

FORM FOR FRESH NOMINATION / CHANGE OF EXISTING NOMINATION

| | | | | | | | | | | | | | | | | | | | | |
|----|--------------------|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 1. | Name of 1st Holder | Folio No. | | | | | | | | | | | | | | | | | | |
| 2. | Name of 2nd Holder | Folio No. | | | | | | | | | | | | | | | | | | |
| 3. | Name of 3rd Holder | Folio No. | | | | | | | | | | | | | | | | | | |

ANNEXURE - A FORMAT FOR PROVIDING NOMINATION

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.

| Sr. No. | Nomination can be made upto three nominees in the account. | Details of 1st Nominee | Details of 2nd Nominee | Details of 3rd Nominee |
|---|--|---|---|---|
| Mandatory Details | | | | |
| 1. | Name of the nominee(s) (Mr./Ms.)* | | | |
| 2. | Share of each Nominee Equally (If not equally, please specify percentage) | <input type="text"/> <input type="text"/> <input type="text"/> % | <input type="text"/> <input type="text"/> <input type="text"/> % | <input type="text"/> <input type="text"/> <input type="text"/> % |
| Any odd lot after division shall be transferred to the first nominee mentioned in the form. | | | | |
| 3. | Relationship with the Applicant (If Any) | | | |
| 4. | Minor Date of birth | | | |
| 5. | Guardian name | | | |
| *Date of Birth and Name of Guardian to be provided in case of minor nominee(s) | | | | |
| Non Mandatory Details | | | | |
| 6. | Address of Nominee(s)/ Guardian in case of Minor City / Place / State / Country PIN Code | | | |
| 7. | Mobile/Telephone no. of nominee(s) / Guardian in case of Minor | Mobile No. <input type="text"/> Tel. No. <input type="text"/> | Mobile No. <input type="text"/> Tel. No. <input type="text"/> | Mobile No. <input type="text"/> Tel. No. <input type="text"/> |
| 8. | Email ID of nominee(s)/ Guardian in case of Minor | | | |
| 9. | Nominee/ Guardian (in case of Minor) Identification details (Please tick any one of following and provide details of same) | <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar Card <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Saving Bank A/c no. _____ <input type="checkbox"/> Demat A/c ID _____ | <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar Card <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Saving Bank A/c no. _____ <input type="checkbox"/> Demat A/c ID _____ | <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar Card <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Saving Bank A/c no. _____ <input type="checkbox"/> Demat A/c ID _____ |
| | *Name and Signature of Holder | First Unitholder Name _____ First Unitholder Signature | Second Unitholder Name _____ First Unitholder Signature | Third Unitholder Name _____ First Unitholder Signature |

*Witness Name

*Witness address

| |
|-------------------|
| Witness Signature |
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If the account holder affixes thumb impression, instead of signature.

ANNEXURE - B DECLARATION FOR OPTING-OUT OF NOMINATION

I/ We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our Mutual Fund Folio and understand the issues 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 Mutual Fund Folio, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the Mutual Fund Folio.

| | | | |
|-------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| *Name and Signature of Holder | First Unitholder Name | Second Unitholder Name | Third Unitholder Name |
| | _____ First Unitholder Signature | _____ First Unitholder Signature | _____ First Unitholder Signature |

*Witness Name

*Witness address

| |
|-------------------|
| Witness Signature |
|-------------------|

If the account holder affixes thumb impression, instead of signature.