

Transmission Request Form
(For Quick Transmission Processing (QTP) Category where no Nominee is registered)
(To be submitted on Plain Paper)

Tick (☐→☒) the boxes wherever applicable and fill in the details legibly.

To:

Date:

Mahindra Lifespace Developers Limited
4TH Floor, A Wing, Mahindra Towers,
Dr. G.M. Bhosale Marg, Worli,
Mumbai - 400018

Part A – Claimant and Deceased Holder information

DP ID / Client ID / Folio No.	
Deceased Holder Name:	
Claimant Name	
Claimant PAN / PEKRN (Mention only number)	
Category of Claimant	☐ Parent ☐ Spouse ☐ Child ☐ Parent-in-law
Documentary Proof attached (Refer Annexure – A for the documents list)	

Part B – Transmission Request Form

I, the claimant named hereinabove, hereby inform you about the demise of the above-mentioned security/unit holder(s) and request you to transmit the securities/units held by the deceased security/unit holder(s) in my favor in my capacity as:

- ☐ Legal Heir
- ☐ Successor to the Estate of the deceased
- ☐ Administrator of the Estate of the deceased

Part C – Undertaking

I/We _____, legal heir(s) of Late Mr./Ms. _____ ("Name of the Deceased Holder"), residing at _____ do hereby state and undertake as under:

1. The deceased holder held the following securities / MF unit holdings in his/her name as sole/single holder:

Sr. No.	Name of Company	Folio No. / DP Client ID No. of Securities /	No. of Securities / Shares Held	Certificate Number (for physical shares / securities)	Distinctive Numbers (for physical shares / securities)	
					From	To
1.						
2.						
3.						

2. Above referred deceased holder died without registering any nominee.
3. That I/We are the legal heir(s) of the deceased as per the details in the below table and that we are the only legal heirs/legatees of the deceased holder.

Name of the Legal Heir(s)*	Age	Relationship with the deceased

* Where any legal heir is a minor, such minor is represented herein by his/her natural/legal guardian.

Therefore, I/We, the Legal Heir(s)/Claimant(s), have approached _____ (Name of the Company / AMC / RTA / DP / Depository) with a request to transmit the aforesaid securities in the name of the undersigned, Mr./Ms. _____ [Name(s) of the legal heir(s)/claimant(s)], on my/our behalf. I/We, am/are furnishing the documents as mentioned below for transmission of the securities in our name:

S. No	Document	Submitted	Remarks
1	Original Transmission Request Form (duly filled and signed)		
2	Self-attested copy of Latest Client Master List (CML) of claimants' demat account		
3	Self-attested copy of Latest Client Master List (CML) of claimants' demat account		
4	Original Security Certificate / Copy of Statement of Account (if applicable)		
5	If claimant is a minor - Birth Certificate or School leaving certificate/ Passport or last four digits of Aadhaar (where the date of birth is available – Attested by the Guardian (Natural or Legal).		
6	KYC of Guardian (if claimant is a minor or of unsound mind)		
7	Relationship Proof (where claimant is spouse, child, parent or parent-in-law) or Affidavit as per Annexure-B.		
8	Nomination Form or Nomination Opt-Out form		
9	FATCA-CRS Declaration in a prescribed format, wherever applicable		
10	Signature of the Nominee/ Claimant shall be attested only by a Notary Public or a Judicial Magistrate First Class (JMFC) in lieu of banker's attestation (applicable only for transmission of units held in SOA)		

Part D – Other information about Claimant
(Applicable only for transmission of units held in SOA)

☐KYC Acknowledgment attached ☐KYC form attached

Tax Status: ☐ Resident Individual ☐ Resident Minor (through Guardian) ☐ NRI ☐ PIO / OCI

☐ Others (please specify)

Contact details of the Nominee / Legal Heir / Claimant

Mobile No.	Tel. No. STD -
Email Address	
Above mobile belongs to: ☐ Self ☐ Spouse ☐ Dependent parent(s) ☐ Son ☐ Daughter	
Above email belongs to: ☐ Self ☐ Spouse ☐ Dependent parent(s) ☐ Son ☐ Daughter	

Address (Please note that address will be updated as per claimant's address on KYC form / KYC Registration Agency records)

Address Line 1	
Address Line 2	
City:	State
PIN	

Bank Account Details of the Nominee / Legal Heir / Claimant

Bank Name	
Account No. 	11-digit IFSC
A/c. Type (✓) ☒ S B ☐ Current ☐ NRO ☐ NRE ☐ FCNR	
9-digit MICR No.	
Name of bank and branch	
City	
PIN	

Part E – Declaration and Responsibility Clause

I/We confirm that the above documents have been submitted and that the information, facts, and particulars furnished by me/us in this undertaking and the accompanying documents are true, correct, and complete to the best of my/our knowledge and belief, and no material information / fact has been concealed or misrepresented therein.

I/We further undertake and confirm that in the event any information, declaration, or document furnished by me/us herein is subsequently found to be false, incorrect, incomplete, forged, or fraudulent, the responsibility and liability for resolving the resultant discrepancy, dispute, or claim – including any consequential loss, cost, or legal action – shall rest solely and exclusively with me/us, the claimant(s), and I/We shall keep the Company/AMC/RTA/Depository Participant fully indemnified and harmless against any loss, claim, demand, or liability arising directly or indirectly therefrom. I/We also knowledge to share the above demise information to the regulatory authorities or statutory authorities or to the entities entrusted by the regulatory/statutory authorities from time to time.

Claimant Signature	
Place:	Date:

Note: Where any person required to sign this document is unable to sign, he/she may affix his/her left thumb impression in lieu of signature.

Annexure A: Proof of Relationship

A self-attested copy of the proof of relationship as referred to above is enclosed herewith:

Tick against the document* given as proof of relationship Birth certificate which lists the parent's name ☐ School leaving certificate ☐ School records/service records ☐ Passport ☐ Marriage Certificate ☐ Ration Card ☐ Voter ID ☐ Aadhar ☐ Permanent Account Number ☐ Will ☐ Legal Heirship Certificate ☐ Court Decree ☐ Letter of Administration ☐ Succession Certificate ☐ Probate of Will (where available) ☐ *In case none of the above documents are available, a notarized Affidavit in the format given in Annexure-B.
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Annexure-B: Draft of the Affidavit

To be executed on Non-Judicial Stamp Paper of appropriate value (as applicable in the relevant State where the claimant resides) and notarized / attested by a Gazetted Officer or Judicial Magistrate First Class (JMFC)

I/We, _____ Son / daughter/legal heir of
_____ residing at _____
do hereby solemnly affirm and state on oath as follows.

That Mr. / Mrs. _____ (“Name of the Deceased Holder”) held the following securities:

Sr. No.	Name of Company	Folio No. / DP Client ID No. of Securities /	No. of Securities / Shares Held	Certificate Number (for physical shares / securities)	Distinctive Numbers (for physical shares / securities)	
					From	To
1.						
2.						
3.						

That the aforesaid deceased holder died leaving behind the following persons as the legal heirs without registering any nominee:

Sr.No	Name of the Legal Heir(s)	Address and contact details	Age	Relation with the Deceased

That among the aforesaid legal heirs, Master/ Kumari. _____
aged _____ years is a minor and is being represented by Mr./Ms.
_____ (“Name of the Guardian”) being his / her father / mother / legal guardian.

Signature of the Deponent: X _____

Note: Where any person required to sign this document is unable to sign, he/she may affix his/her left thumb impression in lieu of signature.

VERIFICATION

I /We hereby solemnly affirm and state that what is stated herein above is true and correct and nothing has been concealed therein and that we I am competent to contract and entitled to rights and benefits of the abovementioned securities of the deceased.

Solemnly affirmed at _____

Signature of the Deponent: _____

Signed before me

Signature of Notary with Official Seal of Notary & Regn. No.

* ~~strikeout~~ whichever is not applicable