

# NOMINATION FORM

ARN-4464 E032737  
VIKRAM S. BAGADTHEY



**PGIM**  
India Mutual Fund

(For use only by Individual Unit Holders for registering a Nominee or cancelling an existing Nomination)

Please read instructions overleaf carefully. All sections to be completed legibly in English, in black/dark-coloured ink and in BLOCK CAPITALS. Please strike out any sections not required.

Application No. \_\_\_\_\_

## 1. UNIT HOLDER'S DETAILS (MANDATORY)

Sole / First Unit Holder	FIRST NAME	MIDDLE NAME	LAST NAME
Existing Folio No. _____			

## 2. NOMINATION DETAILS (Please strike out if your request is not for registration of Nominee)

I / We do not wish to avail of nomination facility at present.

**OR**

I / We

	1st Unit Holder
	2nd Unit Holder
	3rd Unit Holder

do hereby nominate the undermentioned Nominee to receive the Units allotted to my / our credit in my folio in the event of my / our death. I / We also understand that all payments and settlements made to such Nominee and Signature of the Nominee acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustees. This instruction supercedes all previous nominations made by me in respect of the Folio indicated above.

**Name and Address of 1st Nominee**

Name	
Address	
City	Pin code
State	Country
Allocation %	Date of Birth D D M M Y Y
Signature of Nominee (Optional)	

**To be furnished in case Nominee is a Minor (strike out if not applicable)**

Name of Guardian	
Address of Guardian	
City	Pin code
State	Country
Allocation %	Date of Birth D D M M Y Y
Signature of Guardian(Optional)	

**Name and Address of 2nd Nominee**

Name	
Address	
City	Pin code
State	Country
Allocation %	Date of Birth D D M M Y Y
Signature of Nominee (Optional)	

**To be furnished in case Nominee is a Minor (strike out if not applicable)**

Name of Guardian	
Address of Guardian	
City	Pin code
State	Country
Allocation %	Date of Birth D D M M Y Y
Signature of Guardian (Optional)	

**Name and Address of 3rd Nominee**

Name	
Address	
City	Pin code
State	Country
Allocation %	Date of Birth D D M M Y Y
Signature of Nominee (Optional)	

**To be furnished in case Nominee is a Minor (strike out if not applicable)**

Name of Guardian	
Address of Guardian	
City	Pin code
State	Country
Allocation %	Date of Birth D D M M Y Y
Signature of Guardian (Optional)	

## 3. CANCELLATION OF NOMINATION (Please strike out if your request is not for cancellation of Nomination)

I / We	1st Unit Holder
	2nd Unit Holder
	3rd Unit Holder
do hereby cancel the nomination made by me / us in favour of	1st Nominee
	2nd Nominee
	3rd Nominee
under Guardian	1st Guardian
	2nd Guardian
	3rd Guardian

## 4. UNIT HOLDER(S) SIGNATURE(S) (MANDATORY)

All the joint holders should sign the request for Nomination / Cancellation even if the mode of holding is not 'Joint'. Nomination form cannot be signed by Power of Attorney (POA) holder.

Date 

D	D	M	M	Y	Y	Y	Y
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1st Unit Holder	2nd Unit Holder	3rd Unit Holder
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