

**FOR ONLINE IPO/MUTUAL FUND APPLICATION FORM - IRREVOCABLE POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS THAT**

I/We, Mr. / Mrs. / \_\_\_\_\_ An individual / Karta of HUF having his / her / residence/place of business at \_\_\_\_\_ having Arihant Back Office Code as \_\_\_\_\_ and Terminal code as \_\_\_\_\_ (hereinafter referred to as "client") wish to avail / have availed the IPO/Mutual Fund Anywhere facilities and others services offered (hereinafter referred to as "services") by **Arihant Capital Markets Ltd.**, (hereinafter referred to as "ACML") a company incorporated under the companies Act, 1956 and having its Registered Office at E/5, RATLAM KOTHI AREA, INDORE(M.P.), PIN 452001 **Service Provider.**

Whereas in the course of availing the services provided by ACML through its website "www.arihantcapital.com/ipo" for placing IPO/Mutual Fund applications from anywhere through internet and for meeting the obligations thereof, I/we do hereby nominate, constitute and appoint ACML, acting through their Director(s) and/or duly authorized employees for the purpose, as my/our true and lawful attorneys to do, execute and perform severally the following acts, deeds, matters and things, provided the attorney complies with all the applicable conditions of all or any of their services offered by them in their capacity as service provider for IPO/Mutual Fund Anywhere through the above website or otherwise.

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>1. have and exercise the power and/or authority, and to do and/or execute the acts, deeds matters and things specified in the Client Registration Form submitted to ACML.</li> <li>2. To validate on my/our behalf any such instruction so given to the Depository Participant(s) / Registrar &amp; Share Transfer Agent/Company/Bank in written / physical or any other form as may be required.</li> <li>3. For these purposes and to this extent, the Service Provider above named is empowered by me/us, to affix their signatures to any document, form or any other record.</li> <li>4. I/we also undertake to pay any charges/fee/Expenses incurred by the ACML under this power of attorney and that I/We further authorize the ACML to debit my/our trading account and transfer funds to IPO/Mutual Fund for any amount which becomes due for payment and I/We hereby undertake to pay the same immediately or on demand made by ACML.</li> <li>5. To register this Power of Attorney with the bank/Issuer/Registrar to an Issue, Depository Participant and or with any other party concerned.</li> <li>6. To apply for, subscribe to or enter into correspondence with respect to any Initial Public Offer(s)/Follow on Public Offer/Offer(s) for Sale of Securities of the companies or any other "Investment Products" offered through the website "www.arihantcapital.com/ipo" owned by ACML) or any other means as per the instructions made available to them by me/us by electronic mail or through any other mode as specified on the website or otherwise.</li> <li>7. To sign all applications or any other documents relating to such Initial Public Offers(s)/Follow on Public Offer/Offer(s) for Sale or any other investment products.</li> <li>8. To sign any application, enter into any agreement to complete any transaction requested to through the Web-site or otherwise.</li> <li>9. To make payment to any party on my/our behalf to fulfill the transaction requested by me/us.</li> <li>10. To enter into correspondence with any party with respect to any transaction in any Investment Products.</li> <li>11. To forward all such applications placed through the website to the online-IPO/Mutual Fund module of the concerned Exchange or owner/issue of "Investment Product".</li> </ol> | <ol style="list-style-type: none"> <li>12. To receive intimation from the Exchange/RTA/Company/ Bank/DP or any other party regarding the allocation/allotment/rejection/regret of the securities or such other "Investment Product" applications / subscriptions/withdrawal or any other communications.</li> <li>13. To deposit/transfer on allotment, the securities, debentures, units of the mutual funds and/or all other investments products applied through ACML, on allotment, to my/our Beneficiary Ownership Demat Account opened for the purpose with the DP.</li> <li>14. To do all other acts and things as may be necessary to effect the subscription/purchase/redemption or any other transaction in any Investment Product for which services availed from ACML.</li> <li>15. To debit my /our any account(s) towards monies/fees/charges etc. payable to ACML or to a Third Party Service provider or to any of the affiliates/ subsidiaries of ACML by virtue of my/our using/subscribing to any of the facilities/ services provided either by ACML or through a third Party Service Provider or by any other security or financial instrument on behalf of me/us though ACML or any third party.</li> <li>16. To bind ourselves with respect to any instruction given by first holder or any other holder to ACML.</li> <li>17. To appoint or remove any agent or agents or substitute or substitutes with all or any of the power herein contained in order to enable such agent or substitute(s) to exercise all or any of the power given by me/us to the said attorney.</li> <li>18. To retain all originals of the documents executed by me/us.</li> <li>19. I/we agree that ACML is entitled to credit the refund amount on account of application rejection due to whatsoever reason in the designated bank account.</li> <li>20. My attorney ACML, its Director (s) or any of its authorized officials shall not be liable for any loss that may result from failure/inability in electronic connectivity or due to any technical or other problem due to which bidding is not possible or non submission of application to the bank or rejection of my/our application for any reason whatsoever.</li> <li>21. I/We the sole joint holders of APPLICATION agree ratify and confirm that the client herein above mentioned shall be the exclusive beneficiary of the transactions carried out pursuant to this power of attorney. To</li> </ol> |
|---|---|

That the Power of Attorney herein referred to is irrevocable until all dues payable by me/us to ACML are satisfactorily settled and agreed to between ourselves. That, I/we hereby declare that all the actions taken by my/our above mentioned attorney (hereinafter referred as ACML) in this regard shall be deemed to be actions done by me/us and if necessary shall be ratified by me/us on the instructions of the said attorney and that such actions will be binding on me/us. This document shall be subject to the jurisdiction of the Courts in Indore. In witness whereof I/We have executed this Irrevocable Power of Attorney on the day, date and year herein below mentioned.

Dated at Indore this (Date) \_\_\_\_\_ day of (Month) \_\_\_\_\_, 200 \_\_\_\_\_.

<b>Signature(s):</b>	<b>WITNESS 1:</b>	<b>WITNESS 2:</b>
1 <sup>st</sup> /sole applicant : _____	Signature: _____	Signature: _____
2 <sup>nd</sup> applicant: _____	Name: _____	Name: _____
3 <sup>rd</sup> applicant: _____	Address: _____	Address: _____

Note: - 1. This should be printed on a Rs.100/- stamp paper.