

Form for Fresh Nomination / Change of Existing Nomination/ Cancellation of Nomination

Applicable for Individual Unitholders only - whether holding Units Singly or Jointly with other holders
Please read the instructions carefully before filling up this form



Name of 1st Holder _____

Name of 2nd Holder _____

Name of 3rd Holder _____

- I/ We, the above named Unitholders of _____ Mutual Fund, do hereby
- Nominate the person(s) more particularly described hereunder to receive the Units held my/ our Folio/s listed below in the event of my/our death and/ or
- Cancel the nomination(s) made by me/ us previously in respect of the units held by me/ us in the Folio/s listed below
(tick whichever is applicable)

Scheme Name	Folio No.
1.	
2.	
3.	
4.	

Name of the 1st Nominee										%age of Allocation			
PAN of Nominee/ Guardian*										Date of Birth of Nominee*			
Name of the Guardian*													
Guardian's Relationship with Nominee: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian													
Proof of relationship: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving <input type="checkbox"/> Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others _____													
Address: _____													
City _____ State _____ PIN _____													

Name of the 2nd Nominee										%age of Allocation			
PAN of Nominee/ Guardian*										Date of Birth of Nominee*			
Name of the Guardian*													
Guardian's Relationship with Nominee: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian													
Proof of relationship: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving <input type="checkbox"/> Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others _____													
Address: _____													
City _____ State _____ PIN _____													

Name of the 3rd Nominee										%age of Allocation			
PAN of Nominee/ Guardian*										Date of Birth of Nominee*			
Name of the Guardian*													
Guardian's Relationship with Nominee: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian													
Proof of relationship: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving <input type="checkbox"/> Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others _____													
Address: _____													
City _____ State _____ PIN _____													

* *Applicable in case the Nominee is a Minor. (Also, please attach a copy of the minor's birth certificate)*

<input type="checkbox"/> I/ We DO NOT wish to make a nomination. <i>(Please tick ✓ if the unitholder does not wish to nominate anyone)</i>
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I/ We hereby confirm that I/ We do not wish to appoint any nominee(s) for my mutual fund units held in my/ our mutual fund folio 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 issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.

I/ We have read and understood the instructions on nomination given below/ overleaf and I/We hereby undertake to abide by the same. The instructions contained herein supercedes all previous nominations made by me/ us in respect of the folio(s) mentioned above.

✗ Signature of 1st Unitholder	Signature of 2nd Unitholder	Signature of 3rd Unitholder
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