specify)	

*Please attach relevant proof

I/We, the Claimant(s) named hereinabove, hereby inform you about demise of the below mentioned securities holder(s) and request you to transmit the securities held by the deceased holder(s) in my/our favour in my/our capacity as -					
Nominee	Legal Heir	Successor to the Estate of the deceased	Administrator of the Estate of the deceased		
Name of the deceased holder(s)					Date of Demise**
1)					DD/MM/YYYY
2)					DD/MM/YYYY
3)					DD/MM/YYYY

*Please attach certified copy of Death Certificate.

Securitie(s) & Folio(s) in respect of which Transmission of securities is being requested

Name of the Company	Folio No.	No. of Securities	% of Claim@
1)			
2)			
3)			
4)			

@ As per Nomination or as per the Will/Probate/Succession Certificate/Letter of Administration/Legal Heirship Certificate(or its equivalent certificate)/Court Decree, if applicable.

Contact details of the Claimant(s) [Provision for multiple entries may be made]

Mobile No.	+	9	1														Tel. No.	-													
E-mail Address																															
Address (Please note that address will be updated as per address on the KYC Form/KYC Registration Agency records)																															
Address Line1:																															
Address Line2:																															
City:									State:									PIN Code:													

Bank Account Details of the Claimant

Bank Name:													MICR No.																															
Branch Address1:																																												
Branch Address2:																																												
Account Number:													IFSC Code:																															
Account Type (√):																																												
SB									CURRENT									NRO									NRE									FCNR								
City:									State:									PIN Code:																										

Please attach & tick √ Cancelled cheque with claimant's name printed or Claimant's Bank Statement/Passbook (duly attested by the bank manager)

I also request you to pay the unclaimed amounts; if any in respect of the deceased securities holder(s) by direct credit to the bank account mentioned above.

Additional KYC information (Please tick √ whichever is applicable)

Occupation:	Private Sector Service	Public Sector Service	Government Service	Business	Professional	
Agriculturist	Retired	Home Maker	Student	Forex Dealer	Others (Please Specify)	
The Claimant is:	A Politically Exposed Person		Related to a Politically Exposed Person		Neither (Not Applicable)	
Gross Annual Income (Rs.):	Below 1Lac	1-5Lacs	5-10Lacs	10-25Lacs	25Lacs-1Crore	≥1Crore

FATCA and CRS information

Country of Birth:		Place of Birth:	
Nationality:			
Are you a tax resident of any country other than India?		Yes	No
If Yes, please mention all the countries in which you are resident for tax purposes and the associated taxpayer Identification Number and its identification type in the column below			
Country	Tax-Payer Identification Number		Identification Type

Nomination@ (Please ✓ one of the options below)

<input type="checkbox"/>	I/We Do Not wish to make a nomination. (Please tick ✓ if you do not wish to nominate anyone)
<input type="checkbox"/>	I/We wish to make a nomination and hereby nominate the person/s more particularly described in the attached Nomination Form to receive the securities held in my/our folio in event of my/our death.

@Guardian of a minor is not allowed to make a nomination on behalf of the minor

Declaration and Signature of the Claimant(s)

I/We have attached herewith all the relevant/required documents as indicate in the attached ready reckoner as per Annexure A.
I/We confirm that the information provided above is true and correct to the best of my knowledge and belief.

I/We undertake to keep _____(Name of the Company) / its RTA informed about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required by the RTAs.

I/We hereby authorize _____(Name of the Company) and its RTA to provide/share any of the information provided by me/us including my holdings in the (name of the company)to any governmental or statutory or judicial authorities/agencies as required by law without any obligation of informing me/us of the same.

Place:	
Date:	Signature of Claimant(s)

Documents Attached:

<input type="checkbox"/>	Copy of Death Certificate of the deceased holder	
<input type="checkbox"/>	Copy of Birth Certificate (in case the Claimant is a minor)	
<input type="checkbox"/>	Copy of PAN Card of Claimant / Guardian	
<input type="checkbox"/>	KYC Acknowledgment Or	KYC from Claimant
<input type="checkbox"/>	Cancelled cheque with claimant's name printed or	Claimant's Bank Statement/Passbook
<input type="checkbox"/>	Nomination Form duly completed	
<input type="checkbox"/>	Annexure D - Individual Affidavit given EACH LEGAL HEIR	
<input type="checkbox"/>	Original Security Certificate(s)	
<input type="checkbox"/>	Annexure E - Bond of Indemnity furnished by LEGAL HEIR	
<input type="checkbox"/>	Annexure F - NOC from other LEGAL HEIR	

*Note: For transmission service requests, Form ISR – 4 as per SEBI Circular SEBI/HO/MIRSD_MIRSD_RTAMB/P/CIR/2022/8 dated January 25, 2022 will not be required.