

NOMINATION FORM / CANCELLATION OF NOMINATION
FOR NERL CLIENTS (Please fill in Block Letters Only)

Date: _____ Repository Participant (RP) ID & Name: _____

Dear Sir/ Madam,

I the sole holder hereby declare that [Strike out what is not applicable.]

I wish to cancel the nomination made by me earlier and consequently all rights and liabilities in respect of beneficiary ownership in the commodities held by me in the said account shall vest with me. [Strike off the nomination details below].

I nominate the following person, who is entitled to receive commodity balances lying in my account, in the event of the death of the Sole holder.

Client ID _____ Client Name _____

Nominee details

NOMINEE NAME: _____
First
Middle
Last

ADDRESS: _____

PINCODE: _____ CITY: _____ DISTRICT: _____ STATE: _____

EMAIL ID: _____ MOBILE NO: _____ TELEPHONE NO: _____

PAN NO: _____ DATE OF BIRTH: _____ RELATIONSHIP WITH BO: _____

Note: Client hereby confirms to comply with the norms prescribed by Authority and / or NERL w.r.t. Nomination facility.

Signature of Nominee

PLACE:	Signature of Client (As per ID / Address proof)
DATE:	

(To be filled by RP)

Nomination Form accepted by

EMPLOYEE NAME:	Signature
EMPLOYEE CODE:	
DESIGNATION:	
Date:	