TRANSMISSION

1. JOINT HOLDING-:

IN CASE OF DEATH OF THE FIRST UNIT HOLDER-

Request letter from the second Unit holder duly signed requesting for transmission.

Death certificate/s in original or photocopy duly notarized/attested by gazette officer or bank manager.

Bank account details of the second unit holder.(refer change of bank details policy)

Signature verification from the bankers (in case of non availability of signature due to migration of data)

Pan and KYC letter of the surviving unit holder(s) (if applicable)

IN CASE OF DEATH OF THE SECOND/THIRD UNIT HOLDER-

Request letter from the FIRST Unit holder duly signed requesting for transmission.

Death certificate/s in original or photocopy duly notarized/attested by gazette officer or bank manager.

2. DEATH OF THE SOLE UNIT HOLDER-

IF NOMINATION REGISTERED:

Request letter from the Nominee duly signed requesting for transmission. Death certificate/s in original or photocopy duly notarized/attested by gazette officer or bank manager.

Bank account details along with the personalized cheque copy.

Signature of nominee(s) attested by banker. Annexure I

KYC pan card copy and pan card copy of the nominee.

Attested copy of the proof of date of birth, if the Nominee is a minor and if the same has not been obtained at the time of making the nomination. Proof of identity of the parent/legal guardian claiming on behalf of the minor Nominee.

Signature verification of such parent/legal guardian by a banker.

Attested copy of the court order appointing the legal guardian.

IF NOMINATION NOT REGISTERED:

Letter from claimant/s to the Fund / AMC / RTA requesting for transmission of units,

Death certificate/s in original or photocopy duly notarized/attested by gazette officer or bank manager.

Bank Account Details of the new first unit holder as per **Annexure I** along with attestation by a bank branch manager or cancelled cheque bearing the account details and account holders name.

KYC pan card copy and pan card copy of the new unit holder.

Indemnity Bond from legal heir/s - Annexure III. (if claimant is producing any document mentioned in (B) then indemnity bond is not required.)

Individual affidavits from legal heir/s - **Annexure IV.**

- [A] If he transmission amount is below Rs. 2, 00,000/-: any appropriate document evidence relationship of the claimant/s with the deceased unit holder/s.
- **[B]** If the transmission amount is Rs 2, 00,000/- or more: Any one of the documents mentioned below:
 - Notarised copy of Probated Will, or
 - Legal Heir Certificate or Succession Certificate or Claimant's Certificate issued by a competent court, or
 - Letter of Administration, in case of Intestate Succession.

3. Transmission in case of HUF, due to death of Karta:

Request letter from the new Karta duly signed requesting the transmission.

Death certificate/s in original or photocopy duly notarized/attested by gazette officer or bank manager.

KYC copy of new Karta.

Signature verification by the banker where the new Karta maintains a bank account.(**Annexure I**)

Indemnity bond signed by all the surviving coparceners and new Karta. (Format as per **Annexure V**)

Notarized copy by gazatte or copy attested by bank manager of the Court order appointing such legal guardian.

In case of no surviving co-parceners OR the transmission amount is Rs.2,00,000/-or more OR where there is an objection from any surviving members of the HUF, transmission should be effected only on the basis of any of the following mandatory documents:

- a. Notarized copy of Settlement Deed,or
- b. Notarized copy of Deed of Partition, or
- c. Notarized copy of Decree of the relevant competent Court.

4. Instruction

Where the units are to be transmitted to a claimant who is a minor, various documents like KYC, PAN, Bank details, indemnity should be of the guardian of the nominee.

AMCs may consider seeking additional documents if the amount involved in transmission exceeds Rs Two lakh on a case to case basis.

Claimant can bring the original copy of document at AMC office for verification and the same will be returned to the claimant after due verification. (Like death certificate of the deceased person or bank statement etc.) Claimants are advised to write Folio no on each document.

Redemption along with transmission is not allowed. Once the units will be transferred to claimant's name then only request for redemption needs to be accepted by POA's

In case of rejection Karvy to send the rejection letter mentioning the valid reason along with the required document. (Format 1 enclosed)

Please note that signature verification needs be done by the same bankers which details to be updated in the folio.

ANNEXURE I

New Bank Mandate Details with unit holder signature attested from Bank branch Manager

<To be given on Bank's Letter Head> or with <Bank Branch seal, employee name and number seal>

TO WHOMSOEVER IT MAY CONCERN

This is to certify that			
Mr. / Ms. (#)			
S/o or D/o:			
residing at			
_			
_			
is holding the following account i	in our bank and branch		
Bank Name			_
Branch Name			-
Bank A/c No			_
Account Type	SB Current N	RE NRO FCNR Others	
MICR Code			
(9 digit code)			
IFSC Code			
(11 digit code)			_
Signature of the above A/c h	nolder as per Bank's record	ds	
Signature of the Bank Manag	ger		
(Bank & Branch Seal with emp	ployee name and number)		

(To be signed jointly by all the Legal Heirs)

INDEMNITY BOND WITH RESPECT TO TRANSFER OF THE MUTUAL FUND UNITS HELD BY THE DECEASED HOLDERWITH OUT PRODUCTION OF LEGAL REPRESENTATION

(In case of Transmission of Mutual Fund Units held by a Single Holder/ on death of all unit holders in case of Joint Holding and where there is no nominee registered).

I/We do	hereby solemnly affir	m and sincerely sta	ate on oath as fo	llows,				
I/We sta	te that "Mr. / Ms. $(*)$		" passed away onand he/she					
was hold	ing the following Mut	ual Fund Units:						
Sr No.	Name of Mutual Fund	Scheme Name Folio No		No. of Units Hold	Valuation as on			
The said unit holder died intestate or without registering any nominee/s in folio/s on the day of We further inform you that he / she left behind him/her only surviving heirs and next of kin, the following persons according to the Law of Intestate Succession application to him/her by which he/she governed at the time of his/her death.								
undersig "Mr. / N	ns Ms. (#)			he aforesaid Mutual F		″ on		
jurisdicti		ny one on our beh	alf execute an ir	certificate or an orde ndemnity as is herein				
				id Mutual Fund units t				
harmless demands your, at "Mr. / N	s you and your succ s, risks, charges, exp my/our request, tran ds. (#)	essors and assigns penses, damages, ensferring the said N	s for all time he etc., whatsoever Mutual Fund unit	demnify and keep increafter against all lo which you may suffers as herein above me" without it ecourt of competent ju	sses, costs, claims er and/or incur by entioned, to the un nsisting on produ	s, actions, reason of idersigned		
IN WITNESS WHEREOF THE said "Mr. / Ms. (#)" have here unto set their respective hands and seals this day of								
Signed a	nd delivered by the s	aid legal heir(s)						

<u> </u>	
Name & Address of the Legal Heir/s	Signature of the Legal Heir/s
1 2	
3.	
Suretie/s Name and Address [Mandatory]	Suretie/ s Signature
Signature of the Notary with Name & Seal	
(*) = Name of the deceased unit holder (#) = Name of the claimant	

Individual Affidavits by the Legal Heirs

(In case of Transmission of Mutual Fund Units held by a Single Holder / on death of all unit holders in case of Joint Holding and where there is no nominee registered)

					n / daughter / residin				
	do hereby er name as si			' the dece	erely state on ased was hold				
Sr No.			e Name Folio No		No. of Units Hold		Valuation as on		
Certifica	te. The follow	ing are	the only	legal hei	for r(s) of late Mr rtificate/ Succ	./ Ms.(#)_		_	
Sr No.			egal	Address		Age		Relationship with the deceased	
years is who is n other lea We also	a minor and hone other that gal heir as sta	ne / sh n his / ted ab	e is being her fathoove to the erned mu	g represer er / mothone deceason tual fund	ed,(#)and its author	ls.(\$) guardian. W	e also c	onfirm	that there is no
DEPON	ENT SIGNAT	URE: _							
				VERIF	ICATION				
Original conceale above m	Death Certified therein and mut	icate d d that	r origina we are	l attested competen	d copy of the t to contract	death cer	tificate.	and r	true and correct nothing has been nd benefits of the
	y affirmed at pefore me at_		on						
Noto: 1	Each dones	nt cho	ll cian co		Signature o				Seal of Notary

(#) = Name of the legal heir(\$) Name of the guardian

(To be signed jointly by all the coparceners and the new Karta)

INDEMNITY BOND WITH RESPECT CHANGE OF KARTA /TO TRANSFER OF THE MUTUAL FUND UNITSHELD BY THE DECEASED KARTA WITH PRODUCTION OF DEATH CERTIFICATE

I/we do					llows'/We inform you	that "Mr. / Ms. (*) arta of the HUF and holding
the follo	wing Mutual Fu			/ UII	and he was the Ka	arta of the Hor and holding
Sr No.			Scheme Name	Folio No	No. of Units Hold	Valuation as on
			wing are the only living are the only living are the only living the members ,			(Name
Sr No.	Name		Age	DOB		
			Mr. "Mr. / Ms. (#) duly appointed by all			is the senior most coparcener
herein consider place of harmles demand your, at IN WITN	contained and ration thereof reduced for deceased Karles you and you so, risks, charge my/our requences WESS WHEREOF	on remy / outa I/Wear succes, expenses.	lying on the inform r request to replace e hereby agree and essors and assigns penses, damages, et	nation herein of the name of the undertake to in for all time here., whatsoever	given by us believing Karta in the above ndemnify and keep in the areafter against all low which you may sufform	de execute an indemnity as is ing the same to be true. In said Mutual Fund units in the indemnified, saved, defended, posses, costs, claims, actions, fer and/or incur by reason of ere unto set their respective
						f New Karta
Name & 12	Address of me	embers	of the HUF	_	Signatur Sureties Signati	re of the members of the HUF
Date:		•		-		
(*) = N	ame of the dec		Karta [Unit Holder]		(Signature of not	ary [With name and seal])

(\$) = Name of the members of HUF (Add additional lines wherever applicable)