CDSL - NOMINATION REQUEST FORM (FOR INDIVIDUALS ONLY)

To,
FORT SHARE BROKING PVT LTD
Corporate Identity Number (CIN):
U067120WB2005PTC106224
Depository Division – CDSL Nomination Form,
9, Rawdon Street, 2nd Floor, Room No-7, Kolkata-700 017

Photograph of Nominee 1

Photograph of Nominee 2

Please paste here a recent passport size **photograph**of the nominee and nominee must sign it half-way across the photograph & the form.

Photograph of Nominee 3

Please paste here a recent passport size **photograph**of the nominee and nominee must sign it half-way across the photograph & the form.

If Nominee is a Minor,

Photograph of Guardian 1

Please paste here a recent passport size **photograph of the Guardian** of minor nominee and **Guardian must sign** it half-way across the photograph & the form.

Photograph of Guardian 2

Please paste here a recent passport size **photograph** of the Guardian of minor nominee and Guardian must sign it half-way across the photograph & the form.

Photograph of Guardian 3

Please paste here a recent passport size **photograph of the Guardian** of minor nominee and **Guardian must sign** it half-way across the photograph & the form.

D	ear	Sir	/IV	la	dar	n,

I/We the Sole Holder/Joint Holders/Guardian (in case of minor) hereby declare that: (Strike Out whatever is not applicable)
I/We do not wish to nominate to anyone for the below mentioned BO account
I/We nominate the following person/s who is entitled to receive security balances lying in my/our account particulars whereof are given below, in the event
of death of the Sole holder or the death of all the Joint Holders

Į		BO Acco	ount Details								
I	Demat Account Number	1 2 0 5 9	3 0 0								
Ì	Name of the Sole/First Holder										
ĺ	Name of the Second Holder										
Ì	Name of the Third Holder										
I	Nomination Details										
Ì	Nominee Name	Nominee 1	Non inee 2	Nominee 3							
I	First Name *										
Į	Middle Name										
Į	Last Name *										
	Address *										
Ì	City *										
	State *										
I	Country *										
	PIN *										
I	Telephone No.										
	Fax No.										
	Email ID										

UID			
*Relationship with the BO:			
Date of birth (mandatory if Nominee is a minor):			
Name of the Guardian of Nomine	e (if the nominee is minor):		
First Name *			
Middle Name			
Last Name *			
Address of the Guardian of nominee *			
City *			
State *			
Country *			
PIN*			
Age			
Telephone			
Fax No			
Email ID			
*Relationship of the Guardian with the Nominee:			
*Percentage of allocation of			
securities			
*Residual Securities [please			
tick any one nominee. If tick not marked default will			
be first nominee]			
Note: Residual securities: incase	e of multiple nominees, please ch	noose any one nominee who	will be credited with residual securities
			one such nominee, then the first
nominee will be marked as nom	linee entitled for residual shares,	if any	
nominee will be marked as nom * Marked is Mandatory field	linee entitled for residual shares,	if any	
* Marked is Mandatory field	namee entitled for residual shares,	·	me/us.
* Marked is Mandatory field		testamentary document executed by	me/us.
* Marked is Mandatory field This nomination shall supersede any prior	nomination made by me/us and also any	testamentary document executed by	me/us. Third Holder
* Marked is Mandatory field This nomination shall supersede any prior	nomination made by me/us and also any Date	testamentary document executed by e : DD / MM / YYYYY	
* Marked is Mandatory field This nomination shall supersede any prior Place :	nomination made by me/us and also any Date	testamentary document executed by e : DD / MM / YYYYY	
* Marked is Mandatory field This nomination shall supersede any prior Place : Name	nomination made by me/us and also any to Date First Holder	testamentary document executed by e : DD / MM / YYYYY	
* Marked is Mandatory field This nomination shall supersede any prior Place : Name Specimen Signature	r nomination made by me/us and also any page 15 Date 15 Date 16 Date 1	testamentary document executed by e : DD / MM / YYYY Second Holder	
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* Marked is Mandatory field This nomination shall supersede any prior Place : Name Specimen Signature	Promination made by me/us and also any of Date First Holder (c) Thumb impression(s). Details of Date of Dat	testamentary document executed by e : DD / MM / YYYY Second Holder	
* Marked is Mandatory field This nomination shall supersede any prior Place : Name Specimen Signature Note: Two witnesses shall attest signature	Promination made by me/us and also any of Date First Holder (c) Thumb impression(s). Details of Date of Dat	testamentary document executed by e : DD / MM / YYYY Second Holder	Third Holder
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