



## Rudra Shares & Stock Brokers Limited

(Formerly Known as Gigantic Securities Limited)

**Corporate Office :** Rudra House, (Adjoining Krishna Tower), 15/63, Civil Lines, Kanpur - 208 001  
**Ph. :** 0512-3071647/648 • **Fax :** 0512-3913929 • **E-mail :** dp@rudrashares.com • **Web :** www.rudrashares.com  
**Reg. Office :** 73, Rajdhani Nikunj Society, I. P. Extn.-94, Patparganj, New Delhi-110 092  
**CDSL DP ID :** 12061400 & **Sebi Reg. No.:** IN-DP-CDSL-518-2009



### TRANSMISSION-CUM-DEMATERIALIZATION FORM

(In case of death of one / more of the joint holders)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
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(Please fill all the details in **Block Letters** in English)

Dear Sir / Madam

I/we, the surviving joint holder(s) request you to dematerialize the enclosed securities in our account as per details given below.

The securities were held by me/us jointly with Mr./Mrs./Ms. ...., who has expired.

The **Original Death Certificate / a copy of the death certificate, duly notarized or attested under seal by a Gazetted Officer** (strike out what is not applicable), is attached herewith, along with a duly-filled and signed DRF and physical share certificate listed below.

I/We request you to advise the Issuer/RTA to process the demat request and credit the securities to the demat account mentioned below:

**DEMAT ACCOUNT NUMBER of surviving BOs :**

DP ID	1	2	0	6	1	4	0	0	Client ID								
DRF No.									Date	D	D	M	M	Y	Y	Y	Y

Sr. No.	Name of the Security	ISIN	Quantity to be transmitted

If there are more ISINs to be dematerialized, attach an Annexure, duly signed by the account holders

	First/Sole Holder	Second Holder
Name(s) of the surviving holder(s)		
Signature(s) of the surviving holder(s)		

..... (Please Tear Here) .....

#### Acknowledgement Receipt

Application No.		Date	D	D	M	M	Y	Y	Y	Y
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We hereby acknowledge receipt of the following instructions for transmission-cum-dematerialization, as per the details given in the Transmission Form and DRF, from :

**Demat Account number of the surviving BO(s) :-**

DP ID	1	2	0	6	1	4	0	0	Client ID								
DRF No.									Date	D	D	M	M	Y	Y	Y	Y

**Surviving Holder(s) Name(s)- (strike out what is not applicable) :**

First / Sole Holder	Second Holder	Third Holder

Documents Submitted

Documents Subject to verification

**Depository Participants Seal and Signature**