Unique Client Code (UCC) Details Addition / Modification / Deletion Request Form

ISS ENTERPRISE LIMITED

Corporate Office: 6thFloor, 601,Dakshna Building, Next to Raigad Bhavan,Sector-11,CBD-Belapur, Navi Mumbai – 400614 Tel: (022) 61829518/519/551

| Registered O | ffice : Int | ernatio | | | | | | | | or-30, Va mail : ig@ | | | |)0 703 —— | } | |
|--|-------------|-------------------|---------|--------|--------|--|--------|--------|----------------------|-------------------------|--------------|------|---|--------------|---|--|
| Application No. | | | | | Da | ate | D [| M | M | Υ | Υ | Υ | Υ | | | |
| Please fill all the d | etails in I | Block L | etters. | in En | ıglish | | | | • | l e | | .1 | | .1 | | |
| DP ID | | | | | | | | Client | ID | | | | | | Ι | |
| Permanent Acco of First / Sole Ho | | ber (PA | N) | | | | | | | | | | | | | |
| Account Holder | | | | | | | | | | | | | | | | |
| Name of First / S | | er | | | | | | | | | | | | | | |
| Name of Second Holder Name of Third Holder | | | | | | | | | | | | | | | | |
| I/We request to add Unique Client Code (UCC) Unique Client Code (UCC) | | | | | | | | | Exch ID | Seg men t ID | CM | 1 ID | | TM ID | | |
| | | + | | | | | | | + | | | | + | | | |
| | | + | | | | | | | 1 | | | | | | | |
| · I/We reques | | Exch Se ID me | | | CM | 1 ID | | TM ID | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| I/We like to a mentioned Parameter in the second Parameter in the | ermanen | t Accour | nt Num | ber (P | PAN). | | | | nentione ID ID | | | | | e | | |
| (If additional | | | | | | | se con | | | ormat) | | | | | | |
| | | | | | | | | | | | | | | | | |
| Name | F | First/Sole Holder | | | | | Sec | ond H | older | | Third Holder | | | | | |
| Signature | | | | | | | | | | | | | | | | |

| ====================================== | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--------|-----|---|---|----------|---|---|---|---|---|
| Received Unique Client Code (UCC) Details Addition / Modification / Deletions request as per details given below: | | | | | | | | | | | | | | | | | | |
| Application No. | | | | | | | | | Date | D | D | 1 | V | M | Υ | Υ | Υ | Υ |
| DP ID | | | | | | | | | Client | :ID | | | | | | | | |
| Name of the Sole / | | | | | | | | | | | | | | | | | | |
| Name of Second joint Holder | | | | | | | | | | | | | | | | | | |
| Name of Third joint Holder | | | | | | | | | | | | | | | | | | |
| Modification requested for: [Specify reason] | | | | | | | | | | | | | | | | | | |

Depository Participant Seal and Signature