ANNEXURE P

APPLICATION FOR FREEZING/UNFREEZING OF AN ACCOUNT AND/OR ISIN AND/OR SPECIFIC NUMBER OF SECURITIES

To		**Date**	DD	MM	YYYY
DP Name (*Pre printed***)** **DP ID (***Pre printed***)** **DP Address (***Pre printed***)**					

		Type of Instruction (*Please tick any one***)**
1.	**I/ we request you as follows:**	**Freeze** ☐ **Unfreeze** ☐

2.	**Client ID**								

3.	**Execution date (***date of freeze/ unfreeze***)**	DD	MM	YYYY

	Tick any one		Instruction No. (*To be filled by DP*)
	For debit only	**For debit and credit**	
4. Account level ☐	☐	☐	

	Sr. No.	**ISIN**	**Security Description**	**Tick any one**		**Instruction No.** (*To be filled by DP*)
				For debit only	**For debit and credit**	
5. ISIN Level ☐				☐	☐	
				☐	☐	
				☐	☐	

	Sr. No.	**ISIN**	**Security Description**	**Quantity**	**Instruction No.** (*To be filled by DP*)
6. Quantity Level (*For debit only*) ☐					

1_____, 2_____, 3_____
Authorised Signatory(ies)

Participant Stamp, Date & Time

Instructions:
1. Tick at 4, 5 and/or 6 above, as may be applicable
2. Separate forms should be filled-in for freeze and unfreeze.
3. Please strike off as N.A. wherever not applicable