

# TM ACCOUNT MASTER CREATION FORM

<Repository Participant Name / Address /RP ID>

Request No. *		Request Date*	D	D	M	M	Y	Y	Y	Y
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(Please fill all the details in **Block Letters in English**)

RP ID*		Depositor/Client ID*	
Depositor/Client Name			

CE CC ID *	
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CE ID *		CE Name	
CC ID *		CC Name	

TM ID *		TM Name	
CM ID *		CM Name	

### Authorised Signatory

	Sole / First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Signature*			

*(Signature should be preferably in blue ink).*

(In case of more authorised signatories, please add annexure)

===== (Please Tear Here) =====

### Acknowledgement Receipt

Received TM - CM Linking request as per details given below:

Request No.		Date	D	D	M	M	Y	Y	Y	Y
RP ID		Depositor/Client ID								
Depositor/Client Name										
TM Name										

**Repository Participant Seal and Signature**