

## **ECONO BROKING PVT. LTD.**

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SEBI Reg. No. –IN-DP-433-2019

## TRANSMISSION REQUEST FORM [Annexure 7.1] (In case of death of the sole holder)

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Application	n No.									Date D				D M			Υ	Υ	Υ	Υ		
Dear Sir / M	ladam,																					
I/we, Nomi		ressor/	Guard	lian of	the suc	cessor	or non	ninee	(c) (	in cad	e the cl	aimant	ic M	inor- l	Date o	of Rirt	h of	f the r	ninor*	) Rel:	ationshi	n
with the min Death Certif	nor request	you to	transm	nit the f	followir	ng secu	ırities d	ue to	the	deatl	n of the	sole ac	cour	t hold								
*Please atta	ach relevant	proof																				
Name of the			ed BO																			
Account Number of the deceased BO:  DP ID 1 2 0 6 7					7	4 0			0	Clier	nt ID	D										٦
Date of th	e Deceased	Sole H	older				•															
Kindly trans	mit all secu	rities in	the de	eceased	d BO's a	accoun	t menti	oned	abo	ve to	the BO	accour	nt me	ntion	ed bel	ow.						
Details of th	ne Successo	r (s)																				
Sr. No	Name of	me of the Successor (s)/ Nominee / Legal ir/ Successor to the Estate of the deceased /									/ DP ID					Client ID						
		Administrator of the Estate of the deceased																				
									L													
									<u></u>													
Details of	Transmissio	n																				
Sr. No		Name of the Security								ISIN Quantit					ry of securities to be transmitted						rcentage	
													ciansimited									
																			+			_
																			4			
Attach an ar	nexure duly	signed	by the I	Nomine	e(s)/ S	uccesso	or / Gua	rdian	of th	ne suc	cessor o	r nomin	nee(s	) (in ca	ase of	Minor	·), if	the sr	ace at	ove is	s insuffi	cien
(Nominees /	,	-	•				•							•			,,	,				
	Nominee(1)					Nomir						nee(2)					Nominee(3)					
		Successor/Guardian successor/Nomine									Successor/Guardian of successor/Nominee				Successor/Guardia successor/Nomir							
Name			CCCSS	J. / 110							2017110								711011		-	
Signature																						
Signature																						
			=====	=====	=====	=====											-==		:====:			=
Application	ı No.						Ackı	nowle	edge	emen	t Recei <sub>l</sub>	pt	Dat	e: -								
We hereby a Successor /																	coui	nt of tl	ne Non	ninee(	s) /	
Account Nur	nber of the o	eceased	I BO:																		- 1	
DP ID	1	2	0	6	7	4	0	0	(	Client	ID								<u> </u>			
Successor	BO Name (s)																					
First/ Sole Holder						Second Holder									Third Holder							
Document	Submitted								—													
Document	Jubiliilled																					