<u>Transmission Request Form</u> (In case of death of the sole holder)

Application No.									Date										
(Please fill all the	e details	in Bl	ock L	ette	ers in	Engl	ish)												
Asit C. Mehta 5 [™] Floor, Nucl Saki vihar Road	eus Ho	use, (Орр.	L & 7	T Gat	te N	0-7	Ltd.											
Dear Sir / Madam	١,																		
I, Successor/ Gua death of account			succes	ssor ((in ca	ise of	f Mino	or) re	equest you	to tran	smit	the f	ollow	ing s	ecurit	ties	due	e to t	the
Name of the dece Account Number			sed BO	D:															
DP ID									Client II)							T		
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Depository Participants Seal & Signature