Form T1



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

То:		D	Date:	
The Trustees	,	Mutual Fund		
Sirs,				
	Request for deletion	of name(s) of the 2 nd /3 rd Ho	lder	
Sr.#	Scheme Name	Folio No	No. of Units	
1				
2				
3				
4				
	ving Unit holder/s in the above schemes/f entioned below —	folios regret to inform you the demi-	se of the following joint holder(s	
Name(s) of the Deceased Unitholder(s)			Date of demise*	
2.Mr./Ms.			DD/MM/YYYY	
3.Mr./Ms.			DD/MM/YYYY	
certified copy	y of his/her/their Death Certificate/s is/ard	e attached herewith.		
Bank Mandate Nomination (P	nk account details registered in the above Form. lease ✓ one of the options below)		•	
	NOT wish to make a nomination. (Please			
☐ I/We wish	n to continue the existing nomination mad	le by me/us in the above folios prev	iously.	
	to make a fresh nomination and hereby to no Form to receive the Units held my/ou			
Name & Signa	ture of the surviving Unit holder/s			
	Name	PAN	Signature	
1.				
2.				
* Please tick (v	/) whichever is applicable.			
Attachments	:			
	ath Certificate of the deceased unitholder			
	Mandate Form along with Cancelled			
	Form duly completed			
☐ KYC of the	surviving unit holder(s), if not already co	omplied earlier.		