# BO Account Nomination Form

Please complete all details in CAPITAL letters. **Please fill all names correctly.** All communications shall be sent to the correspondence address of only the First Named Account Holder as specified in BO Account Opening Form -02.

Application No…….. Date *(DDMMYYYY)*……

Name of CDBL Participant (Up to 99 Characters)

…… CDBL Participant ID

Account holder's BO ID

Name of Account Holder **( Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)**

**I / We nominate the following person(s) who is/are entitled to receive securities outstanding in my/our account in the event of the death of the sole holder / all the joint holders.**

## 1. Nominee / Heirs Details

**Nominee 1**

Name in Full

……

Short Name of Nominee **( Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)** *Title i.e. Mr. / Mrs.*

Relationship with A/C Holder:…… …….. Percentage (%) ……..

Address

……

City…… Post Code…….. State / Division …… Country…… Telephone……

Mobile Phone…….. Fax…… E-mail……

*Passport No…….. Issue Place…… Issue Date…….. Expiry Date……*

**Residency:** Resident ☐ Non Resident ☐ Nationality…… …… Date Of Birth (DDMMYYYY)

**Guardian's Details (if Nominee is a Minor)**

Name in Full

……

Short Name **( Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)**

Relationship with Nominee ……Date of Birth of Minor *(DDMMYYYY )* …… Maturity Date of Minor*(DDMMYYYY )*……

Address

……

City…… Post Code…….. State / Division …… Country…… Telephone……

Mobile Phone…….. Fax…… E-mail……

*Passport No…….. Issue Place…… Issue Date…….. Expiry Date……*

**Residency:** Resident ☐ Non Resident ☐ Nationality…… …… Date Of Birth (DDMMYYYY)

**Nominee 2**

Name in Full

……

Short Name of Nominee **( Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)** *Title i.e. Mr. / Mrs.*

Relationship with A/C Holder:…… …….. Percentage (%) ……..

Address

……

City…… Post Code…… State / Division …… Country…… Telephone……

Mobile Phone…… Fax…… E-mail……

*Passport No…… Issue Place…… Issue Date…… Expiry Date……*

**Residency:** Resident ☐ Non Resident ☐ Nationality…… …… Date Of Birth (DDMMYYYY) ☐☐☐☐☐☐☐☐

**Guardian's Details (if Nominee is a Minor)**

Name in Full

……

Short Name **( Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)**

Relationship with Nominee ……Date of Birth of Minor *(DDMMYYYY )* …… Maturity Date of Minor*(DDMMYYYY )*……

Address

……

City…… Post Code…… State / Division …… Country…… Telephone……

Mobile Phone…… Fax…… E-mail……

*Passport No…… Issue Place…… Issue Date…… Expiry Date……*

**Residency:** Resident ☐ Non Resident ☐ Nationality…… …… Date Of Birth (DDMMYYYY) ☐☐☐☐☐☐☐☐

## 2. Photograph of Nominees / Heirs

| Please paste recent passport size Photograph | Please paste recent passport size Photograph | Please paste recent passport size Photograph | Please paste recent passport size Photograph |
|---|---|---|---|
| Nominee / Heir 1 | Nominee / Heir 2 | Guardian 1 | Guardian 2 |

| | Name | Signature |
|---|---|---|
| Nominee / Heir 1 | | |
| Guardian 1 | | |
| Nominee / Heir 2 | | |
| Guardian 2 | | |
| First Account Holder | | |
| Second Account Holder | | |