



RP Name Address
RP ID
Consolidated Transfer Transaction Instruction Form
(To be filled in duplicate)

[RP Logo]

Request no: # _____

Delivery Receipt

| I / We request you to debit / credit my / our account as under: - | | | | | | | Date: - | | D | D | M | M | Y | Y | Y | Y | Y | Y |
|---|---|--|-----------------------------------|--|--|---------|--|--|--|------------------------|---|---|---|---|---|---|---|---|
| RPID | | Client ID | | Client Name | | | | | | | | | | | | | | |
| Sr. No. | eNWR No. | Commodity Id and Name | No of Bags | QUANTITY | | WSP ID | WH ID | | | | | | | | | | | |
| | | | | In figures | In words | | | | | | | | | | | | | |
| 1 | | | | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | |
| Total Instructions Issued (In words only) → | | | | | | | | | | | | | | | | | | |
| If transfers from CO (Investor) account to another CO (Investor) account and NOT RELATED to Exchange Transactions: - Please specify reason (as given below):- · Gift · Consideration:- Please mention consideration amount in Rs. _____ | | | | | | | TMID (Applicable for Early Pay-in and Normal Pay-in) | CMID (Applicable for Early Pay-in and Normal Pay-in) | Execution Date (Not Applicable for Early Pay-in and Normal Pay-in) | | | | | | | | | |
| | | | | | | | | | D | D | M | M | Y | Y | Y | Y | Y | Y |
| ↓ :- Fill the relevant columns :- ↓ | | | | | | | | | | | | | | | | | | |
| Instruction Type → | ↓ Account Transfer - With in CCRL (Transaction) ↓ | | | ↓ Account Transfer - Outside CCRL (Inter Repository) ↓ | | | ↓ Market Trades (Settlements) ↓ | | | | | | | | | | | |
| Settlement Details → | ↓ CO-CO ↓ | ↓ CO-CM, CM-CO, CM-CM, CM-TM, TM -CO ↓ | | ↓ CO-CO ↓ | ↓ CO-CM, CM-CO, CM-CM, CM-TM, TM -CO ↓ | | ↓ Early Pay-in ↓ | ↓ Normal Pay-in ↓ | | | | | | | | | | |
| Exchange Name → | OPTIONAL | | | OPTIONAL | | | | | | | | | | | | | | |
| Settlement / Market Type → | OPTIONAL | | | OPTIONAL | | | | | | | | | | | | | | |
| Settlement Number → | | | | | | | | | | | | | | | | | | |
| Counter RP ID / CM ID → | | | | | | | NOT APPLICABLE | NOT APPLICABLE | | | | | | | | | | |
| Counter Client ID → | | | | | | | NOT APPLICABLE | NOT APPLICABLE | | | | | | | | | | |
| Counter CO / CM Name → | | | | | | | | | | | | | | | | | | |
| Counter Settlement Details | | | CM-CM ↓ | | | CM-CM ↓ | | | | | | | | | | | | |
| Exchange Name → | NOT APPLICABLE | | | NOT APPLICABLE | | | NOT APPLICABLE | NOT APPLICABLE | | | | | | | | | | |
| Settlement / Market Type → | NOT APPLICABLE | | | NOT APPLICABLE | | | NOT APPLICABLE | NOT APPLICABLE | | | | | | | | | | |
| Settlement Number → | NOT APPLICABLE | | | NOT APPLICABLE | | | NOT APPLICABLE | NOT APPLICABLE | | | | | | | | | | |
| :- Blank & Signed Delivery Instruction Slips should not be left with your RP/Broker :- | | | | | | | | | | | | | | | | | | |
| Signature of First / Sole Holder | | | Signature of Second Holder | | | | | | Signature of Third Holder | | | | | | | | | |
| ↓ :- For RPs office use only :- ↓ | | | | | | | | | | | | | | | | | | |
| Internal Ref. No. | | | | Signature Verified By | | | | | | Transaction Entered By | | | | | | | | |

I/We agree to abide by and be bound by the WDRA Act, Rules and Regulations, CCRL Bye Laws and Business Rules as are in force from time to time for such Transfer.