

**POA FOR PAY-IN OF SECURITIES FOR THE PURPOSE OF SETTLEMENT**

TO ALL TO WHOM THESE PRESENTS SHALL COME I  
\_\_\_\_\_, (name of the BO), India,  
Indian inhabitant SEND GREETINGS.

Whereas I hold a Beneficiary account no \_\_\_\_\_ (BO-ID)  
with Central Depository Services (India) Limited, through PSE SECURITIES LTD.  
(name of the Depository Participant) bearing DP-ID 12022600

And Whereas I am an investor engaged in buying and selling of securities through  
PSE SECURITIES LTD. (name of the Clearing Member), a member of  
National and Bombay Stock Exchange, bearing SEBI registration no. respectively  
INB231098436 and INB011098432.

And Whereas due to exigency and paucity of time, I am desirous of appointing an  
agent/attorney to operate the aforesaid beneficiary account on my behalf for a  
limited purpose in the manner hereinafter appearing:

NOW KNOW WE ALL AND THESE PRESENTS WITNESSTH THAT I THE  
ABOVENAMED DO HEREBY NOMINATE, CONSTITUTE / AND APPOINT  
PSE SECURITIES LTD (name of the attorney/ Clearing Member) as my true and  
lawful attorney (hereinafter referred to as the attorney) for me and on my behalf and  
in my name to do instruct the aforesaid Depository Participant to debit securities  
and/or to transfer securities from the aforesaid account for the purpose of delivering  
the same to the clearing house of the recognized stock exchange toward any  
segment in respect of securities sold by me through them.

This authority is restricted to the pay-in obligations arising out of the transactions of  
sale effected by me through PSE SECURITIES LTD. (name of Clearing Member)  
and I ratify the instructions given by the aforesaid Clearing Member to the Depository  
Participant named hereinabove in the manner specified herein.

I further agree and confirm that the powers and authorities conferred by this Power  
of Attorney shall continue until I have given to the Depository Participant fifteen days  
advance notice in writing to the contrary.

SIGNED AND DELIVERED )  
By the withinnamed Beneficial Owner )  
\_\_\_\_\_)  
\_\_\_\_\_)  
IN THE PRESENCE OF )  
\_\_\_\_\_)  
\_\_\_\_\_)

I Accept  
(Name, Address and Signature of the Attorney)