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

## Letter of Intent cum Master Creation Form - Part B

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.

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| **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 **Certificate of Deposits** 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 Company are as given below:

**1. Full name of the Company**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**2. Full name of the Registrar & Transfer Agent (RTA)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**3. Issue Particulars:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Allotment | D | D | M | M | Y | E | A | R |
| Face Value (`) |  |
| No. of CDs (Units) |  |
| Size of issue (`) |  |
| Maturity Date | D | D | M | M | Y | E | A | R |
| Maturity Value (`) |  |
| ISIN, if already allotted | I | N |  |  |  |  |  |  |  |  |  |  |

**4. Office of the Issuer (The details given below should be same for all CDSs issed by the Issuer) :**

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

**5. For Issue of CFI Code :**

|  |  |
| --- | --- |
| **Guarantee (Indicates, in the case of the issuer's insolvency, whether the issue is additionally secured)(Put √ at the appropriate box)** | **Type of Interest(Put √ at the appropriate box)** |
| **Gov't/Treasury guarantee** | **Guaranteed** | **Secured** | **Unsecured/ unguaranteed** | **Fixed Rate** | **Zero Rate/ Discounted** | **Variable** |
|  |  |  |  |  |  |  |

**6. 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.

**We\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby declare that:-**

1. The Certificate of Deposit (CDs) issued is within the umbrella limit as specified by Reserve Bank of India (RBI)\*\*.
2. The original UPN will be stamped adequately at the time of CD Issue and will be kept with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Bank/FI) issuer with required noting. The noting will be done, such that no trading would take place on the basis of the physical CD (UPN).
3. All policy guidelines of RBI and all procedural and operational guidelines of Fixed Income Money Market and Derivatives Association of India (FIMMDA) for the issue of CD will be followed.
4. The ‘CD Redemption A/c’ Details are:

|  |  |  |
| --- | --- | --- |
|  | Client Name (Issuer Bank / FI) |  |
|  | Client ID (Issuer Bank / FI) |  |
|  | DP Name |  |
|  | DP ID |  |

|  |
| --- |
| \*\* Applicable in case of FIs only. |
| **Signature of Authorized Signatory** |
| **Name** | **:** |  |
| **Designation** | **:** |  |
| **Place** | **:** |  | **Date** | **:** | D | D | M | M | Y | Y | Y | Y |