Form-B

INDEMNITY

[For issuance of duplicate securities]

Note: This indemnity is to be executed in the presence of a Public Notary / Gazetted Officer

1.647	on Stamp Paper wort	_		Son /
	/ of			
having	Permanent Accoun	t No (s)		do
1. That I/we, am		nolder/s of the Secui		
name(s):) issue duplicate cer	tificate(s) for securi	ties, as detailed b	elow in my/our
Name of the Company	Certificate No.**	Distinctive No.**	Folio No. **	No. and Face value of securities held
1				
3				
4				
7				
**In case of non-a shall obtain the sa		icate Nos./Distinctiv	re Nos./ Folio nos	s., security holder
own investment/fo	unds against allotme	ired by me/us for vaent in Public Issue/ain the year(s)	llotment in Right	· ·
saved, defended, hassigns for all time expenses, damage	narmless, the afores hereafter against al s, etc., whatsoever v	ree and undertake t aid (Name of the Co Il losses, costs, claim which you may suffe plicate Securities as	mpany/RTA) and instance and ins	its successors and ds, risks, charges, reason of your, at
IN WITNESS WHEF	REOF the said 1) M	r. /Ms (Na	ame and signatur	e of the witness)
And 2) Mr. /Ms have hereunto		Name and espective hands	signature of the v and seals	witness #, this day of

Signed before me	
at:	
on :	
Signature of Notary / JMFC	
Official stamp & seal of the Notary Magistra	te/ Notary & Regn. No.:
Address of First holder / Applicant :	
Pincode	
Tel. No.	
Email id	
Date	
	Signature of All holder(s) / Applicant(s)
FOR OFFICE USE ONLY	
Signature checked by	