

Patel Wealth Advisors Pvt. Ltd. "Oxygen" Gaurav Park, Opp Vasant Kunj, Pushkardham Main Road, Off Kalawad Road, Rajkot - 360005. Gujarat (INDIA)		FORM FOR NOMINATION (To be filled in by individual applying singly or jointly)													
Date		DP ID		I	N	3	0	4	1	3	1	Client ID			
I/We wish to make a nomination. (As per details given below)															
Nomination Details															
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 up to three nominees in the account.				Details of 1 st Nominee				Details of 2 nd Nominee				Details of 3 rd Nominee			
1	Name of the nominee(s) (Mr./Ms)														
2	Share of each Nominee	Equally (if not equally please specify percentage)		%				%				%			
<i>Any odd lot after division shall be transferred to the first nominee mentioned in the form</i>															
3	Relationship With the Applicant (If Any)														
4	Address of Nominee(s)														
	City/Place: State & Country:														
	PIN Code														
5	Mobile / Telephone No. of Nominee(s)														
6	Email ID of Nominee(s)														
7	Nominee Identification details- 1. Nominee(s) Photograph 2. Nominee(s) Aadharcard			Please affix recent passport size photograph of nominee and sign across it											
Sr. 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)														
	City/Place: State & Country:														
	PIN CODE														
11	Mobile / Telephone No. of Guardian														
12	Email ID of Guardian														
13	Relationship of Guardian with nominee														
14	Guardian Identification details- 1. Nomination Photograph 2. Nominee(s) Aadharcard			Please affix recent passport size photograph of nominee and sign across it											
Name and Signature of Holder(s)*															
1 st Holder Name				2 nd Holder Name				3 rd Holder Name							
1 st Holder Signature				2 nd Holder Signature				3 rd Holder Signature							

* This nomination shall supersede any prior nomination made by the account holder(s), if any.