Annexure 2.5

OPTION FORM FOR ISSUE OF DIS BOOKLET

		Da	ate	D	D	M	Μ	Y	Y	Y	Y
DP ID		Client ID									
First Holder Name											
Second Holder Name											
Third Holder Name		2]									

To, Depository Participant Name Address

Dear Sir / Madam,

I / We hereby state that:

[Select one of the options given below]

OPTION 1:

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL account though I / we have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with ______(name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member /

Yours faithfully

by PMS manager.

	First/Sole Holder	Second Joint Holder	Third Joint Holder
Name			
_			
Signatures			

OR

OPTION 2:

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA / executed PMS agreement in favour of / with ______ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

Yours faithfully

	First/Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

DP ID	Client ID	
Name of the Sole / First Holder		
Name of Second joint Holder		
Name of Third joint Holder		

Depository Participant Seal and Signature

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