Application Form for PRIVATE PLACEMENT (please read carfully the instruction on the reverse)

ARMSS BENEFIT FUND NIDHI LIMITED

7122/P, MARIYAMMAN KOVIL STREET,THIRUKKOKARANAM, PUDUKKOTTAI 622002

(Incorporated Under the Companies Act, 1956)

TERMS OF PAYMENT Full Payment @ Re.10/- per share on application

To.

THE BOARD OF DIRECTORS,
ARMSS BENEFIT FUND NIDHI LIMITED
PUDUKKOTTAI 622002

E-Mail. ID.:

Admission No.:

Sir,

I / We herby apply to you for allotment to me / us of the Equity Share(s) stated below.

I / We Herby agree to accept subject to the term of application form, Memorandum and articles of Association of the company.

I / We note that the Board of Directors or entitled in their absolute discretion to accept or reject this application form in whole or in part without assigning any reason whatsoever.

Note : Please use BLOCK LETTER in English

Number of Shares applied		Amount in Figures	
Amount In words			
Cash / Cheque / Draft.No.		Dated	
Drawn on (Name of Bank)			
Sole / FIRST APPLICANT Mr. / Mrs. / Miss : Father / Husband Name ~~Address in Full :~~ STREET : TOWN/CITY : DISTRICT : DOB:		Pin Code Age :	Photo
Occupation			
Mobile / Telephone Name			Signature
Name of the nominee (if any)	**Mr. / Mrs. / Miss**		
Father / Husband			
Relationship			
Date of Birth (if minor)			Signature
ID Proof		ID Proof No.	

SPECIMAN SIGNATURE (S) 1 _____ 2 _____

Applicant 1 _____ 2 _____

INSTRUCTIONS

(For Private Circulation Only)

1. Application must be completed in full in block letters in English,Application which are not completed in all respects are liable to be rejected.

2. An applicant must submit only one application (and not more than one) for the number of shares required.Applications must be made in single or joint names (not more than two).Two or more applications in single and for joint names will be deemed to be multiple application if the sole and or the first applicant is one and the same . The board or directors reserves the right to reject in its absolute discretion all or any multiple applications. If ownerships of the shares is desired in the pay orders if any will be made in favour of and all communications will be addressed to the applicant whose names appears first, for the time being and at his /her address stated in the Applicant form.

3. The Board of directors reserve the rights to accept or reject any application in whole or in part without assigning any reason thereof.and if an application is rejected in full,the whole of the application money received will be refunded.If the application is rejected in part balance of the application money received will be refunded to the applicant and no interest in payable on application money refunded. Allotment of shares will be at the absolute discretion of the board of Directors.

4. Allotment Advice/ Share certificate or letters of Regret as the case may be together with refund orders if any will be mailed to sole/ First applications address at his/ her risk within 3 months

5. Attention of the applicant is drawn to the provisions of sub -section (1)66A OF THE Companies Act 41956 which is reproduced below

Any person who

(a) Makes if fictitious name an application to a company for acquiring or subscribing for any shares therein or

(b) otherwise induces or company to allot or register or transfer of shares there in to him or any others persons in a fictitious name, shall be punishable with imprisonment for a term which may extend to five years

6. Applications completed in all respects together with remittance should be sent to the following address.

ARMSS BENEFIT FUND NIDHI LIMITED

7122/P, MARIYAMMAN KOVIL STREET,THIRUKKOKARANAM, PUDUKKOTTAI 622002

FOR OFFICE USE ONLY

Admission No	:		No. of Share Allotted	:	
Folio No	:		Certificate No	:	
Date of Allotment	:				
Distinctive No	:		t		

Documents Attached

1.Family Card	:		2.Voter Id	:	
3.Aadhar Card	:		3.Driving License	:	

Above four documents must be attached with self attested

5.Pan Card : (Most Important and Mandtory)

OFFICER **DIRECTOR** **DIRECTOR**