

Date : _____

To,
SPFL Securities Limited,
The Depository Participant,
15/63-L, Civil Lines,
Kanpur – 208001

Sub: Mode of Operation in DP Account.

Ref : Client ID : 12061200 _____

This is our consent to operate our DP Account as jointly or any of survivors.

Option 1. We wish to operate jointly.

Option 2 . We wish to operate any of survivors.

Name of First Holder _____

Signature of First Holder _____

Name of Second Holder _____

Signature of Second Holder _____

Name of Third Holder _____

Signature of Third Holder _____