

ACML CAPITAL MARKETS LIMITED

(Formerly : ASE Capital Markets Limited)

Member: BSE (CASH, F&O), NSE (CURRENCY, CASH, F&O), NSDL DP, CDSL DP.

SEBI REGN. NO.: INZ000260134 **NSDL DP:** In 302461, **CDSL DP:** 13015200,**CIN:** U67120GJ2000PLC037431 **GSTIN:** 24AADCA4629D1Z4

Form 10

Form for Nomination / Cancellation of Nomination

(To be filled in by individual applying singly or jointly)

Client ID								
DP ID	I	N	3	0	2	4	6	1
DP ID	1	3	0	1	5	2	0	0
Name of Sole/First Holder								
Name of Second Holder								
Name of Third Holder								

For Office Use											
Nominee Registration No.	Entered By	Verified By									

Annexure - A

Format for providing Nomination

I/	We wish to ma	ke a nomination. [A s	s per details given below]								
N	lomination Deta	nils									
	We wish to mak the event of m		do hereby nominate the following pers	son(s) who shall receive all the a	ssets held in my / our account						
	Nomination can hree nominees		Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee						
		-	Mandatory Deta	ails							
1	Name of the n (Mr./Ms.)*	ominee(s)									
2	Share of each	Equally [If not equally,	%	%	%						
	Nominee	please specify percentage]	Any odd lot after division shall b	nee mentioned in the form.							
3	Relationship V Applicant (If A										
* Date of Birth and Name of Guardian to be provided in case of minor nominee(s)											
			Non - mandatory D	Details							
4 Address of Nominee(s)/ Guardian in case of Minor City / Place: State & Country:											
	PIN Code										
5	Mobile / Telepho nominee(s)/ Gua	one No. of ardian in case of Minor									
6	Email ID of no Guardian in ca										
7	7 Nominee/ Guardian (in case of Minor) Identification details – [Please tick any one of following and provide details of same] Photograph & Signature PAN Aadhaar Saving Bank account no. Proof of Identity Demat Account ID										
			Name(s) of holder(s)		Signature(s) of holder*						
Sc	ole / First Holde	r (Mr./Ms.)	Second Holder (Mr./Ms.)	Third Holder (Mr./Ms.)							
* 0:	ignature of with		o and address are required if the	sount holder offices thurst income	receion instead of signature						

* Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature

Note:

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

The Intermediary shall provide acknowledgement of the nomination form to the account holder(s)



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KAMDHENU COMPLEX, PANJARAPOLE, OPP. SAHAJANAND COLLEGE, AMBAWADI, AHMEDABAD – 15, PH.:079 – 26309434 / 26308875 / 26309619 - 20 DPID NO.: 15200 SEBI REG. NO. IN-DP-CDSL-696-2013

Please fill up this form for any modification in Existing details of BO

Account Details Addition / Modification / Deletion Request Form

Application No.	No.								Date											
Please fill all the details in Block Letters in English																				
DP ID	1	3	0	1	5	2	0	0	CI	ient ID		0	0							
Account Holder																				
Name of First / So																				
Name of Second F	Holder			+																
Name of Third Hol																				
I/We request to carry out the change of address / signature in the demat account. I/We request to carry out the change of address/signature in the KRA and demat account.																				
I/We request you to make the following additions / modifications / deletions to my/our account in your records.																				
Details (PI. specify change of address, bank details, telephone number etc.) Addition Modificat Deletion (Please specify)				catio on e	n /		Existing Details								New Details					
Attach an Annexu	ıre (w	ith sia	natur	e(s))	if the	space	e abo	ve is	found in	nsufficie	ent.									
		irst/Sc				- Срис	Second Holder							Third Holder						
Name																				
Signature																				
======================================																				
Acknowledgement Receipt Received Account Details Addition / Modification / Deletions request as per details given below:																				
Application No									Date	D	D		M	M	2			1	6	
DP ID	1	3	0	1	5	2	0	0	1	ient ID		0	0	171	<i>-</i>			<u>'</u>		-
Name of the Sole / First Holder			Τ				1 0									1		\dashv		
Name of Second joint Holder																				
Name of Third join	t Hold	er																		
Modification reque [Specify reason]	sted f	or:																		