## (On the Letter-Head of the Company)

## Letter of Intent cum Master Creation Form

Kindly ensure that all the columns are properly filled. Write “N.A.” wherever not applicable. Fill up the form in BLOCK LETTERS only. Affix stamp and initials in each page of the form.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | D | D | M | M | Y | E | A | R |

**To,**

**The Managing Director**

**Central Depository Services (India) Limited**

A Wing,  25th Floor, Marathon Futurex,

Mafatlal Mills Compounds,

N M Joshi Marg, Lower Parel (E)

Mumbai – 400013

Dear Sir,

We are interested in offering demat option to our shareholders. Kindly admit the securities as per the attached details and allot an International Securities Identification Number/s (ISIN/s) for the same. We confirm that the information provided is true and correct to the best of our knowledge and we will be solely responsible for any false or incorrect information or failing to furnish the relevant information along with the required documents.

The details of our Company are as given below:

**A. Full name of the Company/Asset Management Company with Scheme Name:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**B. Previous Name(s) of the Company (Applicable where there is(are) change(s) in name(s) of the Company after incorporation):**

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **Previous Name** | **Date of Name Change** |
| 1 |  | D | D | M | M | Y | E | A | R |
| 2 |  | D | D | M | M | Y | E | A | R |

**C. Company Information:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Incorporation | D | D | M | M | Y | E | A | R |
| Main Business |  |
| PAN |  |  |  |  |  |  |  |  |  |  |
| TAN |  |  |  |  |  |  |  |  |  |  |
| CIN |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| GST |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**D. Type of Company (Put √ at the appropriate box):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Indian |  |  | PSU |  |
| MNC (Multinational) |  | Others (pl specify) |  |
|  |
| Public Limited |  |  | Listed |  |
| Private Limited |  | Unlisted |  |

**E. Registered Office Address :**

|  |  |
| --- | --- |
| Address – 1 |  |
| Address – 2 |  |
| Address – 3 |  |
| City |  | PIN |  |  |  |  |  |  |
| State |  | Country |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

**F. Administrative/Corporate/Correspondence Office Address (Put √ at the appropriate box):**

|  |  |  |
| --- | --- | --- |
| Same as Registered Office Address | : |  |
| Other Address (if any) | : |  |

**Other Address (Applicable if ticked on Other Address):**

|  |  |
| --- | --- |
| Address – 1 |  |
| Address – 2 |  |
| Address – 3 |  |
| City |  | PIN |  |  |  |  |  |  |
| State |  | Country |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

**G. Billing Address (Put √ at the appropriate box):**

|  |  |  |
| --- | --- | --- |
| Same as Registered Office Address | : |  |
| Same as Correspondence Address | : |  |
| Other Address (if any) | : |  |

**Other Address (Applicable if ticked on Other Address):**

|  |  |
| --- | --- |
| Address – 1 |  |
| Address – 2 |  |
| Address – 3 |  |
| City |  | PIN |  |  |  |  |  |  |
| State |  | Country |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

1. **Name and Address of Trustee Company (Applicable ONLY in case of Admission of Mutual Fund Scheme):**

|  |  |
| --- | --- |
| Name |  |
| Address – 1 |  |
| Address – 2 |  |
| Address – 3 |  |
| City |  | PIN |  |  |  |  |  |  |
| State |  | Country |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

1. **Details of Board of Directors : (Please clearly identify The Chairman, MD and The Wholetime Director(s))**

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **Name** | **PAN** |
| 1 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| DIN |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| DIN |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| DIN |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| DIN |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| DIN |  |  |  |  |  |  |  |  |  |  |  |  |

1. **Details of Promoters/Principal Shareholders:**

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **Name** | **PAN** |
| 1 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  | PAN |  |  |  |  |  |  |  |  |  |  |  |  |
| UID |  |  |  |  |  |  |  |  |  |  |  |  |

**K. Particulars of the Company Secretary:**

|  |  |
| --- | --- |
| Name  |  |
| Employee |  | Practicing |  |
| Designation [If Employee] |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| PAN |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

**L. Particulars of the Compliance Officer (Put √ at the appropriate box):**

|  |  |  |
| --- | --- | --- |
| Same as Company Secretary | : |  |
| Other Personnel (if any) | : |  |

**Other Personnel (Applicable if ticked on Other Personnel):**

|  |  |
| --- | --- |
| Name  |  |
| Designation |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| PAN |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

**M. R & T Work of the Company:**

**R & T Agent Details:**

|  |  |
| --- | --- |
| Name |  |
| Address – 1 |  |
| Address – 2 |  |
| Address – 3 |  |
| City |  | PIN |  |  |  |  |  |  |
| State |  | Country |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

**Type of Service (Put √ at the appropriate box):**

|  |  |  |
| --- | --- | --- |
| Single Point Connectivity [Physical + Electonic] | : |  |
| Only Electronic Connectivity | : |  |

**(Note : As per SEBI guidelines all Listed Companies must have Single Point Connectivity)**

**Physical RTA Details (If ticked on “Only Electronic Connectivity):**

[Address of the registry operations where the physical securities for dematerialisation / rematerialization are to be deliverd by the Depository Participants]

|  |  |
| --- | --- |
| Name |  |
| Address – 1 |  |
| Address – 2 |  |
| Address – 3 |  |
| City |  | PIN |  |  |  |  |  |  |
| State |  | Country |  |
| Phone – 1 |  |  |  |  |  |  |  |  |  |  |  |  | Phone – 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Fax |  |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |  |
| Email ID (s) |  |

**N. Networth (Financial details as per the Latest Annual Report / Audited Accounts):**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Financial Details as on** | D | D | M | M | Y | E | A | R |
|  |
| **Particulars** | **[In Rs]** |
|  | Paid up Capital | A |  |
| Add  | Reserve & Surplus | B |  |
| Less  | Accumulated losses, if any | C |  |
| Less | Miscellaneous Expenditure | D |  |
| **Total Networth –**  | **A + B – C-D** | **E** |  |
| Appreciation –  | If E > A |  | Erosion –  | If E < A |  |
| Appreciation / Erosion [%]  | = E / A x 100 – 100 | % |

**Note:**

If networth is less than 1 Crore and/ or erosion of capital is more than 50%, three years annual Issuer fees will be applicable (i.e. for the current FY plus payment in advance for the next 2 FYs).

**O. Any Other Information:**

|  |
| --- |
|  |

We certify that the particulars furnished hereinabove as also in the attached documents are true and correct. We further undertake to inform CDSL of any change in the capital structure (in case of equity / preference shares) or change in the terms of the issuance of security/ies (in case of debt instruments / commercial papers / certificate/s of deposits etc) of which admission is being sought including the listing approval/s, registered office from time to time.

|  |
| --- |
|  |
| **Signature of Authorized Signatory** |
| **Name** | **:** |  |
| **Designation** | **:** |  |
| **Place** | **:** |  | **Date** | **:** | D | D | M | M | Y | Y | Y | Y |

##

## (On the Letter-Head of the Company)

## Letter of Intent cum Master Creation Form

#####  (Part – B)

**Particulars of Bonds/Debentures to be admitted with CDSL**

Kindly ensure that all the columns are properly filled. Write “N.A.” wherever not applicable. Fill up the form in BLOCK LETTERS only. Affix stamp and initials in each page of the form.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | D | D | M | M | Y | E | A | R |

**To,**

**The Managing Director**

**Central Depository Services (India) Limited**

A Wing,  25th Floor, Marathon Futurex,

Mafatlal Mills Compounds,

N M Joshi Marg, Lower Parel (E)

Mumbai – 400013

Dear Sir,

We are interested in offering demat option to our security holders. Kindly admit the securities as per the details given below and allot an International Securities Identification Number/s (ISIN/s) for the same. We confirm that the information provided is true and correct to the best of our knowledge and we will be solely responsible for any false or incorrect information or failing to furnish the relevant information along with the required documents.

The details of our securities are as given below:

|  |  |  |
| --- | --- | --- |
| **Issuer Details:** |  |  |
| 1 | Issuer Name | : |  |
| 2 | Issuer Former Name(s) | : |  | Name | With Effect From |
| 01 |  |  |
| 02 |  |  |
| 03 |  |  |
| 3 | Corporate Identity Number (CIN) | : |  |
| 4 | Type of Issuer | 1. Based on ownership
 | : | 01 | Public Sector Undertaking (PSU) |  |
| 02 | Non PSU |  |
| 1. Nature
 | : | 01 | Bank |  |
| 02 | NBFC |  |
| 03 | Other |  |
| 5 | Business Sector | : | 01 | Basic Materials |  |
| 02 | Consumer Goods including FMCG |  |
| 03 | Consumer Services |  |
| 04 | Energy |  |
| 05 | Finance |  |
| 06 | Healthcare |  |
| 07 | Industrial |  |
| 08 | Technology |  |
| 09 | Telecommunications |  |
| 10 | Utilities |  |
| 6 | Address of Registered Office of the Issuer | Add1 | : |  |
| Add2 | : |  |
| Add3 | : |  |
| City | : |  |
| Zip Code | : |  |
| State | : |  |
| Country | : |  |
| 7 | Name of the Compliance Officer / Company Secretary | Compliance Officer | : |  |
| Company Secretary | : |  |
|  |  |  |  |  |
| **Instrument Details:** |  |  |
| 8 | Type of Instrument | : | 01 | Bonds |  |
| 02 | Debentures |  |
| 9 | Mode of Issue | : | 01 | Public Issue |  |
| 02 | Private Placement |  |
| 03 | Bonus Issue |  |
| 04 | Rights Issue |  |
| 10 | Whether ISIN is required for Letter of Allotment (LOA) | : | 01 | Yes |  |
| 02 | No |  |
| 03 | Not Applicable |  |
| 11 | Whether issued in the Form of | : | 01 | Promissory Note |  |
| 02 | Debenture |  |
| 12 | 1. Whether Secured or Unsecured
 | : | 01 | Secured |  |
| 02 | Unsecured |  |
| If secured, provide complete details regarding the assets Secured / Hypothecated / Mortgaged etc. | : |  |
| 1. Whether Guaranteed or Partially Guaranteed
 | : | 01 | Guaranteed |  |
| 02 | Partially guaranteed |  |
| 03 | Not guaranteed |  |
| If Guaranteed, provide complete details regarding the Guarantee | : |  |
| 13 | Type of Convertibility | A) | : | 01 | Fully Convertible |  |
| 02 | Partly Convertible |  |
| 03 | Non-Convertible |  |
| B) | : | 01 | Optionally Convertible |  |
| 02 | Compulsorily Convertible |  |
| If convertible, kindly provide the details thereof | : |  |
| 14 | Seniority in Repayment | : | 01 | Senior |  |
| 02 | Subordinate – Tier 1 |  |
| 03 | Additional – Tier 1 |  |
| 04 | Subordinate – Tier 2 |  |
| 05 | Subordinate – Tier 2 – Upper |  |
| 06 | Subordinate – Tier 2 – Lower |  |
| 07 | Subordinate – Tier 3 |  |
| 08 | Perpetual |  |
| 15 | Whether tax free | : | 01 | Yes |  |
| 02 | No |  |
| 16 | If Tax Free, quote the section of the Income Tax Act, 1961 under which it is tax free | : |  |
| 17 | Whether bonds / debentures fall under Infrastructure Category as perGovernment Notification | : | 01 | Yes |  |
| 02 | No |  |
| 18 | Coupon Basis | : | 01 | Fixed |  |
| 02 | Variable | 01 | Index Linked |  |
| 02 | Equity Linked |  |
| 03 | Commodity Linked |  |
| 04 | Mibor Linked |  |
| 05 | Inflation Linked |  |
| 06 | Others |  |
| 03 | Zero |  |
| 19 | Coupon Rate | If Fixed | : |  |
| If Variable | : | Benchmark |  |
| Spread over |  |
| Floor Value |  |
| Cap Value |  |
| 20 | Coupon Type | : | 01 | Simple |  |
| 02 | Compounding |  |
| If compounding, provide the compounding frequency details | : |  |
| 21 | Whether Step up / Step down coupon basis is available | : | 01 | Step up |  |
| 02 | Step down |  |
| If yes, kindly provide the details thereof along with details of coupon reset value(s) and date(s) of reset | : |  |
| 22 | Day Count Convention (\*)Note: As per SEBI Circulars, the day count convention of Actual/Actual shall be followed for calculating interest rates. However, the said field is provided for capturing historical Information | : | 01 | 30/360\* |  |
| 02 | Actual/360\* |  |
| 03 | Actual/actual |  |
| 04 | Actual/365\* |  |
| 23 | Frequency of Interest Payment with specified dates | : | Frequency |  |
| Date(s) |  |
| 24 | Put option with specified dates | : | Put Option |  |
| Date(s) |  |
| 25 | Indicate whether Put option will be exercised at Discount / Premium / Par | : | 01 | Discount |  |
| 02 | Premium |  |
| 03 | Par |  |
| If yes, details thereof | : |  |
| 26 | Call option with specified dates | : | Call Option |  |
| Date(s) |  |
| 27 | Indicate whether Call option will be exercised at Discount / Premium / Par | : | 01 | Discount |  |
| 02 | Premium |  |
| 03 | Par |  |
| If yes, details thereof | : |  |
| 28 | Whether Debentures/Bonds are perpetual in nature | : | 01 | Yes |  |
| 02 | No |  |
| 29 | Redemption Details (For issue of CFI Code) | : |  |
| 01 | Fixed maturity (i.e. the principal amount is repaid in full at maturity) | : |  |
| 02 | Fixed maturity with call feature (i.e. the issue may be called for redemption prior to the fixed maturity date) | : |  |
| 03 | Fixed maturity with put (i.e. the holder may request the reimbursement of his bonds prior to the maturity date) | : |  |
| 04 | Fixed maturity with put and call | : |  |
| 05 | Amortization plan (i.e. reduction of principal by regular payments) | : |  |
| 06 | Amortization plan with call feature (i.e. the redemption of principal may occur as the result of the outstanding portion of the bond being called) | : |  |
| 07 | Amortization plan with put | : |  |
| 08 | Amortization plan with put and call | : |  |
| 09 | Perpetual (i.e. the debt instrument has no fixed maturity date and is only due for redemption in the case of the issuer's liquidation) | : |  |
| 10 | Perpetual with call feature (i.e. the issue may be called for redemption at some time in the future) | : |  |
| 30 | Indicate whether Partly Paid | : |  |
| If Yes, specify the Paid up Value  | : |  |
| 31 | Instrument Description (Long) | : |  |
| 32 | Instrument Description (Short) | : |  |
| 33 | Series (if any) | : |  |
| 34 | Face Value | : |  |
| 35 | Issue price (per instrument) | : |  |
| 36 | Date of Allotment | : |  |
| 37 | Redemption Date/Last Conversion Date (if convertible) | : |  |
| 38 | Tenure of the instrument at the time of Issuance | : | Years |  |
| Months |  |
| Days |  |
| 39 | Total Allotment Quantity | : |  |
| 40 | Issue Size (Total allotment Quantity X Issue Price) (Rs. In Crores) | : |  |
| 41 | Certificate Nos. / Distinctive Nos. | : | From |  |
| To |  |
| 42 | Scheduled Opening Date (for Public Issue only) | : |  |
| 43 | Scheduled Closing Date (for Public Issue only) | : |  |
| 44 | Actual Closing Date (for Public Issue only) | : |  |
| 45 | Redemption premium details (if any) | : |  |
| 46 | Redemption Type | : | 01 | Full Redemption |  |
| 02 | Partial Redemption (including details, if redemption is due to exercise of call or put option) |  |
| A | By Face Value Redemption |  |
| B | By Quantity Redemption |  |
| 47 | Details of Partial Redemption | : | Sr. No. | Partial Redemption Dates | Face Value/Quantity Redemption | If Redemption is based on Quantity (specify whether on lot basis or pro-rata basis) |
| 01 |  |  |  |
| 02 |  |  |  |
| 03 |  |  |  |
| 04 |  |  |  |
| 05 |  |  |  |
| 48 | Quantity/Value Redeemed (In case of Partial Redemption) $ | : |  |
| Sr. No. | Redemption Method (i.e. by Face Value Redemption/ Quantity Redemption) | Partial Redemption Dates | Quantity Redeemed | Value Redeemed | Reason for redemption (Call, Put, Premature redemption, Maturity, Buyback, conversion) |
| 01 |  |  |  |  |  |
| 02 |  |  |  |  |  |
| 03 |  |  |  |  |  |
| 04 |  |  |  |  |  |
| 05 |  |  |  |  |  |
| Total Quantity/Value Redeemed |  |  |  |
| 49 | Net Quantity (Total Allotment Quantity – Total Quantity Redeemed)$ - To be provided by issuer at the time of Redemption | : |  |
| 50 | Indicate whether the instrument is rated | : | 01 | Yes |  |
| 02 | No |  |
| 51 | Credit Rating with name of Credit Rating Agency and Date of Credit Rating | Current rating (if rated by multiple Credit Rating Agencies, include all such ratings) | : | Name of the Credit Rating Agency | Credit Rating | Date of Credit Rating |
|  |  |  |
|  |  |  |
|  |  |  |
| Earlier rating and date of rating (if any) | : | Name of the Credit Rating Agency | Credit Rating | Date of Credit Rating | Date of Rating change |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 52 | Registrar (Name, Address & Contact Details) | Organization Name | : |  |
| Contact Person | : |  |
| Designation | : |  |
| Add1 | : |  |
| Add2 | : |  |
| Add3 | : |  |
| City | : |  |
| Zip Code | : |  |
| State | : |  |
| Country | : |  |
| Phone – 1 | : |  |
| Phone – 2 | : |  |
| Fax | : |  |
| Email | : |  |
| 53 | Lead Manager to the issue (Name, Address & Contact Details) |  | : | **1** | **2** |
| Organization Name | : |  |  |
| Contact Person | : |  |  |
| Designation | : |  |  |
| Add1 | : |  |  |
| Add2 | : |  |  |
| Add3 | : |  |  |
| City | : |  |  |
| Zip Code | : |  |  |
| State | : |  |  |
| Country | : |  |  |
| Phone – 1 | : |  |  |
| Phone – 2 | : |  |  |
| Fax | : |  |  |
| Email | : |  |  |
| 54 | Arranger to the issue (Name, Address & Contact Details) |  | : | **1** | **2** |
| Organization Name | : |  |  |
| Contact Person | : |  |  |
| Designation | : |  |  |
| Add1 | : |  |  |
| Add2 | : |  |  |
| Add3 | : |  |  |
| City | : |  |  |
| Zip Code | : |  |  |
| State | : |  |  |
| Country | : |  |  |
| Phone – 1 | : |  |  |
| Phone – 2 | : |  |  |
| Fax | : |  |  |
| Email | : |  |  |
| 55 | Debenture Trustee (Name, Address, Contact Details including email address & website address) |  | : | **1** | **2** |
| Organization Name | : |  |  |
| Contact Person | : |  |  |
| Designation | : |  |  |
| Add1 | : |  |  |
| Add2 | : |  |  |
| Add3 | : |  |  |
| City | : |  |  |
| Zip Code | : |  |  |
| State | : |  |  |
| Country | : |  |  |
| Phone – 1 | : |  |  |
| Phone – 2 | : |  |  |
| Fax | : |  |  |
| Email | : |  |  |
| 56 | Status of Listing | : | 01 | Listed |  |
| 02 | Unlisted |  |
| 03 | To be listed |  |
| Stock Exchange Details (Applicable, if Listed / To be Listed) | : |  |
| Sr No | Name of Stock Exchange in which Listed or Proposed to be Listed | Listed / Proposed to be Listed | Date of Listing (If Listed) | Whether, under, Permitted to Trade category |
| 01 |  |  |  |  |
| 02 |  |  |  |  |
| 03 |  |  |  |  |
| 57 | Term Sheet (access to Stock Exchange website) | : |  |
| 58 | Annual report ( URL to Stock Exchange website) | : |  |
| 59 | Any Other Information | : |  |

|  |
| --- |
| **Signature of Authorized Signatory** |
| **Name** | **:** |  |
| **Designation** | **:** |  |
| **Place** | **:** |  | **Date** | **:** | D | D | M | M | Y | Y | Y | Y |