

# Form ISR – 3

## Declaration Form for Opting-out of Nomination by holders of physical securities in Listed Companies

(see SEBI circular No. SEBI/HO/MIRSD/MIRSD\_RTAMB/P/CIR/2021/655 dated November 03, 2021 on Common and Simplified Norms for processing investor's service request by RTAs and norms for furnishing PAN, KYC details and Nomination)

[Under Section 72 r/w Section 24 (1) (a) of Companies Act, 2013 r/w Section 11(1) and 11B of SEBI Act, 1992 and Clause C in Schedule VII and Regulation 101 of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015]

Name of the Company :

Registered Address of the Company :

I / we \_\_\_\_\_ the holder(s) of the securities particulars of which are given hereunder, **do not wish to nominate** any person(s) in whom shall vest, all the rights in respect of such securities in the event of my /our death.

### PARTICULARS OF THE SECURITIES (in respect of which nomination is being opted out)

| Nature of Securities | Folio No. | No. of Securities | Certificate No. | Distinctive Nos. |    |
|----------------------|-----------|-------------------|-----------------|------------------|----|
|                      |           |                   |                 | From             | To |
|                      |           |                   |                 |                  |    |
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|                      |           |                   |                 |                  |    |

I/ we understand the issues involved in non-appointment of nominee(s) and further are aware that in case of my / our death, my / our legal heir(s) / representative(s) are required to furnish the requisite documents / details, including, Will or documents issued by the Court like Decree or Succession Certificate or Letter of Administration / Probate of Will or any other document as may be prescribed by the competent authority, for claiming my / our aforesaid securities.

Name(s) and Address of Security holders(s)

Signature(s)

Sole / First Holder Name

Second Holder Name

Third Holder Name

| Name and Address of Witness | Signature |
|-----------------------------|-----------|
|                             |           |