Dematerialization Request Form

□ Normal Dematerialization □ Transmission-cum- Dematerialization □ Transposition-cum-Dematerialization



KBS India Ltd.

502, Commerce House, 140, Nagindas Master Road, Fort, Mumbai – 400 001.

		T	el No.:	022	2-699	6 699	96. Ema	ail Id:	kbs	@kt	S.C	<u>.in</u>			-				
(To be filled up by the Depo	sitory P	Partic	ipant)																
DRN							Date	1			П						- 1		1
DRF No.							Date	-						+			_		
214 1161							Dute					I					!_		
(To be filled by the BO. Pleas and Locked – in securities lock-in expiry dates.) I / We request you to demat	. In ca	se of	f locke	ed -	in s	ecurit	ties fill	up a	a se	para	te [ORF 1	for	diffe	rent	loc	k-in	rea	son /
account.																			
DP ID 1 2	0	9	6	5	0	0	Clier	nt ID			0	0	0	0	_				
Name of First Holder																			
Name of Second Holder																			
Name of Third Holder																			
Name of the Company																			
ISIN	I		N																
Quantity to be Dematerialized	d (In	ı Figu	ures)																
	(In	ı Woı	rds)																
Number Of Certificates (in w	ords)																		
Nature of Securities					☐ Fr	ee Se	ecurities		ock	-in S	ecur	ities							
Lock-in reason																			
Lock in Expiry Date			D			M		M		Υ		Υ		Υ	/		Υ		
Details of Securities:																			
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,				uity ther	(Spe		oenture	S	шв	onds	i	ום	mics						
Face Value of Securities						-												_	
			From	1		To)	F	rom	1		0			ron	1		То	
Folio No.																			
Certificate Numbers																	_		
Distinctive Numbers																	_		
Quantity																			
Attach an annexure (duly signature) The original certificates / do from any lien or charge or early our knowledge and belongers.	cumen encumb ief.	ts are	e here e and	by s	surrer	ndere	d by m bonafic	e / u de se	s fo curi	r de ities	mate of th	erializ	zatio	n ar	nd t npa	he s ny t	o th	e be	est of
Nesse	rırst	/ 50	ole Ho	ıaeı	Г		5	Seco	na I	HOIC	er			Third Holder					
Name																			
Signature with DP																			
Signature with RTA																			
Participant Authorization						1							1						

that the Holder(s) of securities have a beneficiary account with us in the same name(s) and order of name(s).