## TRANSMISSION REQUEST FORM

(In case of death of the sole holder)

## **Muthoottu Mini Financiers Ltd.**

Muthoottu Royal Tower, Kaloor, Cochin, Kerala – 682017

	Phone: 0484-2912149, 2912127 E-r DP ID – 13074600 – Central Dep	•				m				
Application No.		Date	D	D	M	M	Y	Υ	Υ	Υ

(Please fill all the details in **Block Letters** in English)

To, **Muthoottu Mini Financiers Ltd. Muthoottu Royal Tower** Kaloor, Cochin - 682017

Dear Sir / Madam,

**PART – I:** (where nomination is recorded)

We, Nominees/ Successor/ Guardian of the successor or nominees (in case of 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.

Name of the deceased BO:

Account Number of the deceased BO:

DP ID	1	3	0	7	4	6	0	0	Client ID								
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Kindly transmit all securities in the deceased BO's account mentioned above to the BO account mentioned below.

## **Details of the Successors**

Sr. No	Name of the Successor (s)	DP ID						Client ID								

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

Attach an annexure duly signed by the Nominees/ Successor / Guardian of the successor or nominees (in case of Minor), if the space above is insufficient.

(Nominees / Successor / Guardian of successor or nominees (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			

## No Objection Statement from other heirs/successors who are non-applicants

1.	I/We, the undersigned, resideceased.	ling at,	am/are legal heir(s) of the said
2.	whatsoever in transmitting th	e any claim of title of the said ne said securities in the name(s) eficial owner account(s) under C	
3.	under DP ID	existing as well as those that m	the client account of Mr./ Mrsat my request, I/We hereby hay accrue to me/us in future in
Sig	ned in the presence of		
	Bank Manager		Signature of the legal heir
Ful	ll Name and Address of Bai	nk Manager:	
Nai Add	me : dress :		
On the	ly one Transmission Request I	nsmission of securities where	on-applicants: nants/non-claimants to the DP of in the intentions of the legal
=	=======================================	======(Please tear here)====	=======================================
App	olication No.	Acknowledgement Receipt	Date: -
acco	hereby acknowledge receipt of the in ount of the Nominees/ Successor / Go transmission form.	nstructions for transmission of securities uardian of the successor or nominees (i	s from the deceased BO's account to the n case of Minor), as per details given on
	ount number of the deceased BO P ID 1 3 0 7	4 6 0 0 Client ID	
_	Successor BO Name(s)		
Ė	First/Sole Holder	Second Holder	Third Holder
Е	Documents Submitted		

Subject to verification.