



The Cosmos Co-op. Bank Ltd.
 Cosmos Tower, Plot No 6, ICS Colony, University Road,
 Ganeshkhind, Shivajinagar, Pune 411007
 Ph. No.: 020 – 67086111 – 121 email : dematcell@cosmosbank.in
 DP ID 28200

Client ID:	1	3	0	2	8	2	0	0											Date:										
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I/We hereby confirm that I/We **do not wish to appoint any nominee in my demat account** and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the demat account..

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures			

Note:

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination / / opt out nomination-

=====Please Tear Here) =====

Application No.: **Acknowledgement Receipt**
Date:

We hereby acknowledge the receipt of the Account Opening and nomination Application Form:

Client ID:	1	3	0	2	8	2	0	0											Date:										
Name of the Sole / First Holder																													
Name of Second Holder																													
Name of Third Holder																													

Depository Participant Seal and Signature