			To Cochin Stock Brokers Limited MES Building, 65/608, 4th Floor, Judges Avenue, Kaloor, 682 017.	
			Effective from 15th January, 2024.	
A	S. No/ Section Name		Field Name	Instructions
	1		Particulars of the applicant	
		(a)	Category of Applicant	
		(b)	First Name	
		(c)	Middle Name	
		(d)	Last Name	
		(e)	First Name [[In case of Joint Holding]	
		(f)	Middle Name	
		(g)	Last Name	
		(h)	Date of Birth	
		(i)	Name of entity[In case 'Other' is selected in Category of applicant , then enter the Name of the Entity	
		(j)	Date of incorporation	
			Address of the applicant	
		(I)	Phone number of the Applicant [for receiving OTP at the time of filing IEPF Claim]	
		(m)	E mail ID of the Applicant [[for receiving OTP at the time of filing IEPF Claim]	
		(n)	Aadhaar Number or Passport/OCI/PIO Card No. (in case of NRI/foreigners)[self attested copy of the documents to be attached with date]	
		(n)	PAN of applicant[Father's Name and DOB should match with the information available in PAN card] [self attested copy of the documents to be attached with date]	Enter valid PAN number of Applicant. PAN must be verified by clicking 'Verify PAN Detail'. Applicant's Name . Father's Name and DOB should match with the information available in PAN database.
	2		Particulars of the Company from which the shares/ amount is due	
		(a)	Corporate Identification Number (CIN) of company	This will be auto-Prefilled based on the CIN selected through Lookup service.
		(b)	Name of the company /bank	This field would be pre-filled on the basis of CIN selected in lookup service. There would be a SEARCH button enabled to search the CIN.
		(c)	Address of the registered office of the company	This will be auto-Prefilled based on the CIN selected through Lookup service
		(d)	email ID of the company	This will be auto-Prefilled based on the CIN selected through Lookup service.
	3		Is it a case covered under rule 7 (8) & 7(9) of IEPF Rules, 2016 ie whether this is a transmission case	YES
			Name of original security holder	
		(b)	Relation of claimant with security holder	
		(c)	Number of Nominee/Legal heirs/Successors/ Administrator/ Others holders.	
			Name of Beneficiary	
	4	-	Type of Claim	AMOUNT
	5	-	Details of shares claimed	
	5	-	Number of Folio	
			Type of Holding	Physical
			Folio No./ Complete Demat account number from which transfer has been made to IEPF	
			Type of share	Equity
			Number of shares	
	6		Details of amount claimed	
			Number of claims	
			Type of claim	Select the type of claim from drop down values.
			Type of Holding	Physical

			Folio No./ Complete Demat account number from			
			which transfer has been made to IEPF			
			Amount of the claim			
			Financial year to which it relates Reason for non-receipt/ non-encashment of the			
			instrument of payment	Others		
			Refund Account Details Details of Bank account in which refund shall be			
	7		credited			
		(a)	Bank account number			
			Bank Name			
			IFSC Code			
			Bank Branch			
			Demat account number in which shares shall be credited			
В	Attachments		 * All attachments should be self attested with date 1.Copies of Aadhaar and PAN Card of the claimant and if joint holders are there, copies of Aadhaar /PAN card of all joint holders 2. Passport, OCI and PIO card in case of foreigners and NRI 3. Client Master of De-mat A/c of the claimant 4. Proof of entitlement (Copies of Bonds/Debentures/Fixed Deposit receipts/Certificate of share/Interest warrant/Dividend warrant, Application No./Statement of transaction etc.) 5. Certificate of Incorporation in case the Claimant is a Company In case of Transmission 6. Notarised copy of death certificate. 7. Notarised succession certificate/Probate/Will 8. No Objection Certificate from other holders 9. Indemnity Bond for Transmission, duly notarized 10. Affidavit in form of surety 			
с	OTP Validation		Please note that separate OTPs will be sent to mobile number and email ID. OTP shall be valid for 30minutes The OTPs should be shared with us for verifications			
D				DNS		
(i)	Once IEPF Claim filing is completed Claimants signed physical copies should reach the Nodal Officer of the Company within 7 days .					
· · /	The signed hard copies of the Documents handed over to CSBL will be despatched by CSBL to the Nodal Officer of the Company					
	The signed hard					
(ii)	The signed hard through Blue Da	art C	ourier	espatched by CSBL to the Nodal Officer of the Company		
(ii)	The signed hard through Blue Da The soft copies	of t	ourier he Documents, Despatch/Delivery Slip will be forwarde	espatched by CSBL to the Nodal Officer of the Company d to the Claimant by email		
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