

Annexure - III

Individual Affidavit to be given by EACH Legal Heir

(For Transmission of Units on death of Sole Unit Holder / all Unit Holders in case of joint holding,
where NO NOMINATION has been registered)

Each Deponent (legal heir) shall sign separate Affidavits.

I, _____ #,
son / daughter of _____
resident of _____
do hereby solemnly affirm and state on oath as follows.

That Mr./Mrs. _____ @
("the deceased Unitholder") held the following units in _____ Mutual Fund in his / her name as
single holder / joint holder:

Scheme Name	Folio No.	No. of units held
1.		
2.		
3.		

Please (✓) any of the following (as applicable)
<input type="checkbox"/> That the aforesaid deceased Unitholder(s) died leaving behind him/her, the following persons as the only surviving heirs.
<input type="checkbox"/> That the aforesaid deceased Unitholder(s) died testate* / intestate* leaving behind him/her, the following persons as the only surviving heirs as per the Succession Certificate* / Legal Heirship Certificate* dated _____ / according to the Law of Intestate Succession by which he/she was governed at the time of his/her death and without registering any nominee. *
<input type="checkbox"/> That the aforesaid deceased Unitholder died testate, leaving behind him/her, the following persons as the legatees as per Probated Will dated _____ and without registering any nominee. *

A notarised copy of the Succession Certificate* / Legal Heirship Certificate* / Probated Will is attached herewith.

Name of the legal heir/s	Address	PAN	Age	Relationship with the Deceased
1.				
2.				
3.				
4.				

* strikeout whichever is not applicable

= Name of the legal heir

@ = Name of the deceased unit holder

\$ Name of the Guardian

That among the aforesaid legal heirs, Master / Kum. _____ aged
_____ years is a minor and is being represented by Mr./Ms. _____ \$
being his / her father / mother / legal guardian.

I also indemnify the _____ Mutual Fund and its AMC and authorized Registrar through a separate Indemnity
letter with third party Sureties.

Signature of the Deponent: X _____

VERIFICATION

I hereby solemnly affirm and state that what is stated herein above is true and correct. The original Death Certificate or original attested copy of the death certificate and nothing has been concealed therein and that we are competent to contract and entitled to rights and benefits of the abovementioned mutual fund units of the deceased.

Solemnly affirmed at

Signature of the Deponent: X _____

Signed before me

Place: _____

Date : _____

Signature of Notary with Official Seal of Notary & Regn. No.