

ISHANIKA SECURITIES PVT. LTD.

NOMINATION FORM

From:

Client Name:

UCC:

PAN:

NOMINATION DETAILS (For Individuals only)

☐ I wish to nominate ☐ I do not wish to nominate

Name of the Nominee: _____ Relationship with the Nominee: _____

PAN of Nominee: _____ Date of Birth of Nominee: _____

Address and phone no. of the Nominee: _____

☐ Nominee is a minor, details of guardian:

Name of guardian: _____ Address and phone no. of Guardian: _____

Signature of guardian

WITNESSES (Only applicable in case the account holder has made nomination)

Name _____	Name _____
Signature _____	Signature _____
Address _____	Address _____

DECLARATION:

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately.

Place :	(-----) Signature of Client
Date :	