TRANSMISSION REQUEST FORM

(In case of death of the sole holder)

Application No.		Date								

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

To,
KOSAMATTAM FINANCE LTD.
FLOOR NUMBER 4TH & 5TH
KOSAMATTAM CITY CENTRE T.B ROAD
KOTTAYAM,KERALA-686001

Dear Sir / Madam,

PART – I : (where nomination is recorded)

I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (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	9	2	0	0	Client ID								

Kindly transmit all securities in the deceased BO's account mentioned above to the BO account mentioned below.

Details of the Successor (s)

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

Details of Transmission

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

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

(Nominees / Successor / Guardian of successor or nominee(s) (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			

PART – II: (where nomination is not recorded)

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

1. I/We, the undersigned, residing at_____, am/are legal heir(s) of the said deceased.
2. I/We do not desire to make any claim of title of the said securities and have no objection whatsoever in transmitting the said securities in the name(s) of Mr. / Mrs. _____ who has/have opened a beneficial owner account(s) under Client ID and DP ID
3. In consideration of registration of the aforesaid securities in the client account of Mr / Mrs. _____ under DP ID_____Client ID_____at my request, I/We hereby renounce all my/our rights existing as well as those that may accrue to me/us in future in respect of the aforesaid securities.

Signed in the presence of

_____ _____

Bank Manager **Signature of the legal heir**

Full Name and Address of Bank Manager:

Name : _____
Address : _____
_____

Note for all legal heirs/successors who are applicants / non-applicants:
Only one Transmission Request Form is to be submitted by claimants/non-claimants to the DP of the deceased BO for the transmission of securities wherein the intentions of the legal heirs/successors are collectively stipulated.

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

Acknowledgement Receipt

Application No. **Date: -**

We hereby acknowledge receipt of the instructions for transmission of securities from the deceased BO's account to the account of the Nominee(s) / Successor / Guardian of the successor or nominee(s) (in case of Minor), as per details given on the transmission form.

Account number of the deceased BO

DP ID									Client ID								

Successor BO Name(s)		
First/Sole Holder	**Second Holder**	**Third Holder**
Documents Submitted		

Subject to verification.

Depository Participants Seal & Signature