

KARTA OF HUF DECEASED - NEW KARTA APPOINTED

TRANSMISSION DOCUMENTS MATRIX – READY RECKONER

S. No.	Documents required for Transmission	Transmission to Surviving Holders		Sole Holder / All Joint holders deceased & Nomination has been registered	Sole Holder / All Joint holders deceased & NO Nomination registered	Karta of HUF deceased	
		2nd or 3rd Holder deceased	1st Holder deceased			New Karta Appointed	HUF Dissolved
1.	Prescribed Transmission Request Form	✓ Form T1	✓ Form T2	✓ Form T3	✓ Form T3	✓ Form T4	✓ Form T5
2.	Death Certificate of deceased Unit Holder/s / Karta in original or Photocopy duly attested by a Notary Public or a Gazetted Officer or photocopy self-attested by the nominee(s) / claimant(s) / legal heir(s) subject to verification with original by AMC branches.	✓	✓	✓	✓	✓	✓
3.	Copy of Birth Certificate (in case the claimant is a minor)	NA	NA	✓	✓	NA	✓
4.	Self-attested copy of PAN of the claimant/ new Karta/ Guardian	✓*	✓*	✓	✓	✓	✓
5.	KYC of the Claimant / New Karta / Guardian (in case of nominee /claimant being a minor / of unsound mind).	✓**	✓**	✓	✓	✓	✓
6.	Cancelled cheque leaf with name and bank account number pre-printed OR copy of bank statement / Photocopy of Bank Passbook with current entries (not older than 3 months) attested by a Notary Public or a Gazetted Officer or Bank Manager.	✓	✓	✓	✓	✓	✓
7.	Bank Attestation of Signature of the Claimant/ Guardian (in case the Claimant is a minor) by the Bank Manager as per Annexure-I where Transmission value upto ₹500,000	NA	NA	✓	✓	NA	✓
8.	Bank's letter certifying / attesting the signature and details of new Karta in the bank account of the HUF as per Annexure- 1a	NA	NA	NA	NA	✓	NA
9.	Attestation of Signature of the Claimant by a Notary Public or a Judicial Magistrate First Class (in the space provided in TRF) if the Transmission value in more than ₹500,000	NA	NA	✓	✓	NA	✓
10.	ID proof [PAN/Redacted Aadhaar/Voter ID / Passport or any other valid Officially Valid Document (OVD) as per PMLA guidelines] of the deceased person attested by the claimant(s), duly notarized or originals can be shown at the AMC branches and Original Seen and verified (OSV) seal attested by them.	✓	✓	✓	✓	✓	✓

*If PAN not submitted previously

**If not KYC compliant

SUPPORTING LEGAL DOCUMENTS

Sr. No.	Documents required for Transmission	Transmission to Surviving Holders		Sole Holder / All Joint holders deceased & Nomination registered	Sole Holder / All Joint holders deceased & Nomination NOT registered	Karta of HUF deceased	
		2nd or 3rd Holder deceased	1st Holder deceased			New Karta Appointed	HUF Dissolved
(i)	Indemnity Bond duly signed and executed by all legal heir/s confirming the claimants (Annexure II) - Duly notarised #	NA	NA	NA	✓	NA	NA
(ii)	Individual Affidavit by all legal heir/s (Annexure III) - Duly Notarised	NA	NA	NA	✓	NA	NA
(iii)	For Transmission value upto ₹500,000:						
	Document evidencing relationship of the claimant/s with the deceased unitholder/s	NA	NA	NA	✓	NA	NA
	NOC from other Legal Heirs (Annexure – IV)	NA	NA	NA	✓	NA	NA
	Any appropriate document evidencing relationship of the new Karta and the other coparceners with the deceased Karta.	NA	NA	NA		✓	
	<i>Note: If the value at PAN level is upto ₹5 lakh, a notarized indemnity bond from the legal heir(s) / claimant(s) to whom the securities are to be transmitted, in the specified format is required. However, No Objection certificate from all non-claimants shall be required only where there are multiple beneficiaries as per the Registered Will, but all of them have renounced their claim and have no objection to the applicant (claimant) making the claim for transmission of Units. In such cases, the PAN/any OVD of such other legal heirs may also be obtained along with the NOC duly attested by a notary public or by a gazetted officer as per the specified format.</i>						

SUPPORTING LEGAL DOCUMENTS

Sr. No.	Documents required for Transmission	Transmission to Surviving Holders		Sole Holder / All Joint holders deceased & Nomination registered	Sole Holder / All Joint holders deceased & Nomination NOT registered	Karta of HUF deceased			
		2nd or 3rd Holder deceased	1st Holder deceased			New Karta Appointed	HUF Dissolved		
(iv)	Where Transmission value is more than ₹ 500,000 but upto ₹10,00,000**:								
	a) Notarised copy of the Probated or Registered Will. In case of Registered Will, the same shall be accompanied with a notarised Indemnity bond from the claimant (i.e., appropriate beneficiary of the Will) OR b) Legal Heirship Certificate or its equivalent, along with – 1) a notarized indemnity bond from the legal heir(s) / claimant(s) to whom the securities are transmitted, as per the format specified provided; and 2) No Objection Certificate from all the non- claimants (remaining legal heirs), duly attested by a notary public or by a gazetted officer as per the format provided.	NA	NA	NA	✓			NA	NA
	Where transmission value at the PAN-level is more than ₹10 lakhs, any one of the documents mentioned below :								
	a) Notarised copy of Probated Will; OR b) Succession Certificate issued by a competent court, OR c) Letter of Administration or court decree, in case of Intestate Succession. <i>Note: In the above three scenarios, Indemnity Bond as mentioned at point no (i) is not required.</i>	NA	NA	NA	✓			NA	NA
	For change of Karta of HUF or Dissolution of HUF								
(v)	Indemnity bond signed by all co-parceners including the new Karta (Annexure V)	NA	NA	NA	NA	✓	NA		
(vi)	Indemnity bond signed by the Claimant, where there is no surviving co-parcener or the HUF has been dissolved/partitioned after demise of the Karta (Annexure VI)	NA	NA	NA	NA	NA	✓		
	<i>Note:</i> <i>Notarized copy of Decree of the relevant competent Court or Deed of Settlement or Deed of Partition.</i> <i>In case of no surviving co-parceners and the transmission value is more than ₹500,000 or where there is an objection from any surviving members of the HUF.</i>								

Transmission Request Form for Change of Karta upon demise of the registered Karta

To:

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

HSBC Mutual Fund

Sirs,

Name of the HUF:											
Name of the new Karta: Mr./Ms.											
PAN of the new Karta : <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<input type="checkbox"/> KYC Acknowledgment attached <input type="checkbox"/> KYC form attached

S.No.	Name(s) of the Deceased Unitholder(s)	Id. Proof attached**	Date of demise**
1	Mr./Ms.		D D / M M / Y Y Y Y
2	Mr./Ms.		D D / M M / Y Y Y Y

** Please attach certified copy of (i) Death Certificate and (ii) Id. proof such as PAN / Aadhaar / Passport/ Voter Id. (any one)

** ID proof [PAN/Redacted Aadhaar/Voter ID/Passport or any other valid Officially Valid Document (OVD) as per PMLA guidelines] of the deceased person attested by the claimant(s), duly notarized or originals can be shown at the AMC branches and Original Seen and verified (OSV) seal attested by them.

I, the surviving co-parcener of abovenamed HUF, hereby inform you that, Mr. _____, the Karta of the above HUF who was managing the affairs of the HUF, expired on _____ and I have taken over the affairs of the above HUF as its new Karta, being the senior most coparcener. I therefore, request you to replace the name of the deceased Karta with my name as the new Karta of the HUF in your records in respect of the investments of the HUF in the following schemes / folios:

S.No.	Scheme Name	Folio No.	No. of units
1			
2			
3			
4			

Contact Details of the new Karta

Mobile No. + 9 <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											Tel. (Res./Office) <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Mobile belongs to : <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Guardian (to Minor investment) <input type="checkbox"/> Dependant Children <input type="checkbox"/> Dependant Parents <input type="checkbox"/> Dependant Siblings <input type="checkbox"/> Custodian <input type="checkbox"/> POA <input type="checkbox"/> PMS																					
Email Address: Email ID to be filled in CAPITAL LETTERS																					
E-mail belongs to: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Guardian (to Minor investment) <input type="checkbox"/> Dependant Children <input type="checkbox"/> Dependant Parents <input type="checkbox"/> Dependant Siblings <input type="checkbox"/> Custodian <input type="checkbox"/> POA <input type="checkbox"/> PMS																					

Address of HUF (Please note that the address of the HUF will be updated as per address on KYC form / KYC Registration Agency records)

Address Line 1								
Address Line 2								
City	State	PIN <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

Bank Account Details of the HUF

Bank Name																											
Account number : <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																IFSC Code (11 Digit): <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											
A/c Type (Pls ✓) : <input type="checkbox"/> Savings <input type="checkbox"/> Current	MICR Code (9 Digit): <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																										
Name of bank branch																											
City:	Pin <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																										
Please attach a cancelled cheque (with name of the HUF pre-printed) OR Bank Statement/Passbook of the HUF to validate your bank details & Banker's Certification of the bank account details and signature of the new Karta as per Annexure 1.																											

- I also request you to pay the UNCLAIMED amounts, if any, in respect of the HUF by direct credit to the bank account mentioned above.
- I undertake to keep HSBC Mutual Fund / its AMC/RTA informed about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required by the AMC / RTAs.
- I hereby authorize HSBC Mutual Fund and its AMC/RTA to share/disclose any of the information provided by me/us, including any changes in respect thereof to the Mutual Fund's Bankers or my Distributor / Investment Advisor and to such other service providers as may be necessary for any operational reason, including to verify/validate my / our bank account details. I / We also authorize the Mutual Fund & its AMC/RTA to provide/ share any of the information provided by me/us including my holdings in the Mutual Fund to any governmental or statutory or judicial authorities/agencies as required by law without any obligation of informing me/us of the same.
- I hereby state that whatever is stated herein above are true to the best of my/our knowledge & belief.

Name the new Karta	Signature
	X

Documents Attached

- ☐ Copy of Death Certificate of the deceased Karta
- ☐ Officially Valid Document (OVD) of the deceased unitholder
- ☐ Banker's Certification of the bank account details and signature of the new Karta as per Form Annexure 1
- ☐ Cancelled cheque with HUF name pre-printed OR ☐ Bank Statement/Passbook of the HUF
- ☐ KYC Acknowledgment OR ☐ KYC Form of the new Karta
- ☐ KYC Acknowledgment OR ☐ KYC Form of the HUF (if the HUF is not KYC compliant)
- ☐ Bond of Indemnity signed by all surviving coparceners (including the new Karta) as per Annexure IV.
- ☐ Document evidencing relationship of the new Karta and the other coparceners with the deceased Karta

BANK ATTESTATION OF ACCOUNT DETAILS & ACCOUNT-HOLDER'S SIGNATURE

(where aggregate value of investment under all folios is up to ₹ 5 lakhs)

(To be issued on the Bank's Letter Head

OR

This form itself with Bank Official's name and Employee code mentioned & Bank seal affixed in the space below)

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Mr. / Ms. _____

is a customer of our bank, namely, _____ Name of the Bank _____,

_____ branch having

the following Bank Account:

Account number :	<input type="text"/>
A/c Type (Pls ✓) :	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR <input type="checkbox"/> Others _____
MICR Code (9 Digit) :	<input type="text"/>
IFSC Code (11 Digit) :	<input type="text"/>

His/her address, as per our Bank records, is as follows:

City	State	PIN <input type="text"/>
PAN as per Bank records <input type="text"/>		

Signature Verification by Bankers (Manager and above)

Signature of the above customer
in the box alongside, verified &
validated with his/her specimen
signature as per Bank's records

X	Signature of the client
---	-------------------------

X	Signature of the bank official with Bank's Seal
---	---

Name* of the attesting Bank Official	
Designation* (Manager and above)	Manager and above
Employee Code*	
Telephone Number*	

* Mandatory

Indemnity Bond for Change of Karta in respect of MF Units upon demise of the Karta

[To be submitted in non-judicial stamp paper as per the value prescribed by the respective State subject]

(To be signed by all the co-parceners, including the new Karta)

I/We, the below mentioned surviving co-parcener(s) of _____ Name of the Hindu Undivided Family _____ HUF, (hereinafter referred to as "the HUF") hereby solemnly affirm and state on oath as follows –

(i) The HUF has investments in the following Schemes/ folios of _____ Mutual Fund:

S.No.	Scheme Name	Folio No.	No. of Units
1			
2			
3			
4			

(ii) The Karta of the above HUF, Mr. _____, who was managing the affairs of the HUF, expired on _____ and the persons mentioned below are the only living member(s) of the HUF:

S. No.	Name of the coparcener(s)	Address	Date of Birth	Relationship with the Deceased Karta
1				
2				
3				
4				

(iii) I/We further affirm jointly and singly that Mr./Ms. _____ is the senior most coparcener of the HUF/is the new Karta duly appointed by all the surviving members of the HUF.

(iv) I/We have, therefore, approached you with a request to replace the name of the deceased Karta with the name of Mr./Ms. _____ as the new Karta of the HUF in your records for which I/We execute an indemnity as is herein contained and on relying on the information herein given by us believing the same to be true.

(v) In consideration therefore of HSBC Mutual Fund acceding to my/our request to replace the name of the Karta in the aforesaid Mutual Fund folios in the place of deceased Karta, I/We hereby jointly and severely agree and undertake to indemnify and keep indemnified, saved, defended, harmless HSBC Mutual Fund and its successors and assigns for all time hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages, etc., whatsoever which the mutual fund may suffer and/or incur by reason of acceding to and acting on my/our request as herein above mentioned.

I/we hereby state that whatever is stated herein above are true to the best of my/our knowledge & belief.

IN WITNESS WHEREOF, I/we have hereunto set my/our hand/s and seal/s this _____ day of _____

Signed and delivered by

S.No.	Name of the Coparcener/s	Signature
1.		X
2.		X
3.		X
4.		X

SURETY

I/we, the undersigned Surety, certify that the above facts are true to the best of my/our knowledge and bind myself/ourselves as Surety to make good all claims, charges, costs, damages, demands, expenses and losses which the HSBC Mutual Fund, its successors and assigns may sustain, incur or be liable for in consequence of complying with the request contained above of the coparceners hereinabove and the said Mutual Fund and its successors, assigns will be entitled to claim and realise all claims, charges, costs, damages, demands, expenses and losses from me or from my properties, as the case may be.

S.No.	Sureties Name & Address (Mandatory)	PAN	Signature of the Surety
1.			X
2.			X

Signed before me at

Place : _____

Date : _____

X

Signature of Notary with Official Seal of Notary

STAMP DUTY CHARGES FOR VARIOUS STATES IN INDIA**As on October 15, 2024**

S. No.	Name of the State	POA (for each person) (INR)	Indemnity Bond (IB) for Transmission	Affidavit (A) for Transmission	Indemnity/Affidavit for Name Change (IB+A value)	Indemnity for Revalidation (IB+A value)
1	Gujrat	300	300	50	350	350
2	Karnataka	500	500	100	600	600
3	West Bengal	100	50	10	60	60
4	Tamil Nadu	100	80	20	100	100
5	Maharashtra	500	500	500	1000	1000
6	Delhi	50	100	10	110	110
7	Rajasthan	200	200	50	250	250
8	Uttar Pradesh	100	100	10	110	110
9	Telangana	10	5	5	10	10
10	Kerala	600	500	50	550	550
11	Punjab & Haryana	10	5	15	20	20
12	Madhya Pradesh	1000	1000	50	1050	1050
13	Jammu & Kashmir	100	500	10	510	510
14	Andhra Pradesh	10	5	5	10	10
15	Chhattisgarh	100	250	5	255	255