## Transmission Request Form for Change of Karta upon demise of the registered Karta

| The Trustees   | Date :                                  |                   |
|--|---|-------------------|
| The Trustees,  Mutual Fund   |   |                   |
| Name of the HUF:   |   |                   |
| Name of the new Karta: Mr./Ms.   |   |                   |
| 1 1 1 1 1 1 1 1 1 1 <b>1</b>   |   |                   |
| PAN of the new Karta   | edgment attached   KYC for              | rm attached       |
| I, the surviving co-parcener of abovenamed HUF, hereby inform you that,  | Mr.                                     |                   |
| , the Karta of the above HUF   | who was managing the affa               | airs of the HUF,  |
| expired on and I have taken over the affairs of t  | the above HUF as its new K              | arta, being the   |
| senior most coparcener. I therefore, request you to replace the name of the  | deceased Karta with my name             | as the new Karta  |
| of the HUF in your records in respect of the investments of the HUF in   | the following schemes / f               | olios:            |
| Scheme Name  | Folio No.                               | No. of Units      |
| 1.   |   |                   |
| 2.   |   |                   |
| 3.   |   |                   |
| 4.   |   |                   |
| Contact Details of the new Karta   |   |                   |
|  | Land Line No.                           |                   |
| mail Address   |   |                   |
|  | WVC ( / WVC D istordis A                |                   |
| Address of HUF (Please note that the address of the HUF will be updated as per address Address Line 1  | ss on KYC form / KYC Registration Ag    | gency records)    |
|  |   |                   |
| Address Line 2   | DV                                      | <u>.</u>          |
| City: State  | PII                                     | <u> </u>          |
| Bank Account Details of the HUF Bank Name  |   |                   |
|  | 11 11 14 1500                           |                   |
| Account No.  | 11-digit IFSC                           |                   |
| A/c. Type (√) □SB □Current   | 9-digit MICR No.                        |                   |
| Name of bank branch  |   |                   |
| City   | Eity PIN PIN                            |                   |
| Please attach a cancelled cheque (with name of the HUF pre-printed) OR Bank Sto  |   | alidate your bank |
| details & Banker's Certification of the bank account details and signature of the new I also request you to pay the UNCLAIMED amounts, if any, in respect of t |   | hank account      |
| mentioned above.   | ne nor by direct credit to the          | bank account      |
| I hereby state that whatever is stated herein above are true to the best of  | my/our knowledge & belief.              |                   |
| Name the new Karta   |   | gnature           |
|  | ×                                       |                   |
|  | X                                       |                   |
| Decuments Attached   | 21                                      |                   |
| Documents Attached  ☐ Copy of Death Certificate of the deceased Karta  |   |                   |
| ☐ Cancelled cheque with HUF name pre-printed OR ☐ Bank Statement/  | Passbook of the HUF                     |                   |
| ☐ Banker's Certification of the bank account details and signature of the n  |   | re 1A             |
| □ KYC Acknowledgment OR □ KYC Form of the HUF (if the HUF is no  | * · · · · · · · · · · · · · · · · · · · |                   |
| ☐ Bond of Indemnity signed by all surviving coparceners (including the no ☐ Document evidencing relationship of the new Karta and the other copare             | _                                       | 1                 |
| = = = = = = = = = = = = = = = = = = =  | accombca Italia                         | -                 |