BUTTERFLY BROKING PRIVATE LIMITED



Regd add: 143, B Wing, Sanjay Building, Mittal Industrial Estate, Andheri East, Mumbai, 400059

 $Corr\ add:\ Ground\ floor,\ Novel\ Tech\ Park,\ 46/4,\ Hosur\ Road,\ Kudlu\ Gate,\ Bangalore\ 560058\ |\ contact:\ cs@tiqs.in$

1 Name of the nominee(s)* (Mr./Ms.)	Date											Der	nat IE)								UCC								
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death. Nomination can be made upto three nominee(s)* (Mr./Ms.) 2	I/We wish to make a nomination. [As per details given below]																													
account in the event of my / our death. Nomination can be made upto three nominees in the account. 1 Name of the nominee(s)* (Mr./Ms.) 2 Share of each [Equally If not equally, please specify percentage] 3 Relationship With the Applicant* (If Any) 4 Address of Nominee(s) * Citry / Place: State & Country: Pin Code: 5 Mobile / Telephone No. of nominee(s) * 6 Email ID of nominee(s) * 7 Nos. 8-14 should be filled only if nominee(s) is a minor: 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) * Citry / Place: State & Country: Pin Code: 11 Mobile / Telephone No. of Guardian 12 Email ID of Guardian 13 Relationship of Guardian with Nominee 14 Proof of Identity submitted of Guardian (in case of Minor) Name	N	Nomination Details																												
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2 Share of each Equally											Details of 1 st Nominee							Details of 2 nd Nominee							Details of 3 rd Nominee					
Share of each Nominee*	1	Name of the nominee(s)* (Mr./Ms.)																												
(If Any) Address of Nominee(s) * City / Place: State & Country: Pin Code: Mobile / Telephone No. of nominee(s) Proof of Identity submitted Sr. Nos. 8-14 should be filled only if nominee(s) is a minor: B Date of Birth {in case of minor nominee(s)}* Name of Guardian (Mr./Ms.) {in case of minor nominee(s) }* City / Place: State & Country: Pin Code: 11 Mobile / Telephone No. of Guardian B Relationship of Guradian with Nominee Proof of Identity submitted Second Holder First/Sole Holder or Guardian (in case of Minor) Name Second Holder Third Holder		Share of each [If not equally, Nominee* please specify																												
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- * Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature **Note:**
 - 1. This nomination shall supersede any prior nomination made by the account holder(s), if any.
- 2. The Trading Member/Depository Participant shall provide acknowledgement of the nomination form to the accountholder(s).