

**Annexure A**

**(FORMAT OF APPLICATION TO BE SUBMITTED BY THE ISSUER ON ITS LETTERHEAD)**

Date:

**To**

**BSE Limited**

P J Towers Dalal Street

Mumbai - 400001

India

Dear Sir/ Madam,

**Sub: Application for listing of Commercial Paper pursuant to SEBI circular dated October 22, 2019 on “Framework for listing of Commercial Paper” as amended from time to time.**

We hereby apply for listing and trading permission of below mentioned Commercial Paper pursuant to SEBI circular SEBI/HO/DDHS/DDHS/CIR/P/2019/115 dated October 22, 2019 as amended from time to time, which have been issued on private placement basis:

<b>Sr. No.</b>	<b>ISIN</b>	<b>No. of CP</b>
1.		
2.		

We enclose herewith the documents as per the checklist.

In case of any queries / clarifications the under-mentioned official may be contacted:

<b>Contact Details -Issuer</b>	
Name & Designation of Contact Person	
Telephone Nos. (landline & mobile)	
Email – id	

I / We hereby confirm that the information provided in the application and enclosures is true, correct and complete. We also state that no relevant facts have been suppressed.

Thanking you,

Yours faithfully,

(Authorized signatory)

Name and Designation of authorized signatory

Encl: a/a

**FORM A - PART I**  
**(To be filled up by the Issuer and submitted along with all application(s))**

**To**  
**BSE Limited**  
P J Towers Dalal Street  
Mumbai - 400001  
India

**Dear Sir/Madam,**

**We hereby apply for listing of the following security issued on the Debt Market Segment**

Nature of Security : Commercial Paper  
Issuer Name :

<b>Issuer details</b>			
Name of Contact person		Telephone Nos. (Landline & Mobile)	
Designation of Contact person		E mail ID	

<b>ISIN Detail (This information has to be filled up per ISIN separately)</b>			
ISIN		ISIN Type (Fresh Issue/Further Listing)	
Number of CP		Face Value per CP (Rs.)	
Issue Opening Date		Issue Closing Date	
Whether this scrip is/ going to be On other Exchange		Issue Price per CP (Rs.)	
Date of allotment		Date of Maturity	
Tenure (in days)		Issuer Type (PSU/ Corporate/ AIFI/ Primary Dealer)	
Credit Rating (Eg: CARE AA+)		Rating Date	
Rate of Interest		Name of Issuing and Paying Agent (IPA)	

Place	
Date	
Signature	
Name	
Designation	
Contact Details	
Stamp of the Issuer	

**FORM A – PART II**  
**(To be submitted by the issuers for the first time only)**

<b>Issuer Details</b>	
Name of the Issuer	
Registered Office (Address)	
Corporate Office/ (Address)	
Any other address of the Issuer for Billing Purpose	
Constitution (PSU/Banks/Corporates/Others)	
Sector (Public/Private)	
Name of the Compliance Officer	
Mobile number of the Compliance Officer*	
Email Id of the Compliance Officer*	
GST Number ( <i>Registered Office</i> ) ( <i>along with GSTIN Certificate</i> )	
GST Number ( <i>any other for billing</i> ) ** ( <i>along with GSTIN Certificate</i> )	
PAN ( <i>along with scan copy of the PAN</i> )	
TAN ( <i>along with scan copy of the TAN</i> )	
Scores ID from SEBI	

***\*Kindly note that the OTP for verification shall be sent on the Mobile Number and the email id mentioned above for filings on Listing Centre***

***\*\*In case if the billing is required on a different address***