

REGISTERED OFFICE: 1214-1216,12th floor, DSCCSL(53E),Road 5E,Block 53, Nr.Grand Mercure Hotel,ZONE 5,DTA,Gift City,Gandhinagar,Gujarat-382355

CENTRAL PROCESSING OFFICE ADDRESS: 265, Landmark, Tokar Khada, Near Civil Court, Silvassa - 396230 CORPORATE OFFICE ADDRESS: 407, The Grand Mall, Opp. SBI Zonal Office, Ambawadi, Ahmedabad, Gujarat - 380 015. Telephone: +91-79-40-222-605 / 609, Fax: +91-79-40-222-699, Email: demat@airanfinstocks.com | info@airanfinstocks.com

DECHECT	ED EA	D ICCLIE	OF NEW	V DIC
REQUEST	EK FU	K ISSUE	OF NEV	A DIS

Date (dd/mm	/уууу)																
DP ID 1	2	0	6	2	7	0	0	Client II									
Name of the	Sole/Fi	rst Ho	lder				"	1		1				"			
Name of the Second Holder																	
Name of the																	
Dear Sir / Madam,																	
□ OPTION 1																	
I/We hereby request you to issue me/us a new Delivery Instruction Book for my/our Demat Account with above mentioned Client Id.												ient Id.					
OR																	
□ OPTION 2 I/We hereby request you to issue me/us a new Delivery Instruction Book for my/our Demat Account with above mentioned Client Id since we have misplaced the one which was issued. Book Nowas issued to I/We which contained slip number from to																	
I/We understand that new delivery instruction book reissue charges/fees are Rs. 50/- and I/We authorise you to debit my account to the extent of relevant charges / fees + GST etc. as may be applicable time to time in this regard. Yours faithfully,																	
		First / Sole Holder						Second Holder					Third Holder				
Name																	
Signature																	
NOTE: Kindly note that the DIS would be dispatched on the BOIs correspondence address registered in our records. Incase of Non-Individual account (HUF/Corporate/Partnership/Company) stamp along with signature is mandatory. Powered by: Airan Finstocks Pvt. Ltd. SEBI Regn. No. NSE/ BSE/ MCX: INZ000214031 SEBI Regn. No. DP: IN-DP-CDSL-528-2009																	
(Please Tear Here)																	
Acknowledgement Receipt																	
Received REQUEST LETTER FOR ISSUE OF NEW DIS from:																	
DP ID 1	2	0	6	2	7	0	0	Client II									
Name of the Sole/First Holder																	
Name of the Second Holder																	
Name of the Third Holder																	