

TRANSMISSION REQUEST FORM
(In case of death of one / more of the joint holders)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
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(Please fill all the details in **Block Letters** in English)

To,
INDUSIND SECURITIES LIMITED
 (Formerly Known as Reliance Securities Limited)
 11TH FLOOR, R TECH PARK, NIRLON COMPOUND,
 OFF WESTERN EXPRESS HIGHWAY, GOREGAON (E),
 MUMBAI, MAHARASHTRA-400063. Phone-022-41681200
 DPID: -13041400 and SEBI Reg. No. IN-DP-257-2016.

Dear Sir / Madam,

I / We, the joint holder(s) / Successors request you to **transmit** the securities balance from:

DP ID	1	3	0	4	1	4	0	0	Client ID								
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To

DP ID									Client ID								
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Due to the death of -----

----- (Name of the deceased account holder(s)).

Original Death Certificate / copy of Death Certificate (duly notarized / attested under seal by a Gazetted Officer) is attached herewith.

	First / Sole Holder	Second Holder	Third Holder
Name(s) of the surviving holder(s)			
Signature(s) of the surviving holder(s)			

===== (Please tear here) =====

Acknowledgement Receipt

Application No.

Date: -

We hereby acknowledge the receipt of the following instructions for transmission from:

DP ID	1	3	0	4	1	4	0	0	Client ID								
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To

DP ID									Client ID								
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Surviving Holder(s) Name(s)		
First/Sole Holder	Second Holder	Third Holder
Documents Submitted		

Subject to verification.

Depository Participants Seal & Signature