Annexure - 4

Model Format of Consent to be obtained from AP for Change in their Appointment

Date:

From:
AP Name
AP Code
AP Address

Sub: Consent for change in our Appointment as Authorised Person of _____ _____ (Outgoing Member) to AP of _____ (Incoming Member) pursuant to Transfer/ Merger / De-merger / Amalgamation of Membership

Ref: AP Code_____

I/We _____, (name of the AP) hereby state that, I/We are appointed as an Authorised Person (AP) of M/s _____ (Outgoing Member) having Membership ID_____, SEBI Registration _____) with effect from _____, having AP Code _____.

I/We understand that the Membership of M/s _____ is now transferred to M/s _____ (Incoming Member) pursuant to integration of broking activities by way of Merger / De-merger / Amalgamation/ Transfer of Membership.

In view of the Transfer of Membership as stated above, I/We agree for change in our appointment as an AP of M/s_____ to AP of M/s _____. I/We further agree to abide by the Rules, Business Rules and Bye-laws of the Exchange, all the terms and conditions specified in SEBI Circular no. MIRSD/DR-1/Cir-16/09 dated November 6, 2009 and also the terms and conditions of the Member-AP Agreement dated _____, executed between me/us and M/s _____as if the same has been executed between me/us and M/s_____ Transferee Member).

Thanking you,

Yours faithfully

(Name of AP)
Signature of AP (Individual/Authorised Signatory)