INMACS LIMITED

DP ID: IN 302574
Regd. Off: 4696, BRIJ BHAWAN 21AANSARI ROAD, DARYAGANJ, NEW DELHI- 110002
Corporate Off: 909, Chiranjiv Tower, 43 – Nehru Place, New Delhi – 110019
Ph. 011-26289478
E-mail Id: inmacs.dp@gmail.com; Investor grievance Id: investorsgrievance@inmacs.com
Website: www.inmacs.in

Rematerialization Request Form – NSDL

PARTICIPANT NAME	I	N	M	A	C	S		L	I	M	I	T	E	D	
DEPOSITORY PARTICIPANT ID	I	N	3	0	2	5	7	4							
DATE															
RRN															

I / We hereby declare that the below mentioned account may be debited to the extent of my / our rematerialization request and equivalent certificates be issued for the same. I / We hereby declare that the below mentioned person(s) are the beneficial owners of the securities mentioned:

Account No.	
Name of the Holder	
Father/Husband's Name	
Address for Correspondence	
Number of Securities to Be Rematerialized	
(In Words)	
(In figures)	
Lot Type Requested	
Name of Security	
Name of Issuing Company	
Face Value	
ISIN	
Type of Securities	**Free** ☐ **Lock in** ☐
Lock-in Quantity	
Lock in Reason	
Lock in Release Date (DD-MM-YYYY)	
Address: (to be filled in only if change in address is to be recorded for Rematerialized Securities)	

Account Holder(s)/Authorized Signatories(s) Details

	First/Sole Holder	Second Holder	Third Holder
Name			
PAN			
Signature			

Authorization

DP ID	I	N	3	0	2	5	7	4	**Client Id**								
Name of Sole/ First Holder																	
ISIN									**Date**								

The application form is verified with the details of the beneficial owner's account and certifies that the application form is in order. The account has sufficient balances to accept the rematerialisation as requested. It is also certified that the beneficial owner's signatures are verified and found in order. The other details of the beneficial owners as extracted from the records are enclosed.

For Inmacs Limited

Forwarded By	
Name of the Executive	
Remat Request No.	

Authorized Signatory

ACKNOWLEDGEMENT

S.No.

Received Rematerialization request form as per details given below:

RRF No.									**Date**								
DP ID	I	N	3	0	2	5	7	4	**Client ID**								
Name of the Sole / First Holder																	
Name of the Second Holder																	
Name of the Third Holder																	
ISIN													**Quantity**				
Name of the Company / Security																	
Type of Security																	

For Inmacs Limited

Authorized Signatory