

Nomination Form

Achiievers Equities Ltd 32/ A Diamond Harbour Road, Sakherbazar, Kolkata - 700008								FORM FOR NOMINATION (To be filled in by individual applying singly or jointly)																									
Da	Date										UCC/	DP ID										Cli	ent ID										
N	/We wis	on D)eta	ils				-					_																				
of No	 I/We wish to make a nomination and do he of my / our death. Nomination can be made upto three nominees in the account. 					her	pereby nominate the following person(s) wh Details of 1 st Nominee						ho s	no shall receive all the assets held Details of 2 nd Nominee							d 1	Details of 3 rd Nominee											
1	1 Name of the nominee(s) (Mr./Ms.)																																
2	Share each	Equally [If not equally,				% %														%	•												
	Nomi	lee			please spe percentage					An	ny oa	ld lot af	ter divisi	on sh	ıali	be tr	ansfe	erre	ed to	the	firs	st no	omine	e mer	ntio	oned	in th	he f	forn	ı.			
3	3 Relationship With the Applicant (If Any)																																
4	4 Address of Nominee(s) City / Place: State & Country:																		1							-							
5	Mobil nomir			phor			Cod	e																									
6														\top																			
7	Nomin [Please and pr □ Photo □ PAN account □ Dema	e tic ovid ograp D A no.	k a e d oh d adl	ny or etails & Sig naar [Proof	ne of of sa nature ⊐ Sav f of Id	foll me] e ving	low ; Ba	ing																									
Sr. N	los. 8-14	sho	uld	l be f	illed (only	y if	nom	inee	e(s) is	a m	inor:													<u> </u>								
8	8 Date of Birth {in case of minor nominee(s)}																																
9	9 Name of Guardian (Mr./Ms.) {in case of minor nominee(s) }													T																			
10	10 Address of Guardian(s)													╞																			



	City / Place: State & Country:						
		PIN Code					
	Mobile / Telephon Guardian	ne no. of					
12	Email ID of Guar	dian					
13	Relationship of G nominee	uardian with					
	Guardian Identifi [Please tick any of and provide details Photograph & Si PAN Adhaar account no. Proo Demat Account	one of following of same] ignature □ Saving Bank of of Identity					
			Name(s) of ho	lder(s)		Signature(s) of I	holder*
Sole /	First Holder (Mr./M	ls.)					
Secon	d 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)