



## AUM CAPITAL MARKET PRIVATE LIMITED

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Date	D	D	M	M	Y	Y	Y	Y	DP ID								Client ID							
										UCC														

I/We wish to make a nomination. [As per details given below]

### Nomination Details







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.

Nomination can be made upto three nominees in the account.		Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1	Name of the nominee(s) (Mr./Ms.)			
2	<div>Share of each Nominee</div> <div>Equally</div> <div>[If not equally, please specify percentage]</div>			
		Any odd lot after division shall be transferred to the first nominee mentioned in the form.		
3	Relationship With the Applicant (If Any)			
4	<div>Address of Nominee(s)</div> <div>City / Place:</div> <div>State &amp; Country:</div> <div>PIN Code</div>			
5	Mobile / Telephone No. of nominee(s) #			
6	Email ID of nominee(s) #			
7	<div>Nominee Identification details #</div> <div>[Please tick any one of following and provide details of same]</div> <div><input type="checkbox"/> Photograph &amp; Signature</div> <div><input type="checkbox"/> PAN <input type="checkbox"/> Proof of Identity</div> <div><input type="checkbox"/> Demat Account ID</div> <div><input type="checkbox"/> Aadhaar Saving Bank account no.</div>	<div>Affix recent passport size Photograph</div> <div></div> <div>Signature / Thumb Impression</div>	<div>Affix recent passport size Photograph</div> <div></div> <div>Signature / Thumb Impression</div>	<div>Affix recent passport size Photograph</div> <div></div> <div>Signature / Thumb Impression</div>

Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:

8	Date of Birth {in case of minor nominee(s)}			
9	Name of Guardian (Mr./Ms.) {in case of minor nominee(s)}			
10	Address of Guardian(s)			

## NOMINATION Details

	City / Place:  State & Country:  PIN Code:			
<b>11</b>	<b>Mobile / Telephone no. of Guardian #</b>			
<b>12</b>	<b>Email ID of Guardian #</b>			
<b>13</b>	<b>Relationship of Guardian with nominee</b>			
<b>14</b>	<b>Guardian Identification details # –</b> [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no.	 Affix recent passport size Photograph  Signature / Thumb Impression	 Affix recent passport size Photograph  Signature / Thumb Impression	 Affix recent passport size Photograph  Signature / Thumb Impression

	Name(s) of holder(s)	Signature	Witness
Sole / First Holder (Mr./Ms.)			Signature: _____
Second Holder (Mr./Ms.)			Name: _____
Third Holder (Mr./Ms.)			Address: _____ _____

\* Signature of witness, along with name & address are required, if the account holder affixes thumb impression, instead of signature.  
 # Optional fields (Information required at Serial Nos. 5, 6, 7, 11, 12 & 14 is not mandatory)

**Note:**

This nomination shall supersede any prior nomination made by the account holder(s), if any.  
 The Trading Member / Depository Participant shall provide acknowledgment of the nomination form to the account holder(s)