KOSAMATTAM FINANCE LIMITED   [DP Id: 13079200]

FLOOR NO 4TH & 5TH,KOSAMATTAM CITY CENTER,T B ROAD, KOTTAYAM - 686001

DEMATERIALISATION REQUEST FORM

Serial No:

DRN No: [_____] (To be filled by DP)

Date: ____/____/_____

Client Id										
Sole/First Holder Name										
Second Holder Name										
Third Holder Name										
Company Name										
Type of Security	Equity/Others *(please specify)* _____									
Quantity to be Dematerialised (in figures)										
(in words)										
Face Value										
ISIN (To be filled by DP)	I	N								

Details of Securities: Free Securities   Locked-in Securities

Folio No	Certificate Nos		Distinctive Nos		Quantity
	From	To	From	To	

Total No. of Certificates: ____

Attach an annexure duly signed by the account holder(s), if the space above is insufficient.

Details of Locked-in Securities:
Lock-in Reason
Lock-in Release Date

Declaration

I / we request you to dematerialise the enclosed security certificate(s) registered in my/our name into my/our demat account. The original certificates/documents are hereby surrendered by me/us for dematerialization and the same are free from lien or charge or encumbrance and represents the bonafide securities of the company to the best of my/our knowledge and belief.

	First / Sole Holder	Second Holder	Third Holder
Signature with DP	⊗	⊗	⊗
Signature with RTA	⊗	⊗	⊗

Participant Authorisation

We have received the abovementioned securities for dematerialisation. The application form is verified with the certificates surrendered for dematerialisation and we certify that the application form is in accordance with the details mentioned in the enclosed certificates. It is also certified that the holders of the securities have beneficiary account with us in the same name(s) and order of name(s).

Name of the Executive: **Depository Participant Seal & Signature**

Note: To be submitted in duplicate for acknowledgment