

**1. Documents to be submitted to process the claim as mentioned in the Form IEPF-5 viz  
(Name Deletion Procedure ).**

- i. Print out of the duly filled (online) claim IEPF-5 form with claimant signature on all pages.
- ii. Copy of Acknowledgement.
- iii. Indemnity Bond (original).
- iv. Advance Stamped Receipt (original).
- v. Proof of entitlement (Original Security Certificates)
- vi. Self attested copy of Aadhaar Card.
- vii. Self attested copy of PAN Card.
- viii. Original cancelled cheque leaf.
- ix. Copy of Client Master List of your Demat A/c duly Self attested& attested by DP.
- x. Notarized copy of Death certificate of Deceased Holder.



SHAREX DYNAMIC (INDIA) PVT. LTD.

To  
Board of Directors  
(Name and Address of the Company)

Date: \_\_\_\_\_

**APPLICATION FORM FOR TRANSMISSION/TRANSPPOSITION/NAME DELETION**

PLEASE FILL IN SEPARATE FORMS FOR EACH COMPANY SERIES AND EACH CATEGORY OF SHARES/DEBENTURES/BONDS AND ALSO KINDLY READ THE INSTRUCTIONS CAREFULLY

- (A) TYPE OF REQUEST (Tick relevant box)  
 TRANSMISSION     TRANSPPOSITION     NAME DELETION
- (B) NAME OF THE COMPANY \_\_\_\_\_
- (C) REGD. FOLIO NO.: \_\_\_\_\_ (The folio is mentioned on the reverse / face of the certificate)
- (D) NAME OF THE HOLDER(S) [ As endorsed on certificate(s)]

FULL NAME OF HOLDER(S)	
1.	
2.	
3.	
4.	

- (E) PARTICULARS OF SHARE / DEBENTURE / BOND CERTIFICATE(S) (If space provided is insufficient, then continue on supplement sheet)

CERTIFICATE NO.	DISTINCTIVE NOS	NO. OF SECURITIES

(F) TOTAL NO. OF SHARES / DEBENTURES / BONDS:

- (G) TO BE TRANSMITTED / TRANSPPOSED IN FAVOUR OF

TITLE	FIRST NAME	MIDDLE NAME	SURNAME	AGE	OCCUPATION	PAN
1						
2						
3						
4						

**Note:** Mandatory to attach self attested copies of PAN Card(s) of all Holder(s)/Claimant(s) under item (G)

(H) Full Address of the Holder/Claimant under item (G)(1)	SIGNATURE(s)
_____	1. _____
_____	4. _____
_____	2. _____
_____	3. _____
PIN CODE _____	

PLEASE FILL IN THE COMPLETE ADDRESS OF THE HOLDER/CLAIMANT INCLUDING PINCODE FOR SAFE DELIVERY



SHAREX DYNAMIC (INDIA) PVT. LTD.

(I) TICK THE TYPE OF DOCUMENTS SUBMITTED :

Sr. No.	Type of Document to be duly attested by Competent authority (in case of Xerox)	Mark here
1	Death Certificate	<input type="checkbox"/>
2	Succession Certificate	<input type="checkbox"/>
3	Probate of will	<input type="checkbox"/>
4	Letter of Administration	<input type="checkbox"/>
5	Marriage Certificate	<input type="checkbox"/>
6	Original Share/Debenture/Bond Certificate	<input type="checkbox"/>
7	Copy of PAN card, self certified	<input type="checkbox"/>
8	Any other, viz	<input type="checkbox"/>

(J) SPECIMEN SIGNATURE(S)

1)	_____
2)	_____
3)	_____
4)	_____

**FOR OFFICE USE ONLY**

1)	DOCUMENT REGISTRATION / TRANSFER NO	:	_____
2)	DATE OF REGISTRATION / BOARD APPROVAL	:	_____
3)	BUYER'S FOLIO	:	_____
4)	DELIVERY TYPE (Tick relevant box)	:	<input type="checkbox"/> COUNTER <input type="checkbox"/> POSTAL

1)	INWARDED	:	_____
2)	VERIFIED	:	_____
3)	SCRUTINY	:	_____
4)	DATA ENTRY	:	_____
5)	MASTER UPDATION	:	_____



**INSTRUCTIONS**

**I IN CASE OF TRANSMISSION**

- 1) In a Joint Account no names can be deleted apart from the deceased nor can any fresh names to be added.
- 2) Request for transmission CANNOT be put through in case of securities standing in the single name of the deceased merely on the basis of Death Certificate. Proper legal documents are required to be submitted.

**II IN CASE OF NAME DELETION:**

Incase of death of joint shareholder(s), deletion of name will be carried out upon receipt of a duly signed request letter from surviving shareholder(s) alongwith original share certificate(s), notarised copy of death certificate of the deceased shareholder(s) and copy of PAN card(s), self certified.

Supplement to item (E)

**III PARTICULARS OF SHARE/DEBENTURE/BOND CERTIFICATE(S)**

Sr. NO.	CERTIFICATE NO.	DISTINCTIVE NOS	NO. OF SECURITIES
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Securities to be forwarded to :

Mr./Mrs.

FOR OFFICE USE ONLY SPACE FOR ANY SPECIAL REMARKS