

APPLICATION FORM FOR TRANSPOSITION [TPRF]

[TO BE ATTACHED WITH DRF]

KALPALABDHI FINANCIALS PRIVATE LIMITED Shop No.1A, Hare Krishna Nagar Building, Jawahar Road, Ghatkopar (E), Mumbai 400077											
TPRF No.			Date								
	ose the names of t edit the same in the		urities as identified ir as detailed below:	n the a	ccompa	anying	dema	t reque	est forn	n and	
DRF No.			Date								
Name of the (Tompany		•						•		

			/											
ISIN					Ι	Ν								
DP ID	1	2	0	9	4	0	0	0	Client ID					
Name of	Name of the holders (As it appears in the Demat Account)													
First / Sole Holder Name														
Second Holder Name														
Third Holder Name														

Name of the Holders (As it appears on the Certificates):

Folio Nos.-

Sr. No.	Name(s) of the Holder(s)
1.	
2.	
3.	

Folio Nos	
Sr. No.	Name(s) of the Holder(s)
1.	
2.	
3.	

Folio Nos	
Sr. No.	Name(s) of the Holder(s)
1.	
2.	
3.	

	First / Sole Holder	Second Holder	Third Holder
Name (as per demat a/c)			
Signature with DP			
Signature with RTA			

We state that the above details are true to the best of our knowledge

Depository Participant Seal and Signature

Note:

- 1. Separate Transposition form should be filled by the joint holders for securities having distinct ISIN.
- 2. Please write each combination of names in separate boxes.
- 3. Use separate transposition form if there are more than three combinations of names.