

GROWW INVEST TECH PRIVATE LIMITED

Corporate office: No 11, 80 feet Road, ST Bed, Kormangala 4th Block, Bangalore-560034 SEBI Registration Number: IN-DP-417-2019 | CDSL DP:12088700

Annexure 7.1

TRANSMISSION REQUEST FORM

(In case of death of the sole holder)

Application No.	Date	D	D	M	M	Y	Y	Y	Y

(Please fill all the details in **Block Letters** in English)

To, Depository Participant Name Address

Dear Sir / Madam,

I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (in case the claimant is a Minor- Date of Birth of the minor*) Relationship with the minor ______ request you to transmit the following securities due to the death of the sole account holder. Original Death Certificate / copy of Death Certificate (duly notarized / attested under seal by a Gazetted Officer) is attached herewith.

*Please attach relevant proof

Name of the deceased BO:

ŀ	Account Number of the deceased BO:														
	DP ID									Client ID					
	Date of the Deceased Sole Holder														

Kindly transmit all securities in the deceased BO's account mentioned above to the BO account mentioned below.

Details of the Successor (s)

Sr. No	Name of the Successor (s)/Nominee / Legal Heir/Successor to the Estate of the deceased / Administrator of the Estate of the deceased	DP ID						Cli	ent	ID			

Detai	ils of Transmission			
Sr. No	Name of the Security	ISIN	Quantity of securities to be transmitted	Percentage

Attach an annexure duly signed by the Nominee(s)/ Successor / Guardian of the successor or nominee(s) (in case of Minor),

if the space above is insufficient.

(Nominees / Successor / Guardian of successor or nominee(s) (in case of Minor)

	Nominee(1) Successor/Guardian of successor/Nominee	Nominee(2) Successor/Guardian of successor/Nominee	Nominee(3) Successor/Guardian of successor/Nominee
Name			
Signature			

Application No.

Date: -

We hereby acknowledge receipt of the instructions for transmission of securities from the deceased BO's account to the account of the Nominee(s) / Successor / Guardian of the successor or nominee(s) (in case of Minor), as per details given on the transmission form.

Account number of	the d	eceas	sed B	0							
DP ID							Client ID				

Successor BO Name(s)									
First/Sole Holder	Second Holder	Third Holder							
Documents Submitted	·								

Subject to verification.

Depository Participants Seal & Signature