

Letter / Email Format - Intimation of Demise information by the Joint Holder(s) / Nominee(s).

Date:

<Name of SRI>  
<Address>.  
<City> - <Pincode>

Dear Sir/Madam,

**Sub.: Intimation of demise information.**

**Ref.: PAN \_\_\_\_\_ & Folio/Account Number: /Account Number**

I/We regret to inform you about the demise having the above PAN / Folio / Account, where I/We is/are the joint holder(s) / registered nominee(s) in the accounts maintained with your organisation / entity. Original downloaded / self-attested copy of the Death Certificate is attached for your kind action. I/We am/are enclosing the self attested copy of deceased person for PAN or any other valid ID proof for necessary validation.

Please let us know the procedure and documentation requirements to transmit the units in my/our favour. Also, note my/our contact details for necessary communication / contacts in this regard and not for updation in KYC records or in any of the accounts.

Details	Joint Holder1 / Nominee1	Joint Holder2/ Nominee2	Nominee3
Name			
PAN			
Relation			
Mobile			
Email			
Address			

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be liable for it for any fines or consequences as required under the respective statutory requirements. I/We hereby authorize you to disclose, share, rely, remit in any form, mode, or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the KYC Registration Agency(ies) for necessary action.

Signature:

Joint Holder1 / Nominee1	Joint Holder2/ Nominee2	Nominee3

Encl.:

Death certificate – Original downloaded or self-attested copy;

PAN or other ID proof of Deceased person attested by Notifier;

My/our self-attested PAN card copy(ies) or any other self-attested valid ID proof.