

6570

Client Code : _____

**POWER OF ATTORNEY BY INDIVIDUAL CLIENT (To be executed on stamp paper of Rs. 300/-)
FOR PAY-IN OF SECURITIES FOR THE PURPOSE OF SETTLEMENT**

TO ALL TO WHOM THESE PRESENTS SHALL COME I/WE

[1] _____ [2] _____

[3] _____ (name/s of the BO) having residence/office at

_____ Indian inhabitant SEND GREETINGS

Whereas I/We hold a Beneficiary account no. 13016700 _____ (BO-ID) with Central Depository Services (India) Limited, through **VSE STOCK SERVICES LTD.** bearing DP-ID 16700.

And Whereas I/We am/are an investor engaged in buying and selling of securities through **VSE STOCK SERVICES LIMITED [VSSL]**, 3rd Floor, Fortune Towers, Sayajigunj, Vadodara, a member of **BOMBAY STOCK EXCHANGE LTD.** bearing SEBI registration no INB011199735 and /or **NATIONAL STOCK EXCHANGE OF INDIA LTD.**, bearing SEBI registration no INB231199739.

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

NOW KNOW WE ALL AND THESE PRESENTS WITNESSTH THAT I/WE THE ABOVE NAMED BO HEREBY NOMINATE, CONSTITUTE/AND APPOINT **VSE STOCK SERVICES LIMITED** 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[s] to do instruct the aforesaid Depository Participant to debit securities, Mutual fund units etc and/or to transfer securities, Mutual fund units etc from the aforesaid account for the purpose of margin, delivering the same to the clearing house of the recognized stock exchange toward any segment in respect of securities sold by me/us through them and/or Margin & Security towards outstanding balance[s], if any.

I/We agree and confirm that aforesaid Clearing Member would return to me/us, the securities or fund that may have been received erroneously or those securities or fund that the Clearing Member was not entitled to receive from me/us.

Details of Demat Account, where securities can be moved :

Description of Demat Account	Demat Account No.
BSE : CM Principal A/c-CDSL	1301670000003031
CM Pool A/c-CDSL	1301370000003044
Early Pay-in A/c-CDSL	1100001000018304
CM Pool A/c-NSDL	CMBPID IN652806 CLIENT ID 11180170
ON MARKET	253
NSE : CM Pool A/c-CDSL	1301670000212156
Early Pay-in A/c-CDSL	1100001100015882
ON MARKET	M 51227
CM Pool A/c-NSDL	IN512270 11185579

X

(First/Sole Holder)

X

(Second Holder)

X
07/08 _____
(Third Holder)

To pledge the securities in favour of **VSSL** for the limited purpose of meeting my/our margin requirements in connection with the trades executed by me/us on the stock exchange through the **VSSL**.

This authority is restricted to the Pay-in obligation arising out of the transactions of sale affected by me/us through VSSL, and I/We ratify the instructions given by the aforesaid Clearing Member to the Depository Participant named hereinabove in the manner specified herein.

It is specifically understood and agreed between both the parties hereto that either party will be entitled/eligible to claim refund/return of securities, erroneously received or credited to either party's demat account or those securities to which either party is not entitled to receive from the other party.

I/We authorize you (being a Stock Broker also) to send consolidated summary of my/our scrip wise buy/sell position taken with average rates by way of SMS/E-mail on a daily basis, notwithstanding any other document to be disseminated as specified by SEBI from time to time.

It is specifically agreed between the parties hereto that the powers and authorities conferred by this Power of Attorney shall continue until I/We have given in writing for revocation of the aforesaid Power of Attorney.

SIGNED AND DELIVERED

By the within named Beneficial Owner

(First/Sole Holder)

(Second Holder)

(Third Holder)

IN THE PRESENCE OF

[put below Signature and Stamp]

_____]
We accept

For VSE STOCK SERVICES LTD

Authorized Signatory

ACKNOWLEDGMENT

I/We have received a duplicate / certified true copy of the aforesaid Power of Attorney executed by me/us.

	NAME	SIGNATURE
First/Sole Holder		X
Second Holder		X
Third Holder		X