Demat Request Form

PS: To be filled in duplicate.

ZUARI FINSERV LIMITED (DP-Id: IN301055)

Regd. Office: Jaikisaan Bhawan, Zuarinagar, Goa 403 726 (India)

Corporate Office: Plot No. 2, Zamrudpur Community Centre, Kailash Colony Extn. New Delhi 110048

Phone: 011-46474000. Fax: 011-41608276. Customer Care: 1800 123 1212 Web: www.zuarimoney.com Email: wecare@adventz.zuarimoney.com

DRN :		[Date :			(Both fields to be filled by the DP)							
I/We request you to	demateria	lise the	enclose	ad certificate/s	into my/our a	account a	as ner t	he details	aiven he	JOW.			
Client Id	acmateria	iise trie	CHClOS	ca cer timeate/3	into myrour c	decount	us per ti	ne detans	given be	710 11.			
Sole/ First Holder Name					<u> </u>	I_		I	i				
Second Holder Name													
Third Holder Name													
Company Name													
Type of Security		Equity Shares / Bonds / Debentures											
Quantity to be		In words											
dematerialised													
		In figures											
Face Value													
ISIN (To be filled in b	y the		N										
DP)													
					ls of securitie								
Free Securities / Locked-in Securities (PIs tick)													
Folio No.		Certificate Nos.				Distincti			ve Nos			y	
		rom		То		From		То					
TalalManac													
Total No. of													
Certificates Locked-in	Lock In r	Lock In reason Lock-in release date											
securities details	LUCK III I	cason			Lock-in release date								
Please See (PS)	In case th	ase the space is found to be insufficient, an annexure containing the certificate details in the same											
110030 000 (10)		rmat may be attached											
	Please use separate form for free securities and lock-in securities.												
					on by Custon								
I/we hereby declare	that the	above r	nentio				our na	me. The	original	certificat	tes are l	nereby	
surrendered by me													
dematialisastion are			or cha	arge of encumb	orance and re	epresents	s the bo	onafide se	curities	of the c	ompany	to the	
best of my/our know	ledge and	belief.											
					(s) Signature	e/s							
Sole/First Holder	Second Holder						Third Hold						
				Dti-'	ont Authorit	tion							
We have received the	ao abawa r	montion	od con		nt Authorisa		plicatio	n form is	varified	Lvvith th	o cortifi	noto(c)	
surrendered for den													
enclosed certificates.												III tile	
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Branch Code	Branch Name												
Sr. No					2. 0.1.011								
Date													
Executive's Name													
Executive's Signature													
Stamp & Date													