Annexure-2 · to be submitted on plain paper · SEBI circular HO/38/13/11(14)2026-MIRSD-POD/I/17111/2026 dated 23 July 2026

Quick Transmission Processing (QTP)

Transmission Request Form-cum-Undertaking for Quick Transmission Processing (QTP) where no nominee is registered. Tick the boxes wherever applicable and fill in the details legibly.

Date (DD/MM/YYYY)

To: PCJ Holdings Pvt. Ltd. · 803, Nirmal Tower, Barakhamba Road, Connaught Place, New Delhi – 110 001 · 011-4351 2500 · askus@pcjholdings.in
SEBI Regn. INZ000068536 · NSE 13096 · BSE 6356 · MCX 57170 · NSDL DP IN-DP-279-2016 · DP ID IN303913 · AMFI ARN-63632 · APMI APRN-07054

PART A – CLAIMANT AND DECEASED HOLDER INFORMATION

DP ID - Client ID / Folio No.

Deceased Holder Name

Claimant Name

Claimant PAN / PEKRN (mention only number)

Category of claimant: ☐ Parent ☐ Spouse ☐ Child ☐ Parent-in-law

Documentary proof attached (refer Annexure-A for the documents list)

PART B – TRANSMISSION REQUEST FORM

I, the claimant named hereinabove, hereby inform you about the demise of the above-mentioned security/unit holder(s) and request you to transmit the securities/units held by the deceased security/unit holder(s) in my favor in my capacity as

☐ Legal Heir ☐ Successor to the Estate of the deceased ☐ Administrator of the Estate of the deceased

PART C – UNDERTAKING

I / We (name of legal heir(s))

legal heir(s) of Late Mr./Ms. ("Name of the Deceased Holder")

residing at

do hereby state and undertake as under: 1. The deceased holder held the following securities / MF unit holdings in his/her name as sole/single holder:

S. No.	Company / Fund name with scheme name	Folio no. / DP ID – Client ID	No. of securities / units held	Certificate no. (physical only)	Distinctive nos. from – to (physical only)
1					
2					
3					

2. Above referred deceased holder died without registering any nominee. 3. That I/We are the legal heir(s) of the deceased as per the details in the below table and that we are the only legal heirs/legatees of the deceased holder.

Name of the legal heir(s)*	Age	Relationship with the deceased

** Where any legal heir is a minor, such minor is represented herein by his/her natural/legal guardian.*

Therefore, I/We, the Legal Heir(s)/Claimant(s), have approached PCJ Holdings Pvt. Ltd. (Depository Participant) with a request to transmit the aforesaid securities in the name of the undersigned, on my/our behalf. I/We, am/are furnishing the documents as mentioned below for transmission of the securities in our name:

Name(s) of the legal heir(s) / claimant(s) in whose name the securities are to be transmitted

S. No.	Document	Submitted	Remarks
1	Original Transmission Request Form (duly filled and signed)		
2	Self-attested copy of Latest Client Master List (CML) of claimants' demat account		
3	Self-attested copy of Verifiable Death Certificate of the deceased holder		
4	Original Security Certificate / Statement of Account (if applicable).		

S. No.	Document	Submitted	Remarks
5	If claimant is a minor – Copy of Birth Certificate or School leaving certificate/ Passport or Aadhaar (where the date of birth is available) – Attested by the Guardian (Natural or Legal).		
6	KYC of Guardian (if claimant is a minor or of unsound mind).		
7	Relationship Proof (where claimant is spouse, child, parent or parent-in-law) or Affidavit as per Annexure-B.		
8	Nomination Form or Nomination Opt-Out form		
9	FATCA-CRS Declaration in a prescribed format, wherever applicable		
10	Signature of the Nominee/ Claimant shall be attested only by a Notary Public or a Judicial Magistrate First Class (JMFC) in lieu of banker's attestation (applicable only for transmission of units held in SOA)		

PART D – OTHER INFORMATION ABOUT CLAIMANT

☐ KYC acknowledgement attached ☐ KYC form attached

Tax status: ☐ Resident Individual ☐ Resident Minor (through Guardian) ☐ NRI ☐ PIO / OCI ☐ Others

Mobile no. | Tel. no. (STD – number) | E-mail address

Above mobile belongs to: ☐ Self ☐ Spouse ☐ Dependent parent(s) ☐ Son ☐ Daughter

Above e-mail belongs to: ☐ Self ☐ Spouse ☐ Dependent parent(s) ☐ Son ☐ Daughter

Address (please note that address will be updated as per claimant's address on KYC form / KYC Registration Agency records)

Address line 1

Address line 2

City | State | PIN

Bank account details of the claimant

Bank name | Account no. | 11-digit IFSC

A/c type: ☐ SB ☐ Current ☐ NRO ☐ NRE ☐ FCNR

9-digit MICR no. | Name of bank and branch | City | PIN

Please attach and tick: ☐ Cancelled cheque with claimant's name printed ☐ Claimant's bank statement / passbook

PART E – DECLARATION AND RESPONSIBILITY CLAUSE

I / We confirm that the above documents have been submitted and that the information, facts, and particulars furnished by me / us in this undertaking and the accompanying documents are true, correct, and complete to the best of my / our knowledge and belief, and no material information / fact has been concealed or misrepresented therein.

I / We further undertake and confirm that in the event any information, declaration, or document furnished by me / us herein is subsequently found to be false, incorrect, incomplete, forged, or fraudulent, the responsibility and liability for resolving the resultant discrepancy, dispute, or claim – including any consequential loss, cost, or legal action – shall rest solely and exclusively with me / us, the claimant(s), and I / We shall keep the Company/AMC/RTA/Depository Participant / Depository fully indemnified and harmless against any loss, claim, demand, or liability arising directly or indirectly therefrom. I / We also knowledge to share the above demise information to the regulatory authorities or statutory authorities or to the entities entrusted by the regulatory/statutory authorities from time to time for onward circulation/dissemination to all applicable regulated entities.

Place | Date

Signature	Signature	Signature
Claimant(s) signature	**Claimant(s) signature**	**Claimant(s) signature**
Name	Name	Name

Note: Where any person required to sign this document is unable to sign, he/she may affix his/her left thumb impression in lieu of signature.

ANNEXURE-A: PROOF OF RELATIONSHIP

A self-attested copy of the proof of relationship as referred to above is enclosed herewith (tick against the document* given):

- ☐ Birth certificate which lists the parent's name
- ☐ School leaving certificate
- ☐ School records / service records
- ☐ Passport
- ☐ Marriage Certificate
- ☐ Ration Card
- ☐ Voter ID
- ☐ Aadhar
- ☐ Permanent Account Number
- ☐ Will
- ☐ Legal Heirship Certificate
- ☐ Court Decree
- ☐ Letter of Administration
- ☐ Succession Certificate
- ☐ Probate of Will (where available)

In case none of the above documents are available, a notarized Affidavit in the format given in Annexure-B.

ANNEXURE-B: DRAFT OF THE AFFIDAVIT

non-judicial stamp paper; notarised / attested by Gazetted Officer or JMFC

To be executed on Non-Judicial Stamp Paper of appropriate value (as applicable in the relevant State where the claimant resides) and notarized / attested by a Gazetted Officer or Judicial Magistrate First Class (JMFC).

I / We _____ Son / daughter / legal heir of _____

residing at _____

do hereby solemnly affirm and state on oath as follows. That Mr. / Mrs. ("Name of the Deceased Holder") named below held the following securities:

Name of the deceased holder _____

S. No.	Company / Fund name with scheme name	Folio no. / DP ID – Client ID	No. of securities / units held	Certificate no. (physical only)	Distinctive nos. from – to (physical only)
1					
2					
3					

That the aforesaid deceased holder died leaving behind the following persons as the legal heirs without registering any nominee:

S. No.	Name of the legal heir(s)	Address and contact details	Age	Relationship with the deceased
1				
2				
3				

That among the aforesaid legal heirs, Master / Kumari _____ aged (years) _____ is a minor represented by Mr./Ms. (guardian — father / mother / legal guardian) _____

Signature of the Deponent _____

VERIFICATION

I /We hereby solemnly affirm and state that what is stated herein above is true and correct and nothing has been concealed therein and that we I am competent to contract and entitled to rights and benefits of the abovementioned securities of the deceased.

Solemnly affirmed at _____ Signature of the Deponent _____

Signed before me — Signature of Notary with Official Seal of Notary and Regn. No. _____

** strikeout whichever is not applicable*