

Form Code: SIHLTRANS-OA 001

REGD. OFFICE: 'SIHL HOUSE', Opp. Ambawadi Jain Temple,

Nehrunagar Cross Road, Ahmedabad-380 015.

Phone: 079-3002 5325, Fax: 079-3002 9029

Website: www.sihl.in, E-mail: helpdesk@sihl.in

ANNEXURE-OA (NSDL) TRANSPOSITION FORM

	ANSPOSITION FORM
To (For Trans	sposition and Demat Cases)
SHAH INVESTOR'S HOME LTD	
SIHL HOUSE, Opp. Ambawadi Jain Temple,	Date: DD /MM / YYYY
Nehrunagar Cross Road, Ahmedabad-15.	DP ID : IN 300343
We the undersigned being the joint helder(s) of sac	urities of
	(Name of the Company) wish to have ch we have an account with you. We are also submitting the certificate
(s) along with DRF for dematerialization.	chi we have an account with you. We are also submitting the certificate
	Alexander of a constant
	the certificate of security
Name on the certificate	Signature As per certificate
1.	1.
2.	2.
3.	3.
Details	ls of our client account
DP ID - 300343	Client ID -
Name of the account holders	
1.	
2.	
(3.	
Instruction:	
1. Transposition Form to be filled and signed in	case of name appearing in different order while comparing with
certificate and Demat account. No need to o	pen seperate account.
2. For one DRF form fill only one Transposition	form (Annexure OA)
3. It is compulsory to write a Name of the Com	npany in the form
4. Name on the certificates should be in the sa	MATERIAL STATES OF THE STATES
5. Signature should be same as company reco	ords in Annexure OA
The state of the s	and Name should be in the same order as mentioned in the Demat
Account	
7. If certificate has sequence of 3 Names & dif	fferent certificate has different sequence of Name than fill seperate
transposition form (Ann. OA).	
Documents to be attached:	
Demat Request Form	
2. Physical Certificate	
	OFFICE USE ONLY
	A FIGE GOL ONE!
Entered By Date	Verified By Date

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