

**NOMINATION FORM (for Trading & Demat A/c)**
**(Annexure-A)**
*(To be filled in by individual applying singly or jointly)*
**RaghuNandan Capital (P) Ltd.**

Regd. Office : Unit No. P04-02A, P04-02B, WTC Building, GIFT City, 4th Floor, Building No. 51A,

Block No. 51, Road 5E, GIFT City, Gandhinagar, Gujarat - 382355

Corp. Office : 26/257B, Sultanganj, Near Ashish Palace, Agra-282004

|       |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |
|-------|---|---|---|---|---|---|---|---|-----------|--|--|--|--|--|--|--|--|
| DATE  | D | D | M | M | Y | Y | Y | Y | UCC       |  |  |  |  |  |  |  |  |
| DP ID |   |   |   |   |   |   |   |   | Client ID |  |  |  |  |  |  |  |  |


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)<br>Mr./Ms.)  |  |                        |                        |
| 2.   | Share of each Nominee   | Equally<br>[if not equally, please specify percentage] | %                      | %                      |
| <i>Any odd lot after division shall be transferred to the first nominee mentioned in the form.</i> |   |  |                        |                        |
| 3.   | Relationship with the Applicant (if any)  |  |                        |                        |
| 4.   | Address of Nominee(s)<br><br>City / Place<br>State / Country<br><br>PIN Code  |  |                        |                        |
| 5.   | Mobile/Telephone No. of Nominee(s)  |  |                        |                        |
| 6.   | Email ID of nominee(s)  |  |                        |                        |
| 7.   | Nominee Identification details -<br>[Please tick any one of following and provide details of same]<br><br><input type="checkbox"/> Photograph & Signature<br><input type="checkbox"/> PAN <input type="checkbox"/> AADHAAR<br><input type="checkbox"/> Saving Bank A/c No.<br><input type="checkbox"/> Proof of Identity<br><input type="checkbox"/> Demat Account ID |  |                        |                        |

| 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)<br>City / Place   |  |  |
|  | State / Country  |  |  |
|  | PIN Code   |  |  |
| 11.  | Mobile/Telephone No. of Guardian   |  |  |
| 12.  | Email ID of nominee(s)   |  |  |
| 13.  | Relationship of Guardian with nominee  |  |  |
| 14.  | Guardian Identification details -<br>[Please tick any one of following and provide details of same]<br><input type="checkbox"/> Photograph & Signature<br><input type="checkbox"/> PAN <input type="checkbox"/> AADHAAR<br><input type="checkbox"/> Saving Bank A/c No.<br><input type="checkbox"/> Proof of Identity<br><input type="checkbox"/> Demat Account ID |  |  |

|                             | Name(s) of Holder(s) | Signature(s) of Holder  |
|-----------------------------|----------------------|---|
| Sole/First Holder (Mr./Ms.) |                      |  |
| Second Holder (Mr./Ms.)     |                      |   |
| Third Holder (Mr./Ms.)      |                      |   |

\*Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature.

Note:

This nomination shall supersede any prior nomination made by the account holder(s), if any.

The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s).

**DECLARATION FORM FOR OPTING OUT OF NOMINATION (Annexure-B)**
**Raghu**nandan Capital (P) Ltd.

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Block No. 51, Road 5E, GIFT City, Gandhinagar, Gujarat - 382355

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|------|---|---|---|---|---|---|---|---|-----|--|--|--|--|--|--|--|--|--|
| DATE | D | D | M | M | Y | Y | Y | Y | UCC |  |  |  |  |  |  |  |  |  |
|------|---|---|---|---|---|---|---|---|-----|--|--|--|--|--|--|--|--|--|

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| DP ID |  |  |  |  |  |  |  |  | Client ID |  |  |  |  |  |  |  |  |  |
|-------|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|

|                        |  |
|------------------------|--|
| Sole/First Holder Name |  |
| Second Holder Name     |  |
| Third Holder Name      |  |

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

 Signatures  
 of Holder(s)



Signature of 1st Holder



Signature of 2nd Holder



Signature of 3rd Holder

\* Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature