

POWER OF ATTORNEY (VOLUNTARY)

(To be executed on Non-judicial Stamp paper of appropriate value)

TO ALL TO WHOM THESE PRESENTS SHALL COME I/we,

- (1) _____ residing at _____
- (2) _____ residing at _____
- (3) _____ residing at _____

Indian inhabitant/Non resident SEND GREETINGS.

Whereas I/We hold a Beneficiary account No.IN301983/12043000 _____ BO Id with Arihant Capital markets Limited (a Depository Participant registered with NSDL and CDSL And Whereas I/we are registered as a client with Arihant Capital Markets Ltd. (trading member of Bombay Stock Exchange Ltd, MCX Stock Exchange Ltd. and National Stock Exchange of India Ltd) vide my Trading Code _____ for dealing in the securities market.

NOW KNOW WE ALL AND THESE PRESENTS WITNESSTH THAT I/We THE ABOVE NAMED DO HEREBY NOMINATE, CONSTITUTE/ AND APPOINT M/S ARIHANT CAPITAL MARKETS LTD., a Company incorporated under the Companies Act, 1956 having its registered office in India situated at 6, Lad Colony, Y.N. Road, Indore - 452001, and its corporate office at #1011-12, Solitaire Corporate Park, Building No.10, 1st Floor, Andheri Ghatkopar Link Road, Chakala, Andheri (East), Mumbai-400093, acting through any of its directors and/or officers duly authorized by it said purpose, as my/our true and lawful attorney (hereinafter referred to as the attorney) for me/us and on my/our behalf and in my/our name to do the following:

1. To debit my/our aforesaid beneficiary account and to transfer securities there-out for the purpose of delivering the same to the clearing house of the recognized stock exchange in any segment to discharge my/our settlement obligations in respect of securities sold by me/us.
2. To pledge the securities in favor of attorney for the limited purpose of meeting my/our margin requirements in connection with the trades executed by me / us on any recognized stock exchange through attorney.
3. To re-pledge such securities to the clearing member / clearing corporation as the case may be.
4. To apply for and subscribe to, on my/our instructions, Initial Public Offerings made by any company registered under the provisions of the Companies Act, 1956 through online/offline bidding platform and to perform, do, undertake, discharge all incidental and ancillary acts, deeds, matters, things, functions and obligations in connection therewith.
5. To apply, on my/our instructions (including redemption requests), for Mutual Funds of various asset management companies through online / offline platform and to perform, do, undertake, discharge all incidental and ancillary acts, deeds, matters, things, functions and obligations in connection therewith.
6. To apply on my/our instructions, for various products like Public Issues (shares as well as debentures), rights, offer of shares, buyback, offer for sell, tendering shares in open offers etc. and to perform, do undertake, discharge all incidental and ancillary acts, deed, matters, things, functions and obligations in connection therewith.
7. I/we authorize my/our said attorney to send me/us consolidated summary of scrip wise buy and sell positions taken with average rates, subscriptions to IPO's and Mutual Funds by way of SMS / email on a daily basis.
8. The said Attorney shall return to me/us the Securities that may have been received by it erroneously or that it was not entitled to receive.
9. I/we do hereby ratify and confirm and agree to ratify and confirm whatsoever my/our said Attorney shall have lawfully done or may lawfully do or cause to be done by virtue of or in exercise of any power hereby granted, given authorised or implied or intended to be so granted, given or authorised and also all lawful acts, deeds, matters and things done by the said Attorney of the nature mentioned above or incidental or relating thereto or arising there-from or deemed by my/our Attorney to be requisite or expedient to be done or performed in exercise of any power herein.
10. I/we further agree and confirm that the powers and authorities conferred by this POA shall continue to be good, valid and effective until revoked by me/us in writing at any time given to my Attorney and that the POA shall not be affected by lapse of time. This POA shall continue in full force and effect until my/our Attorney shall receive written notice of revocation thereof, signed by me/us; or, in the event of termination thereof by my/our death, until my/our Attorney shall have received actual notice thereof, and such revocation or termination shall in no way affect the validity of this POA with reference to any transactions initiated by my/our Attorney, prior to the actual receipt by the Attorney of the notice of such revocation or termination, as above provided. Further, without prejudice to the generality of the aforesaid, such revocation of this POA, in so far as any transaction, settlement of which is pending on the date of receipt of notice of revocation by my/our Attorney is concerned, shall become effective only after all pending obligations in respect of such transactions are settled on the respective settlement dates and all dues owing by me/us in connection therewith have been fully paid by me/us to the Stock Broker. Further, such revocation of the power and authority given to my/our Attorney hereby shall in no way affect the validity of any acts, deeds or things done or action taken by my/our Attorney for discharging any of my/our settlement obligations in respect of any transactions settlement of which is pending on the date of receipt of the notice of revocation by the Attorney. The request of revocation in writing is to be sent to our company's office mentioned above.

✓ 1/3		
First Holder`s Signature	Second Holder`s Signature	Third Holder`s Signature

11. As per SEBI circular no.CIR/MRD/DMS/28/2010 dated 31st August, 2010, the list of demat a/c's where securities can move/pledge is listed as per schedule A.
12. This document shall be subject to the jurisdiction of courts of Indore only.

SCHEDULE A – LIST OF DEMAT ACCOUNTS

DP NAME	NSDL DEMAT ID / CM BP ID	CDSL DEMAT ID / CM ID	NAME	PURPOSE
Arihant Capital Markets Limited	IN558703	1204300000000065	Arihant Capital Markets Limited	Pool Account (CM ID- M50590)
	N.A.	1204300000000261	Arihant Capital Markets Limited	NSE SLB (CM ID- M50590)
	IN603131	1204300000000099	Arihant Capital Markets Limited	Pool Account (CM ID- 313)
	IN301983 -11319671	1204300000015430	Arihant Capital Markets Limited	TM/CM-Client Securities Margin Pledge A/c
	IN301983 -11319680	1204300000015445	Arihant Capital Markets Limited	TM-Client Securities under Margin Funding Account
	IN301983 -11319698	1204300000015426	Arihant Capital Markets Limited	TM-Client Securities Margin Pledge A/c
	IN301983 -11323362	-	Arihant Capital Markets Limited	TM/CM-Client Securities Margin Pledge A/c – Commodity Segment
Axis Bank Ltd.	IN300484-22691061	-	Arihant Capital Markets Limited	Collateral/ Margin A/c
SHCIL	IN301330-20589115	1601010000325208	Arihant Capital Markets Limited	Collateral/ Margin A/c
ICCL	IN620031	-	Indian Clearing Corporation Ltd.	MF Redemption BSE (CM Id - 313)

Signed and delivered by:

✓ 2/3		
First Holder`s Signature	Second Holder`s Signature	Third Holder`s Signature
Witness Signature	1.	2.
Witness Name & Address		

Updation of Contact details and Declaration for Same mobile/email:

Holder	Mobile	I hereby declare that below mobile number belongs to	Relation of Dependent
1 st		<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	
2 nd		<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	
3 rd		<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	
Holder	Email	I hereby declare that below mobile number belongs to	Relation of Dependent
1 st		<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	
2 nd		<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	
3 rd		<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	
✓ 3/3			
First Holder`s Signature	Second Holder`s Signature	Third Holder`s Signature	

I/We accept (For Arihant Capital Markets Ltd.)

(Authorised Signatory)