

Draft letter of Intent to join NSDL

(on the letterhead of the company)

Date : _____

To,
The Managing Director
National Securities Depository Limited
4th Floor, Trade World,
Kamala Mills Compound,
Senapati Bapat Marg,
Lower Parel
Mumbai – 400 013.

Sub : Participant as an Issuer in the National Securities Depository Limited.

Dear Sir,

We are pleased to inform you that our company has decided to offer (name of Issuer) Equity as an eligible security under the Depository Act, 1996. We request you to take necessary steps to induct our Security into your depository system.

Please find enclosed details required for preparation agreement.

Yours Faithfully,

- Encl.: 1. Copy of Board Resolution.
2. Master Creation Form.
 3. Annual Report for the last three Years.
 4. Memorandum & Articles of Association.

Letter of Intent cum Master Creation Form

1. Please forward this form together with a forwarding letter on the letter head of the company signed by authorized signatory
2. Kindly ensure that all columns are properly filled. Write "N.A." wherever not applicable Fill up the form in **BLOCK LETTERS** only.
3. **Company's shares will not be available for Demat unless complete information/details are furnished**

Date :

To,
The Managing Director,
National Securities Depository Limited.
Trade World, 4th floor,
Kamala Mills Compound,
Senapati Bapat Marg,
Lower Parel,
Mumbai - 400 013

Dear Sir,

We are interested in offering demat option to our shareholders. The details of our Company are as given below:

A. Full name of the Company :

Address of the Regd. office including telephone, fax nos., and email address:

Corporate Identity Number (CIN) : _____

Year of Incorporation : _____

B. Old name(s) of the company, in case company has previously changed its name:

Old Name	Year of name change
1.	
2.	

Share certificates bearing old name(s) of the company be accepted for dematerialisation? (Please tick (✓) the relevant option): Yes / No

C. Main Business of the company:

Type of entity : Tick (✓) the relevant type

Joint Stock Company/ Statutory Company/ Mutual Fund/ Government

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

Name	Designation

E. Financial Details as per the Latest Annual Report / Audited Accounts as on

(in crores)

Paid up Capital *	
Networth calculated as follows:	
Paid up Capital	
Add: Reserve & Surplus (excluding revaluation reserves)	
Less: Accumulated losses if any -	
Less: Miscellaneous Expenditure -	
Total Networth**	

* Give details of capital issued after the date specified above.

** If networth is less than Paid-up Capital , state whether the company is a sick company under the SICA? If yes, give details in a separate sheet.

F. Details of the Equity Share Capital:

Share Capital	No. of Shares	Value (Rs.)
Authorised		
Issued	A:	C:
Paid up	B:	D:
Difference if any*	[A-B]	[C-D]
Distinctive Nos.	From:	to:**

*Reason for difference of shares, if applicable:

A-B: _____

C-D: _____

** If last Distinctive no. [DNRs to] IS NOT EQUAL TO issued no. of shares, then mention reason(s) for difference:

G. Were any new shares issued during the current financial year? Yes / No

Year end of the company : _____

Nature of the Issue(Bonus/Rights/Public Offer)	Date of Allotment	Distinctive Number Range	Partly/ Fully paidup

H. Security details:

Face Value per Security (Rs.)	Paid-up Value per Security (Rs.)

kindly indicate (Yes/No) against relevant Row(s)

1) Voting right details

i) Each share has one vote

ii) Share has no voting right

iii) The shareholder may be entitled to less than one vote per share*

iv) The shareholder is entitled to more than one vote per share*

*Please provide the voting right details in a separate sheet

2) Whether ISIN for Partly Paid security is required

3) Whether Partly Paid shares forfeited

(If Yes provide details in separate sheet)

I. Share holding pattern as of the last book closure on _____.

Held By	% age of Holdings
UTI	
LIC	
GIC & its Subsidiaries	
IDBI	
IFCI	
ICICI	
Other FIs	
Mutual Funds	
Banks	
Corporate Bodies	
Promoters, Directors and Relatives	
FII's	
Foreign collaborators	
NRI's, OCB's	
Central/State Government	
Individuals/Public	
Venture Capital	
Others (not classified above; please specify)	

J. Stock Exchange details where the security is listed/Proposed to be listed:(Please start with the Primary Stock Exchange):

Name of Stock Exchange	Listed (✓)	Permitted to trade (✓)	Stock Exchange Security code (if any)

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Last traded price Rs. _____ on _____ (name of Stock Exchange) as on _____ (date)

DEPOSITORY OPERATIONS:

K. Address of the registry operations where the physical securities for dematerialisation are to be delivered by the Depository Participants (DPs) :

Name of Organisation	SHAREX DYNAMIC (INDIA) PVT. LTD.	
Name of contact person	SHRI K.C. AJITKUMAR	
Designation/Dept.	MANAGING DIRECTOR	
Address:	UNIT NO.1, LUTHRA IND. PREMISES, ANDHERI KURLA ROAD, SAFED POOL, ANDHERI (E)	
	City: MUMBAI Pin: 400 072	
Contact nos.:	Std code: 022 Tel.: 28515606 , 2851 5644 Fax: 2851 2885	
Email address:	sharexindia@vsnl.com	

L. Registrar Details:

Name of Registrar SHAREX DYNAMIC (INDIA) PVT. LTD (for electronic connectivity with NSDL):	
Contact Person:	SHRI K.C. AJITKUMAR
Designation:	MANAGING DIRECTOR
Address: UNIT NO.1, LUTHRA IND. PREMISES, ANDHERI KURLA ROAD, SAFED POOL, SAFED POOL, ANDHERI (E),	
City:	MUMBAI Pin: 400 072
Tel:	022-28515606, 28515644 Fax: 28512885
Email: <u>sharexindia@vsnl.com</u>	
<u>Type of Service</u>	
Electronic only:	<input type="checkbox"/>
Full connectivity:	<input type="checkbox"/>

M. Contact persons of the Company (For correspondence with the company):

Compliance Officer	
Designation/Department	
Address:	
Contact nos.:	Tel: Fax:
Email address:	
Investor Relations officer	
Designation/Department	
Address:	
Contact nos.:	Tel: Fax:
Email address:	

We understand and agree that :

1. Shares on which calls have been made and are unpaid will not be eligible for demat.
2. Partly paid shares, if traded separately on the Stock Exchanges(s), need to be identified separately with a separate ISIN.

We hereby certify that the above information is correct to the best of our knowledge and that we have attached all the enclosures mentioned above.

Date:

Signature:

Company Stamp

Name & Designation:

For Office Use Only (to be filled up by NSDL)

ISIN Allotted	I	N										
Short Name												
Security Type & Code												
BP Id of Registrar	I	N										
Name of Registrar												
Latest Trading Price												
Captured by												
Verified & Activated by												
Date of Activation												

Authorisation	
Remarks	