



**Date: 12/09/2024**

To,  
The General Manager  
Corporate Relationship Department,  
BSE Limited  
1<sup>st</sup> Floor, New trading Ring,  
Rotunda Building, PJ Towers,  
Dalal Street, Fort, Mumbai-400001

**Script Code/Symbol: 532016/Espire**

**Subject:-**

**Intimation regarding loss of share certificates / Issue of duplicate share certificates**

Dear Sir / Madam,

Pursuant to Regulation 39(3) of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015, this is to inform that our Registrar and Share Transfer Agent ("RTA") has received the information about loss of share certificates and issue of duplicate share certificates, (proof of date of receipt of intimation is enclosed).

Folio No	Name of the Shareholder	Share Certificate Number	Distinctive Number	No of Shares
1577	Varsha Handa	8402	10838801 to 10838900	100
1577	Varsha Handa	8403	10838901 to 10839000	100

**Espire Hospitality Limited**

Registered Office: Shop No. 1, Country Inn Mehraagon, Bhimtal, Uttarakhand - 263132 | Corporate Office: A 41, Mohan Co-operative Industrial Estate, New Delhi - 110044  
T: +91 11 7154 6500 | E: [info@espirehospitality.com](mailto:info@espirehospitality.com) | W: [www.espirehospitality.com](http://www.espirehospitality.com) | PAN: AAACU0234B  
CIN: L45202UR1991PLC000604



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[zanaresorts.com](http://zanaresorts.com)



[countryinn.in](http://countryinn.in)

1577	Varsha Handa	8404	10839001 to 10839100	100
1577	Varsha Handa	8405	10839101 to 10839200	100
1577	Varsha Handa	8406	10839201 to 10839300	100

The said request was directly received at RTA's end and they have informed us today about the same, accordingly we are hereby intimating the same to exchange.

Company shall initiate the process of issuance of letter of confirmation and duplicate certificate in due course of time.

This is for the information of the Exchange.

**Thanking You,  
Yours faithfully  
Espire Hospitality Limited**




**(Sumeer Narain Mathur)  
Company Secretary & Compliance officer  
Membership No: FCS9042**

Encl: As above

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## Form ISR – 1

(see SEBI circular No. SEBI/HO/MIRSD/MIRSD\_RTAMB/P/CIR/2021/655 dated November 03, 2021 on Common and Simplified Norms for processing investor's service request by RTAs and norms for furnishing PAN, KYC details and Nomination)

### REQUEST FOR REGISTERING PAN, KYC DETAILS OR CHANGES / UPDATION THEREOF

[For Securities (Shares / Debentures / Bonds, etc.) of listed companies held in physical form]

Date: 21/11/2023

A. I/We request you to Register / Change / Update the following (Tick  relevant box)

<input checked="" type="checkbox"/> PAN	<input checked="" type="checkbox"/> Bank details	<input checked="" type="checkbox"/> Signature
<input checked="" type="checkbox"/> Mobile number	<input checked="" type="checkbox"/> E-mail ID	<input checked="" type="checkbox"/> Address

N.A.

**B. Security Details:**

Name of the Issuer Company	Espane Hospitality Ltd.	Folio No.: 1577
Name(s) of the Security holder(s) as per the Certificate(s)	1. VARSHA HANDA 2. 3.	
Number & Face value of securities	500	
Distinctive number of securities (Optional)	From 10838801	To 10839300

Skyline Financial Services Pvt. Ltd.

12 SEP 2024

Tr Code-                      Inw No-

Subject to Verification

AAVPM64145

C. I / We are submitting documents as per Table below (tick  as relevant, refer to the instructions):

	Document / Information / Details	Instruction / Remark
1	PAN of (all) the (joint) holder(s)	
	PAN	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Whether it is Valid (linked to Aadhaar): <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PAN shall be valid only if it is linked to Aadhaar by March 31, 2022* For Exemptions / Clarifications on PAN, please refer to Objection Memo in page 4
2	Demat Account Number	<input type="checkbox"/> 99000737000000 ? Also provide Client Master List (CML) of your Demat Account, provided by the Depository Participant.

N.A.

Skyline Financial Services Pvt. Ltd.

30 DEC 2023

Tr. Code- 8                      Inw No- 5,6

Subject to Verification



3	Proof of Address of the holder	<p>Any one of the documents, only if there is change in the address;</p> <p><input type="checkbox"/> Client Master List (CML) of your Demat Account, provided by DP.</p> <p><input type="checkbox"/> Valid Passport/ Registered Lease or Sale Agreement of Residence / Driving License / Flat Maintenance bill.</p> <p><input type="checkbox"/> Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.</p> <p><input type="checkbox"/> Identity card / document with address, issued by any of the following: Central/State Government and its Departments, Statutory / Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions.</p> <p><input type="checkbox"/> For FII / sub account, Power of Attorney given by FII / sub-account to the Custodians (which are duly notarized and / or apostilled or consularised) that gives the registered address should be taken.</p> <p><input type="checkbox"/> The proof of address in the name of the spouse</p>
4	Bank details	<p>Account Number: <u>1511450698</u></p> <p>Bank Name: <u>Kotak Mahindra Bank</u></p> <p>Branch Name: _____</p> <p>IFS Code: <u>KKBK000192</u></p> <p>Provide the following:</p> <p><input type="checkbox"/> original cancelled cheque with name of security holder printed on it or Bank Passbook or Bank Statement attested by the Bank#</p>
5	E-mail address	<u>GEETA.HANDA@GMAIL.COM</u>
6	Mobile	<u>9811299245</u> #

\* or any date as may be specified by the CBDT

(DP: Depository Participant)

# In case it is not provided, the details available in the CML will be updated in the folio

**Authorization:** I / We authorise you (RTA) to update the above PAN and KYC details in my / our folio(s) 1577, \_\_\_\_\_, (use Separate Annexure if extra space is required) in which I / We are the holder(s) (strike off what is not applicable).

**Declaration:** All the above facts stated are true and correct.

	Holder 1	Holder 2	Holder 3
Signature	<u>Varsha Handa</u>		
Name	<u>VARSHA HANDA</u>		
Full address	<u>53/41, Ramjas Road, Karol Bagh, New Delhi</u>		
PIN	<u>110005</u>		