## Request for Transmission of Securities by Nominee or Legal Heir (For Transmission of securities on death of the Sole holder)

Annexure C – ISR 5

To:

Visaka Industries Limited/Kfin Technologies Limited (RTA)

(Name	(Name of the Listed Issuer/RTA)					
Name of the Claimant(s) Mr./Ms.			,			
Name of the Guardian ☐ in case the claimant is a minor	→ Date of Birth	of th	ne minor*			
Mr./Ms						
	Court Appointed	Gua				
[Multiple PAN may be entered] PAN (Claimant(s)/Guardi Acknowledgment attached ☐ KYC form attached	an):		∐ □ KY0	j		
Tax Status: ☐ Resident Individual ☐ Resident Minor (throu (please specify)	ugh Guardian)  □N	NRI	□ PIO	□ Others		
*Please attach relevant proof						
I/We, the claimant(s) named hereinabove, hereby informentioned Securities Holder(s) and request you to deceased holder(s) in my/our favour in my/our capaci  □ Nominee □ Legal Heir □ Successor to the Estathe Estate of the deceased	o transmit the s ty as –	secu	ırities he	eld by the		
Name of the deceased holder(s)			Date of			
			demise			
· ·	1) DD / MM / YY					
2)	DD / MM / YYYY					
3)	DD / MM / YYYY					
**Please attach certified copy of Death Certificate.						
Securities(s) & Folio(s) in respect of which Transm	ission of securi	ities	is being	3		
requested						
Name of the Commence	Falls Nis		No. of	% of		
Name of the Company	Folio No.	Se	curities	Claim@		
1)						
2)				-		
3)						
4)						
@As per Nomination OR as per the Will/Probate/S						
Administration/ Legal Heirship Certificate (or its equival if applicable.	nem cemincale)/	Cou	n Decre	е,		
Contact details of the Claimant (s) [Provision for multiple entries may be made]						
Mobile No.+91                 Tel. No. STD -						

Email Address			
Address (Please note tha KYC Registration Agency rec	t address will be updated as per cords)	address on KYC form /	
Address Line 1			
Address Line 2			
City:	State PIN		
<b>Bank Account Details of the</b>	Claimant		
Bank Name			
Account No.		11-digit IFSC	
A/c. Type (√) □SB □Current	□NRO □NRE □FCNR	9-digit MICR No.	
Name of bank branch			
City PIN			
	elled cheque with claimant's nam	•	
Bank Statement/Passbook (d	luly attested by the Bank Manage	er)	
	e UNCLAIMED amounts, if any		
securities holder(s) by direct	ct credit to the bank account m	entioned above.	
Additional KYC information	ı (Please tick√ whichever is appli	cable)	
Occupation □ Private Sect □ Business □ Professional	tor Service □Public Sector Serv	rice □Government Service	
□Agriculturist □Retired □H	lome Maker □ Student □Forex (Please specify)	Dealer □ Others	
The Claimant is □ a Politica Person □ Neither (Not appl	ally Exposed Person    Relate icable)	ed to a Politically Exposed	
Gross Annual Income (₹) 25 Lacs-1crore □ >1 crore	□Below 1 Lac □1-5 Lacs □ 5	5-10 Lacs □10-25 Lacs □	
FATCA and CRS informatio			
	Country of BirthPlace of Birth		
Nationality			
If Yes, please mention all the	y country other than India? ☐ e countries in which you are resid ication Number and its identificati	lent for tax purposes and the	
Country	Tax-Payer Identification Number		
,	,	) [-	

Nomination <sup>®</sup> (Please ✓ one	of the options below)		
☐ I/We <b>DO NOT</b> wish to m nominate anyone)	ake a nomination. <i>(Ple</i>	ase tick √ if you de	o not wish to
☐ I/We wish to make a not described in the attache folio in the event of my /	d Nomination Form to		
@ Guardian of a minor is no		mination on behalf	of the minor
Declaration and Signature I/We have attached herewit attached Ready Reckoner as	h all the relevant / re	equired documents	as indicated in the
I/We confirm that the inform knowledge and belief.	nation provided above	is true and corre	ct to the best of my
I/We u	ındertake	to	keep (Name of the
Company) / its RTA informe future and also undertake to the RTAs.			above information in
I/We	hereby		authorize (Name of the
Company) and its RTA to promy holdings in the (Name of authorities/agencies as requisame.	of the Company) to an	ny governmental o	ed by me/us including r statutory or judicial
Place			
Date			
	Signatur	re of Claimant <sub>(S)</sub>	
Documents Attached  □ Copy of Death Certificate of □ Copy of Birth Certificate (in □ Copy of PAN Card of Clair □ KYC Acknowledgment OR □ KYC form of Claimant □ Cancelled cheque with clastatement/Passbook □ Nomination Form duly con □ Annexure D - Individual Af □ Original security certificate □ Annexure E - Bond of Inde □ Annexure F - NOC from ot	n case the Claimant is a mant / Guardian imant's name printed inpleted fidavits given EACH Le e(s)	a minor) OR □ Cla egal Heir	imant's Bank

\*Note: For transmission service requests, Form ISR-4 as per SEBI circular SEBI/HO/MIRSD/MIRSD\_RTAMB/P/CIR/2022/8 dated January 25, 2022 will not be required.