## **Nomination Form**

M/s. Sky Comodities India Pvt. Ltd., 40-49, I.G. Towers Devangpet 3rd Street, Flower Market Coimbatore - 641 001.				FORM FOR NOMINATION  (To be filled in by individual applying singly or jointly)									
Date UCC/DF			P ID				12092800		Client ID				
										-		-	
I/	I/We wish to make a nomination. [As per details given below]												
N	Nomination Details												
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.			Details of 1 <sup>st</sup> Nominee			Details of 2 <sup>nd</sup> Nominee			Details of 3rd Nominee				
1	Name o	me of the nominee(s) (Mr./Ms.)											
2	Share each Nomin	[If not equa		ally,				%	%			%	
	NOM	ee	please spe percentage		Any odd lot after division shall be transferred to the first nominee mentioned in the form.								
3	Relationship with the Applicant (If Any)												
4	Address of Nominee(s)  City / Place : State & Country :												
8			PIN	Code									
5	Mobile / Telephone No. of nominee(s)												
6	Email ID of nominee(s)												
7	Nominee Identification details - [Please tick any one of following and provide details of same]												
	☐ Photograph & Signature ☐ PAN ☐ Aadhaar ☐ Saving Bank account no. ☐ Proof of Identity ☐ Demat Account ID												
Sr.	Sr. Nos. 8 - 14 should be filled only if nominee(s) is a minor :												
8	8 Date of Birth {in case of minor nominee(s)}												
9	Name of Guardian (Mr./Ms.) {in case of minor nominee(s)}						$\top$						
10	0 Address of Guardian(s)						$\neg$						

	City / Place : State & Country			77-		70		
		PIN Code						
11	Mobile / Telepho Guardian	one No. of		il.		**************************************		
12	Email ID of Gua	rdian	5.					
13	Relationship of nominee							
14	Guardian Identi [Please tick any on and provide details  Photograph & Si Aadhaar Sa account no. Pr Demat Account	of same] ignature □ PAN ving Bank roof of Identity						
			Name(s) of	holder(s)			Signature	of holder*
Sole	e / First Holder (Mr.	/ Ms.)						
Sec	ond Holder (Mr. / N	/Is.)						
Thir	d Holder (Mr. / Ms.							

## Note:

This nomination shall supersede any prior nomination made by the account holder(s), if any.

The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

<sup>\*</sup> Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature

## **Declaration Form for opting out of nomination**

То	Date							
M/s. Sky Comodities India Pvt. Ltd., 40-49, I.G. Towers Devangpet 3rd Street, Flower Market Coimbatore - 641 001.								
UCC / DP ID				12092800				
Client ID (only for Demat account)								
Sole/First Holder Name								
Second Holder Name								
Third Holder Name								
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.								
Name and Signature of Holder(s)*								
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<sup>\*</sup> Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature