

DP ID (please tick appropriate box) ☐ 12086700 ☐ 12095000

Client ID

HSL Trading Account

Date

☐ I/We wish to make a nomination for Demat & Trading Account (As per details given below)

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.

Nomination can be made upto three nominees in the account		1st Nominee	2nd Nominee	3rd Nominee
Name of the Nominee(s) (Mr./Ms.)	FIRST MIDDLE	FIRST MIDDLE	FIRST MIDDLE	FIRST MIDDLE
	LAST	LAST	LAST	LAST
Shares of Each Nominee <input type="checkbox"/> Equally	<input type="checkbox"/> If Not Equally, specify %	<input type="checkbox"/> If Not Equally, specify %	<input type="checkbox"/> If Not Equally, specify %	<input type="checkbox"/> If Not Equally, specify %
For CDSL Residual Securities	(Please tick any one nominee. If tick not marked default will be first nominee) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any odd lot after division shall be transferred to the first nominee mentioned in the form				
Relationship with Applicant (If any)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nominee(s) Address	CITY STATE	CITY STATE	CITY STATE	CITY STATE
	COUNTRY PIN Code	COUNTRY PIN Code	COUNTRY PIN Code	COUNTRY PIN Code
Nominee Identification Details (please tick any one from below and provide details of the same)	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify
	Please affix your recent passport size photograph	Please affix your recent passport size photograph	Please affix your recent passport size photograph	Please affix your recent passport size photograph
Sign	Sign	Sign	Sign	Sign
Mobile/Telephone no. of Nominee(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email ID of Nominee(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth of Nominee(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Guardian Details (should be filled only if nominee(s) is minor)				
Name of Guardian (Mr./Ms.) In case of minor nominee(s)	FIRST MIDDLE	FIRST MIDDLE	FIRST MIDDLE	FIRST MIDDLE
	LAST	LAST	LAST	LAST
Address of Guardian(s)	CITY STATE	CITY STATE	CITY STATE	CITY STATE
	COUNTRY PIN Code	COUNTRY PIN Code	COUNTRY PIN Code	COUNTRY PIN Code
Relationship of Guardian with Nominee (If any)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Guardian Identification Details (please tick any one from below and provide details of the same)	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify	<input type="checkbox"/> Photo and Sign <input type="checkbox"/> Aadhar No. <input type="checkbox"/> PAN <input type="checkbox"/> Savings Bank A/C No. <input type="checkbox"/> Demat account ID <input type="checkbox"/> Proof of Identity Please specify
	Please affix your recent passport size photograph	Please affix your recent passport size photograph	Please affix your recent passport size photograph	Please affix your recent passport size photograph
Sign	Sign	Sign	Sign	Sign

Mobile/Telephone no. of Guardian	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email ID of Guardian	<input type="text"/>	<input type="text"/>	<input type="text"/>

☐ I/We wish to opt out of a nomination

I/We hereby confirm that I/We do not wish to appoint any nominee(s) in my/our trading /demat account 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/ information for claiming of assets held in my/our trading /demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading/demat account.

**Declaration:** The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/we hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/ we are aware that I/we may be held liable for it. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations. I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant. This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us. I/we authorise and give my consent to HDFC Securities Limited to share my nomination details with HDFC Bank Limited for the purpose of nomination in my demat a/c and vice versa.

Signature & Name of holder (s)	<div>S16</div> <div>Signature 1st holder</div>	<div>Signature 2nd holder</div>	<div>Signature 3rd holder</div>
Witness for Nomination	Name & Address of the Witness, ONLY WHEN thumb impression affixed by the any of holder (Mr. / Ms):		
	<div>D D M M Y Y Y Y</div>		<div>Signature of Witness</div>

**Notes:**

1. All communication shall be sent at the address of the Sole/First holder only. 2. Thumb impressions must be attested by witness or a Magistrate or a Notary Public or a Special Executive Magistrate 3. Signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate. 4. The nomination and Declaration form may be signed using e-Sign facility or wet signature and in these cases, witness will not be required. 5. For receiving Statement of Account in electronic form: I. Client must ensure the confidentiality of the password of the email account. II. Client must promptly inform the Participant if the email address has changed. III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice. 6. In case of joint account, on death of any of the joint account holders, the surviving account holder(s) has to inform Participant about the death of account holder(s) with required documents within one year of the date of demise. 7. In case if 'first holder' is selected, the communication will be sent as per the preference mentioned at Sr. No. 4. In case 'All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned at Sr. No. 4 and communication to other holders will be in electronic mode. The default option will be communication to 'first holder', if no option selected. 8. Strike off whichever is not applicable.

Nomination form accepted and registered wide Registration No. \_\_\_\_\_

Dated \_\_\_\_\_

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For Depository Participant  
(Authorised Signatory)