

Form T1

REQUEST FOR TRANSMISSION OF UNITS (Deletion of name/s of Joint Holders in case of death of the 2nd or 3rd Holder)

To: The Trustees,

Date: __

Sirs,

Request for deletion of name(s) of the 2nd/ 3rd Holder

Mutual Fund

Sr.#	Scheme Name	Folio No	No. of Units
1			
2			
3			
4			

I/We, the surviving Unit holder/s in the above schemes/folios regret to inform you the demise of the following joint holder(s) on the dates mentioned below –

Name(s) of the Deceased Unitholder(s)	PAN	Date of demise*
Mr./Ms.		DD / MM / YYYY
Mr./Ms.		DD / MM / YYYY

A certified copy of his/her/their Death Certificate/s is/are attached herewith.

I/ we, therefore, request you to delete the name/s of the aforesaid deceased unitholder/s in your records and transmit the Units in the abovementioned folios in my/our name/s.

I also request you to update my email and mobile no. in your records as follows:

Mobile No.+91	Tel. No. STD				
Email Address					
The above Contact details belongs to 🗆 Self 🗆 Spouse 🗆 Son 🗆 Daughter 🗆 Parent 🗆 Sibling 🗆 Guardian of Minor					

The existing bank account details registered in the above folios may be \Box Continued*/ \Box Replaced* as per attached fresh Bank Mandate Form.

Nomination Please \Box one of the options below

□ I/We DO NOT wish to make a nomination.(Mandatory to tick ✓ if you do not wish to nominate anyone)
The exiting Nomination in the above folios may be □Continued*/ □Replaced* as per attached Nomination
Form

Name & Signature of the surviving Unit holder/s

Name	PAN	Signature
1.		
2.		

* Please tick (\checkmark) whichever is applicable.

Attachments:

- Copy of Death Certificate of the deceased unitholder
- \Box Fresh Bank Mandate Form along with \Box Cancelled cheque of the new bank account
- □ Fresh Nomination Form (Only where change in nomination is desired by the surviving unit holder/s)
- □ KYC of the surviving unit holder(s), *if not already complied earlier*.