

APPLICATION FOR NAME DELETION / CHANG OF NAME

NAME DELETION

CHANGE OF NAME

TRANSPOSITION

NAME OF THE COMPANY

REGISTERED FOLIO NO

NAME OF THE HOLDERS (S) AS ENDORESED ON THE CERTIFICATES UNDER THE SAID FOLIO

1	
2	
3	
4	

DETAILS OF SHARE CERTIFICATES (IF SPACE IS INSUFFICIENT CONTINUE ON REVERSE)

SHARE CERTIFICATE NUMBERS		DISTINCTIVE NUMBERS		NO OF SHARES
FROM	TO	FROM	TO	

TOTAL NO OF SHARES

TO BE TRANSMITTED/TRANPOSED IN FAVOUR OF

TITLE	NAME	AGE	OCCUPATION

FULL ADDRESS OF THE FIRST HOLDER TO BE TRANSMITTED/TRANPOSED

Address :

Applicants Signature

TICK TYPE OF DOCUMENT SUBMITTED

Death Certificate	
Marriage Certificate	
KYC documents	
Any Other	

SPECIMEN SIGNATURE(S)

FOR OFFICE USE ONLY

Transaction No.

Transaction Date

New Folio No

Initial of the employee
who has registered
the document

(1)

(2)

(3)

(4)