

## 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 1<sup>st</sup> Holder \_\_\_\_\_

Name of 2<sup>nd</sup> Holder \_\_\_\_\_

Name of 3<sup>rd</sup> 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 1 <sup>st</sup> Nominee	% of Allocation
PAN of the Nominee/Guardian*	Date of Birth of Nominee* DD/MM/YYYY
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 Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others	
Address	
City	State PIN

Name of the 2 <sup>nd</sup> Nominee	% of Allocation
PAN of the Nominee/Guardian*	Date of Birth of Nominee* DD/MM/YYYY
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 Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others	
Address	
City	State PIN

Name of the 3 <sup>rd</sup> Nominee	% of Allocation
PAN of the Nominee/Guardian*	Date of Birth of Nominee* DD/MM/YYYY
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 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)*

☐ I/We **DO NOT** wish to make a nomination. *(Please tick ✓ if the unitholder does not wish to nominate anyone)*

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 the 1st unitholder	Signature of the 2nd unitholder	Signature of the 3rd unitholder