## ANNEXURE OB



BAJAJ CAPI Regd. Office: N Nehru Place, N		DP ID : IN 303237										
	8000, 26418903/06, 661 8888, 26476638	01111						D	ATE	1		F
name of the ertificate, du	signed, being the joint deceased) wish to ha aly notarised and the oprocess the same an	ve the na demater	me of t ialisatio	he dec in requ	eased o	leleted m alor	from th	ne securi he phys	ity certif ical cert	ificates a	are en	
Client Id  Company Name  Type of Security  Equity/Others (please specify)												
Quantity	(in figures)											
(in w	vords)											
Sr. No.	Name of the	ne surviv	survivor(s)			Signature(s)						
1.												
2.												
3.												
to be filled-	in by the participan	it)										
ISIN		1	N									
	ation Request No. Iematerialisation reques	t										

## Instructions:

- 1. Seperate forms should be filled up for each ISIN by the survivor(s).
- 2. Each form should be accompanied by a copy of the death certificate, duly notorised.