



BCB Brokerage Private Limited

CIN-U67120MH2000PTC129742

SEBI Registration No. IN-DP-CDSL-05-99

Regd. Off. : 1207-A, P. J. Towers, Dalal Street, Fort, Mumbai-400 001.

Tel No. 022-22720000 Web: www.bcbbrokerage.com

Compliance Officer: Manish Mourya Email id – complianceofficer@bcbbrokerage.com

Email ID for Investor grievance: investorgrievance@bcbbrokerage.com



REPURCHASE / REDEMPTION REQUEST FORM [RRF]

(Updated as per CDSL Operating Instructions as on December, 2024)

Depository Participant ID: 12010400/ 01

RRN	Date	D	D	M	M	Y	Y	Y	Y
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RFN No.	Date	D	D	M	M	Y	Y	Y	Y
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I/We offer the below mentioned Mutual Fund (MF) units for repurchase / redemption and declare that my/our account be debited **ALL** or the number of MF Units to the extent of my/ our repurchase / redemption request and proceeds be paid to me/us cheque/ bank draft. I/We hereby declare that the below mentioned person(s) are the beneficial owners of the MF Units mentioned.

Demat Account Number																			
Name of First / Sole Holder																			
Name of Second Holder																			
Name of Third Holder																			
No. of MF units to be Repurchased/Redeemed (in figures) or ALL		"Amount" (₹)																	
in words (integers and fractions)																			
Name of the security / scheme																			
Name of the issuing Company / AMC																			
Face Value																			
ISIN																			

If all holdings in the Demat account are to be redeemed / repurchased, then **ALL** should be mentioned in the Quantity column.

Specimen Signature(s)	Name	Signature
First / Sole Holder		
Second Holder		
Third Holder		

Participant Authorization

Received the above mentioned MF Units for repurchase/ redemption from

Account No.																			
ISIN																			
Date	D	D	M	M	Y	Y	Y	Y											
Name of First / Sole Holder																			

The application form is verified with the details of the beneficial owner's account and certified that the application form is in order. The account has sufficient balance to accept the repurchase/redemption request. It is also certified that the beneficial owner's signatures are verified and found to be in order.

RFN Set up Date: Time:
For BCB Brokerage Private Limited (DP ID 12010400/ 01)

(Authorised Signatory)
Name:
Designation and Employee ID:

Place: Date:

Acknowledgement

We hereby acknowledge the receipt of repurchase/ redemption request for _____ no. of securities of _____ (security details) from _____ (Name) holding a/c no. _____
For BCB Brokerage Private Limited (DP ID 12010400/ 01)

(Authorised Signatory)
Name:
Designation and Employee ID:

Place: Date: