DELETION /TRANSMISSION FORM

(Application form for deletion/transmission of Securities)

(Please fill the details in block letter)									
REQUES	T TYPE: 1. TRANS	MISSION	N	DELET	ION				
(Name of	To, The Company Secretary (Name of the Company) (Address of the Company)								
Dear Sir,	,								
I/We, <u>(r</u>	name of the app	licant), a						atthe securit	
	Cultura Communication Communic		1						
	f the Company red Folio No								
	ne of the Sharehol	der(s)						Sign	ature(s)
	share certificate(s		1.					8	
			2.						
			3.						
Certifica	ars of Securities: ate No.	Distino (from)	ctive Nu	mber	Distincti	ve Number	rs (to)	No of shares	Type of Securities
		(ITOIII)						Silaies	
Total au	unahan af Caarriitia	_							
	mber of Securitie ansmitted to (na		e annlic	ant s(s)·					_
Title	First Name		Middle		Suri	name	Age	Occupa	tion PAN detail
Full Add	ress of the first a	oplicant:			S	Signatures o	of the Ap	plicant(s)	
l						1			
						2			
			•••••		•	2			
						3	••••••		
Email Id									
Contact	No.								
D - 1									
	count Details								
Bank Na	count Details								
	count Details								
Bank Na Branch	count Details								
Bank Na Branch A/c No	count Details								
Bank Na Branch A/c No MICR IFSC	count Details	rd:							
Bank Na Branch A/c No MICR IFSC List of do	ocuments attache					Regist	ration No	Date	
Bank Na Branch A/c No MICR IFSC	count Details ame ocuments attache	(s)	ted copy o	f Will/ Leter	of Admintra		ration No	Date	
Bank Na Branch A/c No MICR IFSC List of do Sr No	ocuments attache Type of Document Death Certificate	te/ Probat		f Will/ Leter	of Admintra		ration No	Date	

For office u	use only	S	SPECIMEN SIGNATURE(s) OF APPLICANT
Transaction No:			
			1
Transaction date:			
			2
Initial of employee			
Who has registered			3
the documents			

NOTES:

- 1. The Application should be typed.
- 2. Shares / debentures can be transmitted to the maximum of three legal heirs only.
- 3. Please fill up the details as per the documents you are annexing.
- 4. If the applicant is/are illiterate, his/her/their thumb impression must be attested by a Magistrate or Notary Public under the seal of his office.
- 5. The Applicants should fill this form in the order in which their names should appear in the certificate.
- 6. The Death Certificate of the deceased Security holder, if not annexed in original should be duly attested either by S.E.O. or any Gazetted Officer
- 7. N.O.C. should be in declaration form duly affirmed by the S.E.O or Notary Public and the same should be given by each legal heir individually.
- 8. Proof of identification and Signature attestation has to be provided for each applicant separately.
- 9. Applicant is required to provide PAN card as an identification proof and copy of latest Electricity Bill or Telephone Bill or Gas Bills (not more than 3 months old), or Passport, duly attested by S.E.O or Notary Public as proof of address.
- 10. Kindly provide the bank details and attach cancelled cheque of first applicant

TRANSMISSION OF SECURITIES OF A DECEASED HOLDER WITHOUT LEGAL REPRESENTATION

Read carefully the instructions before filling in the enclosures

The enclosures are :			
	TITLE CLAIM FORM	 	'T'
	AFFIDAVIT	 	'A'
	SURETY FORM	 	'S'
	NO OBJECTION STATEMENT	 	'N'
	INDEMNITY	****	4,

Sequence of Steps to be followed :

- 1) Affix SPECIAL ADHESIVE STAMPS of
 - Rs. 100 /- on Affidavit 'A'
 - Rs.5 00/- on Indemnity "I"

before signing these forms (Refer item 'f below)

- 2) Fill in answers posed in Title Claim Form-T', giving details in full.
- 3) Fill in Affidavit-'A', but do not sign now (refer 8)
- 4) Arrange for person to stand as Surety.
- 5) Fill in Form of Surety-'S' and get his/her signature on the form attested by Bank Manager/Employer.
- 6) Fill in Indemnity-1', but do not sign now (refer 8)
- 7) Recheck that all documents are completely filled.
- 8) Arrange for Applicant/s and proposed Surety to sign on Affidavit/Indemnity in presence of a First Class or Stipendiary Magistrate/Public Notary/Judicial.
- Fill in No Objection Statement and get renouncees' signature on the form witnessed by Bank Manager/ Employer.
- 10) Submit together all duly completed documents to us.

SPECIAL INSTRUCTIONS

TITLE CLAIM FORM-'T'

- a) The certificates for securities standing in the sole name of deceased holder alongwith his/her Death Certificate must be sent with these forms.
- b) In case the name as mentioned in death certificate and securities differs then an Identity Certificate/Affidavit must be produced in confirmation that the deceased is one and the same person in both instances.
- c) If the deceased had declared a will (Registered or Unregistered), a copy thereof must be submitted in support of the made by applicant/s claim.
- In case of Minor children of the deceased, their names under Guardianship should be included as applicant/s.
- The applicant/s must obtain 'No Objection' as per annexure—'N' from the other Legal Heir/s, if any, whose names are to be excluded in transmission of the securities.

AFFIDAVIT-'A' & INDEMNITY-'I'

- Affidavit/Indemnity may be affixed with Special Adhesive Stamps or the text may be reproduced on Non-Judicial Stamp Paper of denomination/s given in 1 above.
- g) Signature/s must be attested only by a First Class or Stipendiary Magistrate/Notary Public/Judiclal.
- h) Full name/Address (and Regn. No.) of the Official must be mentioned.
- i) Indemnity must be signed by applicant/s as well as Surety.

SURETY FORM-'S'

- j) The financial Standing of the proposed Surety must be commensurate with the market value of the security/ies.
- k) Surety form must also be signed by Bank Manager/Employer in affirmation of the details mentioned therein.

NO OBJECTION STATEMENT-'N'

- This statement must be furnished by each renouncee/s (either independently or jointly/severally) as per the draft given.
- m) Photostat copylies of this draft may be used if more than one renouncee is to furnish the statement.
- n) The signature/s of the renouncee/s must be witnessed by Bank Manager/Employer for identification purpose.

SPECIMEN SIGNATURES (In triplicate) OF APPLICANT/S

1.	1.	1.
2.	2.	2.
3.	3.	3.

TITLE CLAIM FORM

دراء،

N	

Form to be filled in by person or persons claiming the title to security/les of a deceased holder without legal representation.

		The state of the s			
11	Full name of the deceased holder.			delik estamya el anek jihak kedat e hasp	
51	Date of death of the de- ceased according to Eng- lish Calender. (Attach Municipal Death Certificate in support)	Day	Month	Yea	1 (C) C+ (C)
3)	i) Number of securities held by the deceased in this Company.	- 2ndi"A" Preference Shares of			Rs. /-each Rs. /-each Rs. /-each
14	ii) in whose possession are the certificates at present.	Harris and the second			
9.0	held in scie name of the deceased in other companies.	Name of Company	Kind 8	No. of Shares/D	ebentures/Bands
4)	Particulars of properly (movable and immovable) of daceased other than that shown in column 3 above. (If any, briefly state as to its disposal.)			ATT	
5)	Has the deceased left a Will or any other testamentary instrument disposing of his property ? (If so attach an attested copy of the same.)				
6)	Has the deceased left par- ents-widow/husband and/or children ?	<u>Name</u>	Relationship	Age	Marilal Status
7)	By what law is the estate of the deceased governed ? (please state which School of Law is applicable)				Pales.
8)	Who are the neirs of the deceased according to the law by which succession to his estate is governed ?	Name.	Relationship	Age	Marital Status
9)	Was the deceased (if a Hindu) member of a joint and undivided Hindu family? If so, please state the names and ages of the surviving coperenceners.	Name of Surviving Co-pareceners	Relationship	Age	Marital Status
10)	Details of person(s) claiming title to the securities viz, Applicant(s) on whose name(s) the securities are to be transmitted.		Relationship		

	**	LANCE OF STREET	2	
Have No O	7 If so why ? each of them given ojection Statement in ure 'N' ?			
the a give in their colles in les in	ther information which pplicant(s) wants to a support of his/her/claim to the security/ the Company standithe name of the sed_holder.			
Address of	Applicants:			
	A. A		-	
	PIN			
ate:				Signature(s) of the applicant(s)
Before signing Affix Rs. 100/- Special Adhesive Stamp Here	solemnly affirm and	emeta) of applicant(s)	Ted in answer to the ledge.	questions on the form on the reven
olemnly a		on the	day	Signature/s of applicant(s) of20
ddress of lagistrate/				
otary				(Signature of Magistrate/Notary)
egd.No.		PIN:		
		Use space	below to affix:	
Notorial	/Court Fee Stamps			Magistrate/Notary
		an edlar .	Survey Section	
				head relevants to white (4)

N. B. > The delivery to the Company of this form duly filled in shall not in any way to affect the Company's right to refuse the application altogether or to insist on a Legal Representation viz. Succession Certificate/Probate of wilt/Letter of Administration/etc. before transmitting the Securities.

Before signing Affix Rs.500/-Special Adhesive Stamp Here

То	
TO ALL TO WHOM THESE PRESENTS shall come I/We	100
(Name(s) of applicant(s)—Refer Item 10 for	m -17)
send	greetings
WHEREAST	+
(Name of deceased)	
was at the date of his/her death as hereinafter more particularly mentioned the registered	holder of
(No. and kind of securities)	
bearing Distinctive Nos.	
of the nominal face value of Rupees each in	1000
a Joint-Stock Company incorporated and registered under the Indian Companies Act (hereinafter called the	Company)
AND WHEREAS the said	
departed this life on or about the day of 20_	-
intestate and without leaving any debts and leaving him/her surviving viz.:	. (17)
enterandones de	
respectively AND	WHEREAS
the said	
[Name(s) of Applicant(s)]	has
	Help
has applied to the Company to transfer the said securities which still stand in the same of	the said
(Name of deceased)	ta tianno oi
the said [Name (a) of Applicant (a)]	
(varies (a) or Appearin (a))	
	75
and to pay him/her/them the dividends thereon which the Company hath agreed to do	pon the
said	
[Name of the applicant (e)]	
as principal (s) and the said	
(Name of surely) as surely executing unto the Company such	Indemnity
as surely executing unto the Company such	

	and	
th the Company its successors and assigns that the company its successors and assigns will be the company its successors and assigns will be company its successors and assigns will be company its successors and assigns that the company its successors and assigns the company its successors and assig	(Name of europy) heirs, executors, administrators and assigns do inhey the said covenanting parties, jointly and on the Company transferring all the	hereby covena severally, as said securition
(Name(s) of applicant(s))	Of the last of the	
d paying him/her them the dividends already due miess and in indemnified the said. Company its stid the Directors, Agents, Secretary and Shareholder di assigns and their and each of their estates and excedings, accounts, claims and demands whatsoeve the said shares or dividends thereof or any part of any person or persons whomsoever and respect thereof or otherwise howsoever in relation. IN WITNESS WHEREOF THE said.	accessors and assigns and its and their estates of the said Company, their heirs, executors effects from and against all actions, causes or at Law or in Equity or otherwise howsoever for thereof or otherwise in connection with the from and against all damages, costs, charges	es and effe , administrati of actions, sui or or on accor said shares
	and	
ve here unto set their respective hands and seals	(Name of Surety)	
(Signature/s of applicant(s)	(Signature of Magistrate/h	
(Signature/s of applicant(s)	Full Name and :	
(Signature/s of applicant(s) Signature of Surety:	Full Name and :	
	Full Name and :	
	Full Name and :	
Signature of Surety:	Full Name and :	
Signature of Surety:	Full Name and :	
Signature of Surety: Use space	Full Name and : Address of Magistrate/ Notary PIN Regd. No.	
Signature of Surety: Use space	Full Name and : Address of Magistrate/ Notary PIN Regd. No.	
Signature of Surety: Use space	Full Name and : Address of Magistrate/ Notary PIN Regd. No.	
Signature of Surety: Use space	Full Name and : Address of Magistrate/ Notary PIN Regd. No.	
Signature of Surety: Use space	Full Name and : Address of Magistrate/ Notary PIN Regd. No.	
Signature of Surety: Use space	Full Name and : Address of Magistrate/ Notary PIN Regd. No.	

NO OBJECTION STATEMENT



Statement to be made by heir whose name is excluded in transmission of securities standing in the sole name of deceased holder.

WHEREAS	
)) 1	
Residing at	
	, am the helr of
ate	
the deceased registered holder in the (Name of Comp	pany)
of	
	id security/les be transmitted from the name of the deceased
to only the name(s) of applicant(s) viz.	
I the aforesaid, state that I do not desire to make a c	salm of title in respect of said security/les held in name of
the said deceased and I do not have any objection to	the Company transmitting the said security/les, in the name
(5) of the above mentioned applicant(s) only.	
Dated the day of	20
Signed in presence of	
Signed in presence of	
(Bank Manger/Employer)	Signature of Renouncee
Full Name and Address of Bank Manager/Employer	
externation and the second	
PIN	

"S"

SURETY FORM
(Form to be signed by Surety proposed for Indemnity Agreement)

P	rivate & Confidential	
N	AME OF SURETY: †	
P	ERMANENT RESIDENTIAL	
	ADDRESS :	
		Pín
^	GE: Years Permaneni Income Tax No.: *	
†	A person carnot stand as Surety for Spousedlamily member.	# Furnish documentary eviden
(F	II in any one or more of the following boxes, whichever is applicable)	
AD	etalls of employment	
4	Place of employment	
3	Annual Salary:	
4	Other emoluments:	
OR		
B D	etalls of immovable property owned additional results of immovable and not as a member of a joint & undivided Hindu Result.	Specify whether consisting of houses or mere land
	Within Municipal Limits :	
	Shuation :	
2	Value	
1122	Value :	
	Annual rent realized :	
OR		
CD	etalls of business owned	
100	osciutaly in own name and not as a partner)	
1	Nature of business and location	
2	Annual turnover	
3	Annual profits	
-		
D	ate : 20	
W	Itnessed by:	Signature of Surety
F	ull Name and Address of Bank Manager/Employer	
*_		(Bank Manager/Employer)