

Dematerialization Request Form (DRF)
Bye Law 9.1.1

To be filled up in CAPITAL letters in triplicate i.e. copies for Shareholder, Depository Participant and Issuer. **Names must be correctly stated. Separate forms must be filled up for different Issuers and Free Securities and Locked-in Securities of the same Issuer. One form can accommodate up to 25 certificate numbers and within each certificate number up to 4 distinctive number ranges.** All communication / advice shall be sent to the mailing address of only the First Named Account Holder.

Date (DDMMYYYY).....

1. To be filled up by the CDBL Participant

Name of CDBL Participant (Up to 99 Characters)	
CDBL Participant ID <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>	Dematerialization Request No. (DRN) (CDBL System Generated Number)
DRF No.....	Request Setup Date (DDMMYYYY).....

2. Details of Securities surrendered for Dematerialization

BO ID <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
BO Name.....
ISIN <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> Name of Issuer Company.....
Quantity Type (i.e. Free or Lock-in) Free <input type="checkbox"/> Lock-in <input type="checkbox"/> Expiry Date (DDMMYYYY).....
In case of Lock-in Tick the Reason Code as applicable:
Employee Quota <input type="checkbox"/> Promoters Quota <input type="checkbox"/> Foreign Investor's Quota <input type="checkbox"/> Private Placement <input type="checkbox"/> Sponsors Quota <input type="checkbox"/> Others <input type="checkbox"/>
Total Quantity..... Quantity In Word.....
Type of Securities
Ordinary Share <input type="checkbox"/> Preference Share <input type="checkbox"/> Debentures <input type="checkbox"/> Bonds <input type="checkbox"/> Units <input type="checkbox"/> Others <input type="checkbox"/>

I/We request you to dematerialize the enclosed certificate(s) registered in my/our name for the credit of my/our Depository Account.

Serial No.	Registered Folio Number	Certificate Number	Distinctive Number	
			From	To
01.				
02.				
03.				
04.				
05.				
06.				
07.				
08.				
09.				
10.				
11.				
12.				

Continued Overleaf

Serial No.	Registered Folio Number	Certificate Number	Distinctive Number	
			From	To
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				

The original certificate(s) as listed above are hereby surrendered by me/us for dematerialization and the same are free from any lien or charge or encumbrance and represent the bonafide securities of the issuer company to the best of my/our knowledge and belief.

Applicants	Name of applicants / Authorized signatories in case of ltd Co.	Signature with date
First Applicant		
Second Applicant		
3 rd Signatory (Ltd Co. Only)		
POA Holder		

3. Authentication by CDBL Participant

We have received the above-mentioned securities for dematerialization. The Dematerialization Request Form (DRF) is verified with the certificate(s) surrendered for dematerialization and we certify that the DRF is in accordance with the details mentioned in the enclosed certificate(s). It is also certified that the holder/s of the securities have a Depository Account with us in the same name/s.

Name Designation Signature **Participant's Seal**