## **Nomination Form**

## [Annexure A to SEBI circular no. SEBI/HO/MIRSD/MIRSD\_RTAMB/P/CIR/2022/23 dated February 24, 2022 on Nomination for Eligible Trading and Demat Accounts – Extension of timelines and relaxations for existing account holders]

M/s. FARSIGHT SECURITIES LTD. 17A/55, TRIVENI PLAZA, 3 <sup>rd</sup> FLOOR GURUDWARA ROAD, KAROL BAGH, NEWDELHI-110005, PH:01145044439,41 Website: <u>www.farsightshares.com</u>							I,	<b>FORM FOR NOMINATION</b> (To be filled in by individual applying singly or jointly)																					
Da	ate 🛛 🗌	D	М	Μ	Y		Υ	Y	Υ	UCC	/DP ID	Ι	$\mathbb{N}$							Client II	)								
I	We wish to	make	a non	ninati	ion. [.	As	per d	etails	giver	ı below]	]																		
N	omination l	Detail	s																										
	We wish to i my / our de		a nomi	inatic	onan	d d	o hero	eby n	omin	ate the f	ollowing	g perso	on(s)	who	o shall	rece	eive	all th	ne asser	ts held i	n my /	/ 0	ur ac	cou	nt in	the	eve	ent	
	omination c ominees in t				) thre	ee		Details of 1 <sup>st</sup> Nominee				Details of 2 <sup>nd</sup> Nominee						Details of 3 <sup>rd</sup> Nominee											
1	Name of	the no	omine	e(s) (	Mr./	Μs	i.)																						
2	2 Share of Equally each Nominee				%							,	%																
	Tommee		please specify percentage]				Any odd lotafter division shall be transferred to the first nominee mentioned in the form.																						
3	Relations (If Any)		Vith th	ie Ap	plica	ant																							
4 Address of Nominee(s) City / Place: State & Country:																													
				PIN	l Cod	le																							
5	Mobile / / nominee(		hone l	No. of	f																								
6 Email ID of nominee(s) #																													
<ul> <li>7 Nominee Identification details # [Please tick any one of following and provide details of same]</li> <li>Photograph &amp; Signature PAN</li> <li>Aadhaar Saving Bank account no. Demat Account ID</li> </ul>				g																									
Sr. N	los. 8-14 sho	ould b	e fille	d onl	y if r	ıon	ninee	(s) is	a mi	nor:																			
8 Date of Birth {in case of minor nominee(s)}																													
9 Name of Guardian(Mr./Ms.) {in case of minor nominee(s) }														-							-		-						
10 Address of Guardian(s)																													

	City / Place: State & Country:								
		PIN Code							
11	Mobile/ Telephor Guardian#	ne no. of							
12	Email ID of Gua	rdian#							
13	Relationship of G nominee	uardian with							
14									
	<ul> <li>PAN Account n</li> <li>Identity</li> <li>Demat Account</li> </ul>	o. Proof of							
			Name(s) of ho	lder(s)		holder*	gnature(s) of		
Sol	le / First Holder (Mr.	/Ms.)							
S	econd Holder (Mr./M	1s.)							
T	hird Holder (Mr./Ms.	.)							

\* Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature #Optional Fields (Information required at Serial nos. 5, 6, 7, 11, 12 & 14 is not mandatory)

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)

Name and Signature of Holder(s)*							
1	22	3					

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