

TO BE FILLED/ATTESTED BY POP-SP

Certified that the above declaration and nomination details has been signed / thumb impressed before me by Sh/Smt/Ms. _____
_____ after he / she have read the entries / entries have been read over to him / her by me and got confirmed by him / her.

Rubber Stamp of the POP-SP

Signature of the Authorised Person

POP-SP Registration Number _____
(Allotted by CRA)

Designation of the Authorised Person : _____

POP-SP Office Name : _____

Date

d	d	/	m	m	/	y	y	y	y
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TO BE FILLED/ATTESTED BY POP/POP-SP

Rubber Stamp of the POP/POP-SP

POP/POP-SP Registration Number
(Allotted by CRA): _____

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Signature of the Authorised Person