FORM NO. IEPF-5

[Pursuant to sub-section (3) of section 125 of the Companies Act, 2013 and rule 7(1)of the Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules, 2016]



Application to the Authority for claiming unpaid amounts and shares out of Investor Education and Protection Fund (IEPF)

1.	Particulars of the applicant						
	(a) *Category of the applicant	Individua	ıl	Others			
	(b) *FirstName						
	(c) Middle Name						
	(d) *Last Name						
	(e) *Father's First Name						
	(f) Father's Middle Name						
	(g) *Father's Last Name						
	(h) *Date of Birth						
	(i) *Name of Entity						
	(j) *Date of Incorporation(k) *Address of the applicant						
	(I) Phone number]	
	(m) *Mobile Number				S	end O	OTP
	(n) *Email ID					_	
	(0) Enter OTP for Mobile number	L				_ 	Verify OTP
	(p) Enter OTP for Email ID	L					
	(q) *Aadhaar Number or Passport/	OCI/PIO C	ard No. (in c	ase of NRI/fo	reigners)		
	(r) *PAN of applicant					Verify	y PAN Detail

2. Particulars of the Company from which the amoun	Particulars of the Company from which the amount is due									
(a) *Corporate identity number (CIN) of company(b) Name of the company										
(c) Address of registered office of the company										
(d) Email id of the company	(d) Email id of the company									
3. Is it a case covered under rule 7 (8) & 7(9) of IEPF Ru	Is it a case covered under rule 7 (8) & 7(9) of IEPF Rules, 2016 Yes No									
(a) Name of original security holder	Name of original security holder									
(b) Relation of claimant with security holder	o) Relation of claimant with security holder									
(c) Number of Nominee/Legal heirs/Successors/	(c) Number of Nominee/Legal heirs/Successors/									
Administrator/ Others holders.		_								
Name of Beneficiary	Name of Beneficiary									
i.	i.									
ii.										
iii.										
4. Type of Claim										
O Amount and Shares	O Amount O Amount and Shares									
5 Details of shower slaimed (More than one Falia for	no commony con bo adde	J.								
Number of Folio	5. Details of shares claimed (More than one Folio for one company can be added) Number of Folio									
	Transport of Folio									
Type of holding Folio No./	Type of share	Number of shares								
Complete Demat Account Number										
from which transfer has been made										
to IEPF										
Folio No.										
Demat A/c										
6. Claim Details *Number of claims										

Year wise details of securities / deposits for which the amount is claimed										
Type of Claim	Type of holding	Folio No./Complete Demat account number from which transfer has been made to IEPF	Amount of the claim	Financial Year to which claim relates						
		Folio Demat A/c	Principle Interest							
7. Refund Account Details Details of Bank account in which refund shall be credited Bank Name IFSC Code Bank Branch Demat account number in which shares shall be credited 8 (a) *Copy of Aadhaar Card of the claimant and if joint holders are there, copy of Aadhar card of all joint holders (b) *Copy of Passport, OCI and PIO card in case of foreigners and NRI (c) *Client Master List of De-mat A/c of the claimant Browse (d)*Proof of entitlement (Bonds/Debentures/Fixed Deposit receipts/										
No	rtificate of share/Interest wa /Statement of transaction e Notarised Copy of death c	tc.)	ant, Application		Rrowse					
(f)	Notarised Succession Cert	ificate/Probate/will			Browse					
(g)	No Objection Certificate f	rom Other holder			Browse					
(h)	Indemnity Bond, duly not	arised.			Browse					
(i)	Affidavit in form of surety	/ .			Browse					
(j)	Others				Browse					

Declaration

I declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I further declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

I declare that I have not claimed/ will not claim, the shares and/or amount claimed under the same folio and/or for same financial year on any earlier occasion for this company.

I understand that I, am the claimant and after filing the refund claim in this form online, shall send the attachments prescribed below to Nodal Officer (IEPF) of the company at its registered office in an envelope marked "claim for refund from IEPF Authority" for initiating the verification for claim

- 1. Print out of duly filled claim form with claimant signature and if joint holders are involved than the Form should be signed by all the joint holders along with annexures submitted with form
- 2. Copy of acknowledgement generated after uploading the claim Form IEPF 5.
- 3. Copy of Indemnity Bond (original) auto generated after uploading the claim Form IEPF 5 with claimant signature and proof of payment of applicable stamp duty (Refer Help Kit for Stamp Duty Details).
- 4. In case of refund of matured deposit or debenture or bond or where shares (in physical form) are claimed, original certificate/shares thereto.
- 5. Original Cancelled Cheque leaf.
- 6. In case any Joint holder is deceased, Copy of Death certificate to be attached.

Note: Attention is also drawn to provisions of Section 448 of Companies Act, 2013 which states that-

statement or other document required by, or for, the purposes of any of the provisions of this Act or the rules made thereunder, any person makes a statement,-

7. Other optional documents, (if any) "Save as otherwise provided in this Act, if in any return, report, certificate, financial statement, prospectus, (a) which is false in any material particulars, knowing it to be false; or (b) which omits any material fact, knowing it to be material, he shall be liable under section 447." Submit