## REQUISTION FORM FOR DIS RE-ISSUANCE, LOOSE SLIP ISSUANCE & STOP INSTRUCTIONS

To, HDFC SECURITIES LIMITED I THINK TECHNO CAMPUS, 8<sup>TH</sup> FLOOR, BLDG -B, KANJURMARG(E), MUMBAI - 400 042

Dear Sir / Madam.

| I / We the Sole Holder / Joint Holders / Guardian (in case of Minor) / Clearing Member request for the following as   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
|---|--|---------------|------------|--------|------------------|------------------|----------------|--------|-----------------|--------|---------|--------|------|-------|--|
| tick below. The details of my/our account are given below:  |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| Account Holder's Details  |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| DP ID   |  |               |            |        | CLIENT ID        |                  |                |        |                 |        |         |        |      |       |  |
| Name of the First / Sole Holder   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| Name of the Seco  |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| Name of the Third   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| ☐ Request for Issuance of Depository Instructions Slips (please tick)   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| Please supply book(s) of depository instructions slips as per the details selected below. I/We agree that the instructions book will be dispatched by courier/ post/hand delivered at my / our risk and consequences. I/We shall not hold the depository participant liable in any manner whatsoever in respect of such dispatch on instruction book to the address recorded in my/us demat account. I/We confirm the original re-issue request has been misplaced / lost.  Type of Booklet:   Delivery Instruction booklet  Pledge Instruction booklet  Inter-depository booklet |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| ☐ Request for STOP INSTRUCTION (please tick)  |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| Request you to stop mark the delivery instruction slips as per reason mention below: (please tick appropriate reason).  |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| •   | Slip lost  | ☐ Closu       | ure of A   | ccoun  | t 🚨 Other r      | eason            | (if an         | y)     |                 |        |         |        |      |       |  |
| Sr no   | no Instruction Type  |               |            |        | Slip series      |                  | Slip Number(s) |        |                 |        |         |        |      |       |  |
| 1   |  |               |            |        | •                |                  |                | rom    |                 | То     |         |        |      |       |  |
| 2   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| ☐ Request for LC  | OSE SLIP ISS   | SUANCE (#     | olease tid | :k)    |                  |                  |                |        |                 |        |         |        |      |       |  |
| Please issue me/u   | is loose slip  | for           |            |        |                  |                  |                | (type  | of in           | struct | tion) f | or e   | хесі | uting |  |
| my / our demat tra  |  |               |            |        | <del> </del>     |                  |                | _ `    |                 |        | se slip |        |      | •     |  |
| I/We agree that the instruction slip will be collected across the counter at my risk/consequences. I / We shall not   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| Note:   | hold the depository participant liable in any manner whatsoever in respect of DP processing the loose slip issued. |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| 1. For loose slip issuance all holders have to personally visit the branch & sign in front of the DP official.  |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
|   | have to carry  |               | -          |        | •                |                  |                |        |                 |        |         |        |      |       |  |
| 3. Please refer list of documents admissible as proof of Identity overleaf.   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
|   | First/ Sol   | e Applican    | į.         |        | Second App       | Second Applicant |                |        | Third Applicant |        |         |        |      |       |  |
| NAME OF APPLICAN  | т  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| SIGNATURE *   |  |               |            |        |                  |                  |                |        |                 |        |         |        |      |       |  |
| For Office use  | Attested by [  | OP official t | hat the    | custom | er has signed ir | my pr            | esence         | e (Mar | ndator          | y for  | oose    | slip i | ssua | nce)  |  |
| Employee Name   |  |               |            |        |                  | Er               | nploye         | e Cod  | е               |        |         |        |      |       |  |
| Employee Signature  |  |               | Date       |        |                  |                  |                |        |                 |        |         |        |      |       |  |

## REQUISTION FORM FOR DIS RE-ISSUANCE, LOOSE SLIP ISSUANCE & STOP INSTRUCTIONS

## List of documents admissible as Proof of Identity

- 1. PAN card with Photograph
- 2. Unique Identification number (UID) (Aadhaar)
- 3. Passport
- 4. Voter ID card
- 5. Driving License

## **Instructions:**

- 1. For reissue and stop instructions request , attach the latest transaction statement alongwith ID proof copy
- 2. For reissue and stop instructions request, if request is submitted by representative / third person then attach authority letter of customer on plain paper duly signed by all holders.
- 3. For issuance of loose slip, all holders must personally visit the branch / office of the DP.