Form Code: SIHLTRANS-OB 001



REGD. OFFICE: 'SIHL HOUSE', Opp. Ambawadi Jain Temple,

Nehrunagar Cross Road, Ahmedabad-380 015. **Phone**: 079-3002 5325, **Fax**: 079-3002 9029 **Website**: www.sihl.in, **E-mail**: helpdesk@sihl.in

## ANNEXURE-OB (NSDL)

## FORM FORTRANSMISSION ALONGWITH DEMATERIALISATION

		TOR'S HO			Temple	<b>a</b>											
SIHL HOUSE, Opp. Ambawadi Jain Temple, Nehrunagar Cross Road, Ahmedabad-15, <b>DP ID IN 300343</b>											Date :						
I/We,	the u	ndersig	ned,	being	the	joint					_	securitie		•		rs./Ms (Name	
duly not	arized	and the	dema	aterisati	on req	uest fro	ased dong	elete g witl	d from	the sohysic	ecurity al cert	certificate tificates ar given bel	s. A cop e enclos	y of the	death ce	rtificate	
Client ID:																	
Compa	any Na	me:															
Type of Security Equity/ Other (Please Specify):																	
Quanti	Quantity (In Figures):																
Quanti	ity (In V	Vords):															
Sr. No.	Name of Survivor (s)									Signature of Survivor(s)							
1.									(								
2.										&							
3.	Z.																
						To be	filled	by th	ne par	ticipa	ant						
ISIN			ı	N													
Demate Reques																	
Instruct		•															
				•		•	missior	n For	m (An	nexur	e OB) i	s required	to be fill	ed by the	survivo	r holder	
		the time						<b></b>			, ,						
		eparate fo							-			a dulu pat	oriood				
	<ul><li>3. Each form should be accompanied by a copy of the death certificate, duly notarised.</li><li>4. For one DRF form fill only one Transmission cum Demat form (Annexure OB)</li></ul>																
	<ol> <li>For one DRF form illi only one transmission cum Demat form (Affrexure OB)</li> <li>Signature of survivor holder should be same as company records</li> </ol>																
		•								-		ce, Deben	ture) eta	<b>o</b> .			
Docum	ents to	be attac	hed:	:						•			,				
	1. De	emat Req	uest	Form													
		otarised [			cate of	a decea	ısed pe	rson									
	3. Pł	nysical Co	ertific	cate													
Clier	ntID :						OFFIC	E US	SE ON	ILY	IN						
Entered By Date							Ve	erified	Ву _				Date				

**REGD. OFFICE:** 'SIHL HOUSE', Opp. Ambawadi Jain Temple, Nehrunagar Cross Road, Ahmedabad-380 015. **Phone:** 079-3002 5325, **Fax:** 079-3002 9029, **Website:** www.sihl.in, **E-mail:** helpdesk@sihl.in