Form ISR - 1

(see SEBI circular No. SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2021/655 dated November 03, 2021 on Common and Simplified Norms for processing investor's service request by RTAs and norms for furnishing PAN, KYC details and Nomination)

REQUEST FOR REGISTERING PAN, KYC DETAILS OR CHANGES / UPDATION THEREOF

[For Securities (Shares / Debentures / Bonds, etc.) of listed companies held in physical form]

Α.	1 /	/ We request w	ou to Register	/ Change / Lind	ate the following	(Tick ✓ relevant box)		
	' /	we request y		, change, ope		(TICK - TCICVAITE BOX)		
	PAN			☐ Bank deta	ils	Signature		
	☐ Mobile number			E-mail ID		Address		
В.	Se	ecurity Details:	•		•			
	Name of the Issuer Company			Folio No.:				
N	lame	e(s) of the Secu	urity holder(s)	1.				
а	s pe	r the Certificat	e(s)	2.				
	·			3.				
N	luml	per & Face	value of					
s	ecur	ities						
	Distin	nctive number	of securities	From To				
(Opti	onal)						
C.	1/	/ We are subn	nitting docume	ents as per Tab	le below (tick ✓	as relevant, refer to the		
	in	structions):		-				
	✓	Document /			Instruction / Rea	mark		
		Information						
		/ Details						
1	PAI	N of (all) the (j	oint) holder(s)					
		PAN						
		Whether it						
		is Valid						
		/linked to PAN shall be valid only if it is linked to Aadhaar by March 31, 2022*						
	Aadhaar): For Exemptions / Clarifications on PAN, please refer to Objection Memo in pa							
		☐ Yes ☐No	4					
2		Demat						
		Account Number	Also provide Client Master List (CML) of your Demat Account, provided by					
		number	Depository Pa		(- , - : , - : , - :)	, , , , , , , , , , , , , , , , , , , ,		
			_ = 5,55,65,7,7					

(strike	e off what is not a pration: All the abo	use Separate Annexure if extr pplicable). ove facts stated are true and Holder 1	ra space is required) in which	Holder 3			
(strike Decla ignature	e off what is not a pration: All the abo	pplicable). ove facts stated are true and	ra space is required) in which correct.				
(strike Decla ignature	e off what is not a pration: All the abo	pplicable). ove facts stated are true and	ra space is required) in which correct.				
(strike Decla ignature	e off what is not a pration: All the abo	pplicable). ove facts stated are true and	ra space is required) in which correct.				
(strike Decla	e off what is not a aration: All the abo	pplicable). ove facts stated are true and	ra space is required) in which correct.				
(strike Decla	e off what is not a aration: All the abo	pplicable). ove facts stated are true and	ra space is required) in which correct.				
(strike	,,(e off what is not a	pplicable). ove facts stated are true and	ra space is required) in which correct.				
(strike	,,(e off what is not a	pplicable).	ra space is required) in which	I / We are the holder(s)			
Autho	•	use Separate Annexure if extr		I / We are the holder(s)			
Autho	orization: / We i			, ,			
	• •• • / › • /	authorise you (RTA) to update	e the above PAN and KYC de	tails in my / our folio (s)			
# In	case it is not prov	ided, the details available in t	the CML will be updated in th	ne folio			
* or (any date as may be	specified by the CBDT	(DP: Depository Partic	cipant)			
	Mobile		#				
6	address Mobile	#					
5	E-mail						
		Passbook or Bank Statement attested by the Bank #					
		original cancelled chequ	ue with name of security hold	er printed on it <i>or</i> <u>Bank</u>			
		IFS Code: Provide the following:					
		Bank Name:					
4	Bank details	Account Number:					
		☐ The proof of address i	n the name of the spouse				
		gives the registered addre	•				
			ly notarized and / or apostille	•			
		Financial Institutions.	Power of Attorney given by	FII / sub-account to the			
		Undertakings, Scheduled Co					
		•	nt and its Departments, S				
			olu. nent with address, issued b	v any of the following:			
		Not more than 3 months	Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill -				
		Utility bills like Tolonk	ana Dill (anly land line). Fla	stricity bill or Coc bill			
		License / Flat Maintenand	e biii.				

of Any one of the documents, only if there is change in the address;

☐ Client Master List (**CML**) of your Demat Account, provided by DP.

Proof of Address of

first

Form ISR - 2

(see circular No. SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2021/655 dated November 03, 2021 on Common and Simplified Norms for processing investor's service request by RTAs and norms for furnishing PAN, KYC details and Nomination)

Confirmation of Signature of securities holder by the Banker

1. B	Bank Nam	ne and Branch						
2. Ba	2. Bank contact details							
1	Postal Address							
1	Phone number							
E-	-mail add	dress						
2 5								
3. B	ank Acco	unt number						
Λ Λ	ccount o	noning data						
4. A	ccount o	pening date						
Ε Λ.	ccount h	older(s) name(s)			1)			
J. A	iccount n	older(s) flame(s)			1)			
					2)			
					-,			
					3)			
6. La	atest pho	tograph of the ac	count ho	lder(s)	<u>.</u>			
			7			1]
		1st Holder		and T			3 rd Holder	
		1" Holder		2 nd H	older		3 rd Holder	
					Ţ			
;		older(s) details as	s per Bank	Records	5			
a)) Addre	SS						
h)) Phone	number						
c)		address						
d)	<i>.</i>				<u> </u>			
1)			2)			3)		
					Signatur	e verified	d as recorded with	h the Bank
Seal of the Bank								
			gnature)					
Place:	:		me of the		anager			
		······································	iployee Co					
Date:	Date: E-mail address							

Form ISR - 3

Declaration Form for Opting-out of Nomination by holders of physical securities in Listed Companies

(see SEBI circular No. SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2021/655 dated November 03, 2021 on Common and Simplified Norms for processing investor's service request by RTAs and norms for furnishing PAN, KYC details and Nomination)

[Under Section 72 r/w Section 24 (1) (a) of Companies Act, 2013 r/w Section 11(1) and 11B of SEBI Act, 1992 and Clause C in Schedule VII and Regulation 101 of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015)]

Name of the Com Registered Addre	pany ss of the Company	: :		
hereunder <u>, do ne</u> respect of such se	ot wish to nomine ecurities in the eve	ate any persont of my /our o	n(s) in whom shall	s of which are given vest, all the rights in is being opted out)
Nature of Securities	Folio No.	No. of Securities	Certificate No	o. Distinctive No.
aware that in cas to furnish the re Court like Decree	e of my / our deatequisite documents or Succession Celent as may be pres	ch, my / our le s / details, ind rtificate or Let	gal heir(s) / represe cluding, Will or doc ter of Administratio	nee(s) and further are intative(s) are required tuments issued by the on / Probate of Will or y, for claiming my / our
Name(s) and Add Sole / First Holde	ress of Security hol r Name	lders(s)		Signature(s)
Second Holder Na	ame			
Third Holder Nam	ne			
Name and Addres	ss of Witness			Signature

Form No. SH-13

Nomination Form

[Pursuant to section 72 of the Companies Act, 2013 and rule

19(1) of the Companies (Share Capital and Debentures) Rules 2014]							
То							
Name	of the company	:					
Addre	ss of the compar	ny:					
do h	eiculars of which a nereby nominate ts in respect of s	re given her the followin	eunder wish t g persons in v	o make nom	nination and vest, all the		
(1)	(1) PARTICULARS OF THE SECURITIES (in respect of which nomination is being made)						
	Nature of	Folio No.	No. of	Certificate	Distinctive		
	securities		securities	No.	No.		
(2) PARTICULARS OF NOMINEE/S — (a) Name: (b) Date of Birth: (c) Father's/Mother's/Spouse's name: (d) Occupation:							
	(e) Nationality:						

(f) Address:

(g) E-mail id:								
(h) Relationship with the security holder:								
(3) IN CASE NOMINEE IS A MINOR								
(a) Date of birth:	(a) Date of birth:							
(b) Date of attaining r	najority							
(c) Name of guardian	:							
(d) Address of guard	lian:							
	Name:							
	Address:							
Name of the Security								
Holder (s)	Signature	Witness with						
		name and address						

Form No. SH-14

Cancellation or Variation of Nomination

[Pursuant to sub-section (3) of section 72 of the Companies Act, 2013 and rule 19(9) of the Companies (Share Capital and Debentures) Rules 2014]

Name of the company:

I/We hereby cancel the nomination(s) made by me/us in favor									
of	of(name and address of the nominee) in respect of the below								
men	tioned securities.								
	or								
I/We	I/We hereby nominate the following person in place of								
	as	nominee i	n respect of	the below	mentioned				
secu	ırities in whom sh	nall vest all	rights in resp	ect of such s	securities in				
the	event of my/our	death.							
(1)	(1) PARTICULARS OF THE SECURITIES (in respect of which nomination is being cancelled / varied)								
	Nature of	Folio No.	No. of	Certificate	Distinctive				
	securities		securities	No.	No.				
(a) PARTICULARS OF THE NEW NOMINEE: i. Name:									
	ii. Date of Birth:								
	iii.		other's/Spous	se's name:					
		·	•	e a manner					
		Nationality	' :						
	v. Address:								

vi. E-mail id:

- vii. Relationship with the Security holder:
- (b) IN CASE NEW NOMINEE IS A MINOR-
 - i. Date of Birth:
 - ii. Date of attaining majority
 - iii. Name of guardian:
 - iv. Address of guardian:

Signature

Name of the Security

Holder (s)

Witness with name and address