TRANSMISSION REQUEST FORM

(In case of death of the sole holder)

Application No.		Date	D	D	М	М	Y	Y	Y	Y
(Please fill all the deta	ails in Block Letters in English)									

To, BONANZA PORTFOLIO LIMITED.

Bonanza House, Plot No.M-2, Cama Industrial Estate, Walbhat Road, Goregaon (E)- Mumbai - 400063. Tel No.-022 30863700/67605500

Dear Sir / Madam,

I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (in case the claimant is a Minor- Date of Birth of the minor*) Relationship with the minor______request you to transmit the following securities due to the death of the sole account holder. Original Death Certificate / copy of Death Certificate (duly notarized / attested under seal by a Gazetted Officer) is attached herewith.

*Please attach relevant proof

Name of the deceased BO:

Account Number of th	e dec	easec	BO:							
DP ID						Client ID				
Date of the Decease	ed Sol	e Hol	der							

Kindly transmit all securities in the deceased BO's account mentioned above to the BO account mentioned below.

Details of the Successor (s)

Sr. No	Name of the Successor (s)/Nominee / Legal Heir/Successor to the Estate of the deceased / Administrator of the Estate of the deceased	DP ID							Cli	ent	ID			

Deta	Details of Transmission										
Sr. No	Name of the Security	ISIN	Quantity of securities to be transmitted	Percentage							

Attach an annexure duly signed by the Nominee(s)/ Successor / Guardian of the successor or nominee(s) (in case of Minor),

if the space above is insufficient.

(Nominees / Successor / Guardian of successor or nominee(s) (in case of Minor)

	Nominee(1) Successor/Guardian of successor/Nominee	Nominee(2) Successor/Guardian of successor/Nominee	Nominee(3) Successor/Guardian of successor/Nominee
Name			
Signature			

Acknowledgement Receipt Date: -

Application No.

on the transmission form.

We hereby acknowledge receipt of the instructions for transmission of securities from the deceased BO's account to the account of the Nominee(s) / Successor / Guardian of the successor or nominee(s) (in case of Minor), as per details given

Account number of	the d	eceas	sed B	0							
DP ID							Client ID				

Successor BO Name(s)										
First/Sole Holder	Second Holder	Third Holder								
Documents Submitted										

Subject to verification.

Depository Participants Seal & Signature