APPLICATION FORM FOR TRANSPOSITION [TPRF] [TO BE ATTACHED WITH DRF]

SVCM SECURITIES PRIVATE LIMITED B-702, DIVINE JALPA, JAMLI GALLI,

		Т	EL: 02	2-289	8030	UMBAI: B curities									
TPRF No.						Date	D	D	M	M	Υ	Υ	Υ	Υ	
Please trans thereafter cr	pose the names edit the same in					as identi	fied in t	ı	ı	- 1			1	L	
DRF No.		1				Date	D	D	\mathbb{N}	M	Υ	Υ	Υ	Υ	
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DP ID Name of the I First / Sole Ho Second Holde		pears in t	he Dem	nat Acc	count)	Clie	nt ID								
Third Holder I	Name														
Folio Nos Sr. No. 1. 2. 3.	Tiolueis (As it a)	Name(s) of the Holder(s)													
Folio Nos Sr. No. 1. 2. 3.					Nam	e(s) of	the Hol	lder(s)						
Folio Nos Sr. No.					Nam	e(s) of	the Hol	der(s)						
2. 3.															
		Firs	t / Sole	Holo	der		Second	d Hold	er			Third H	lolder		
Name (as per	demat a/c)														
Signature with	n DP														
Signature with	n RTA														
						1									

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.

- Please write each combination of names in separate boxes. 2.
- Use separate transposition form if there are more than three combinations of names.