

Application No: _____
 (To be filled by RP)

Date: _____

Repository Participant (RP) Name: _____

Pledge option Fund Exposure **Inter Repository** Yes No

R P I D **Client ID**

Name of Client: _____
 I/We request you to initiate transaction as mentioned hereunder-registered in my/our name.

Count/Number of transactions

Pledgee Name: _____

Pledgee ID: _____ **IFSC / Branch Code:** _____

eNWR Details: (In case of more than 5 eNWRs attach annexure with similar tabular details)

Warehouse Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Commodity name	<input type="text"/>
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SR No	eWR / eNWR No										Qty & UOM	Unit	Txn. No (To be filled by RP)	
1														
2														
3														
4														
5														

To be filled in case of Exposure Pledge

Contract Code	<input type="text"/>	Clearing Member (CM) ID	<input type="text"/>
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	First Authorized Signatory	Second Authorized Signatory	Third Authorized Signatory
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	<input type="text"/>	<input type="text"/>	<input type="text"/>

I/ we confirm that the quantity offered for pledge is unencumbered and is a free balance. I hereby understand that non fulfilment of the pledge obligation by the due date, eWR/eNWR quantity pledged will be confiscated by the pledgee.	I/we hereby declare and undertake that I/we have appointed and authorized the Repository Participant (RP) to collect warehouse storage charges payable by me/us under an eNWR to the Warehouse Service Provider and forward the same to the warehouse Service Provider. I/We understand and agree that the said service of collection of warehouse rent provided by the RP is voluntary service and does not form the core service of the Repository and therefore for the purpose of this service the RP is not an agent of the Repository and the contents herein and transactions hereunder are between me/ourselves and the RP.
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-----**Acknowledgement Receipt**-----

Instruction details		RP details	
Application No	<input type="text"/>	Employee Name & Code	<input type="text"/>
Client Name	<input type="text"/>	Designation	<input type="text"/>
Client ID	<input type="text"/>	Sign & Stamp	<input type="text"/>
Date & Time	<input type="text"/>		