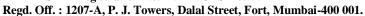
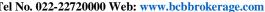


BCB Brokerage Private Limited CIN-U67120MH2000PTC129742 SEBI Registration No. IN-DP-CDSL-05-99









Email ID for Investor grievance: investorgrievance@bcbbrokerage.com

REPURCHASE / REDEMPTION REQUEST FORM

Ορ DP ID 12010400/ 01	dated as per CDSL Operating Instructions as on	Marcn, 2022)
RFN		
Date		
	ned securities for repurchase/ redemption and dec	lare that my/our account be debited the
	xtent of my/ our repurchase/ redemption request	
	re that the below mentioned person(s) are the bene	
		·
Account Number		
Account Holder Name		
No. of Convertion to the		
No. of Securities to be		
Repurchased/Redeemed (in figures)	1	
in words (integers)	+	
and (Fractions)	+	
· · · · · · · · · · · · · · · · · · ·	+	
Name of the security		
Name of the issuing Company Face Value		
	+	
ISIN		
Specimen Signature(s)	Name	Signature
First/ Sole Holder	Name	Signature
Thisty Sole Holder		
Second Holder		
Second Holder		
Third Holder		
Participant Authorization		
	d securities for repurchase/ redemption from	
Account No.		
ISIN		
Date		
Name of the first Holder		
The application form is varifie	d with the details of the beneficial owner's account	and contified that the application form is
	fficient balance to accept the repurchase/ redemp	
	are verified and found in order.	ction request. It is also certified that the
beneficial owner 3 signatures	are vermed and round in order.	
The other details of the benef	icial owners as extracted from the records are enclosed	sed.
Forwarded by-		
Name		Seal
Signature		
<u> </u>		
	<u>Acknowledgement</u>	
We hereby acknowledge the r	eceipt of repurchase/ redemption request for	
No. of securities		
Security details		
From (Name)		
Holding Account No.		
For BCB Brokerage Private Lir		

(Authorised Signatory) Name:

Designation and Employee ID:

Place: Date: