



**To,
The Board of Directors
SRIVASAVI ADHESIVE TAPES LIMITED**

100% FIXED PRICE SME ISSUE
ISIN : INE0NP101014

**Application
Form No.**

SYNDICATE MEMBERS' STAMP & CODE	REGISTERED BROKER / SCSB / CDP / RTA STAMP & CODE	
SUB-BROKER'S / SUB-AGENT'S STAMP & CODE	SCSB BRANCH STAMP & CODE	
BANK BRANCH SERIAL NO.	SCSB SERIAL NO.	

1. NAME & CONTACT DETAILS OF SOLE / FIRST APPLICANT

Mr. /Ms./M/s.

Address

Email

Tel. No. (with STD code) / Mobile

2. PAN OF SOLE / FIRST APPLICANT

3. APPLICANT'S DEPOSITORY ACCOUNT DETAILS ☐ NSDL ☐ CDSL

For NSDL enter 8 digit DP ID followed by 8 digit Client ID / For CDSL enter 16 digit Client ID

PLEASE CHANGE MY APPLICATION

4. FROM (AS PER LAST APPLICATION OR REVISION)																		
Application Options	No. of Equity Shares Applied (Applications must be in multiples of Application Lot as advertised)								Price per Equity Share (₹)/ "Cut-off" (Price in multiples of ₹ 1/- only)									
									(In Figures)								(In Figures Only)	
	8	7	6	5	4	3	2	1	Application Price			Retail Discount			Net Price			"Cut-off" (Please ✓ tick)
								3	2	1	3	2	1	3	2	1		
Option 1																		<input type="checkbox"/>
(OR) Option 2																		<input type="checkbox"/>
(OR) Option 3																		<input type="checkbox"/>

5. TO (REVISED APPLICATION) (ONLY RETAIL INDIVIDUAL INVESTORS CAN APPLY AT "CUT-OFF")																		
Application Options	No. of Equity Shares Applied (Applications must be in multiples of Application Lot as advertised)								Price per Equity Share (₹)/ "Cut-off" (Price in multiples of ₹ 1/- only)									
									Application Price			Retail Discount			Net Price			"Cut-off" (Please ✓ tick)
	(In Figures)								(In Figures Only)									
	8	7	6	5	4	3	2	1	3	2	1	3	2	1	3	2	1	
Option 1																		<input type="checkbox"/>
(OR) Option 2																		<input type="checkbox"/>
(OR) Option 3																		<input type="checkbox"/>

6. PAYMENT DETAILS [IN CAPITAL LETTERS]										PAYMENT OPTION : FULL PAYMENT <input type="checkbox"/> PART PAYMENT <input checked="" type="checkbox"/>									
Additional Amount Blocked (₹ in figures) <table border="1" style="display: inline-table; width: 150px; height: 20px; vertical-align: middle;"></table>										(₹ in words) <table border="1" style="display: inline-table; width: 150px; height: 20px; vertical-align: middle;"></table>									
ASBA																			
Bank A/c No.										<table border="1" style="width: 100%; height: 20px;"></table>									
Bank Name & Branch																			
OR																			
UPI ID (Maximum 45 characters)										<table border="1" style="width: 100%; height: 20px;"></table>									

I/WE (ON BEHALF OF JOINT APPLICANTS, IF ANY) HEREBY CONFIRM THAT I/WE HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS COMMON REVISION FORM, THE ATTACHED ABRIDGED PROSPECTUS AND THE GENERAL INFORMATION DOCUMENT FOR INVESTING IN PUBLIC ISSUES ("GID") AND HEREBY AGREE AND CONFIRM THE APPLICANT'S UNDERTAKING AS GIVEN ALONG WITH THE APPLICATION FORM I/WE (ON BEHALF OF JOINT APPLICANTS, IF ANY) HEREBY CONFIRM THAT I/WE HAVE READ THE INSTRUCTIONS FOR FILLING UP THE COMMON REVISION FORM GIVEN OVER LEAF

7A. SIGNATURE OF SOLE/ FIRST APPLICANT Date : _____, 2023	7B. SIGNATURE OF ASBA BANK ACCOUNT HOLDER(s) (AS PER BANK RECORDS) I/We authorise the SCSB to do all acts as are necessary to make the application in the Issue. 1) _____ 2) _____ 3) _____	MEMBERS OF THE SYNDICATE / SUB - SYNDICATE MEMBER / REGISTERED BROKER / SCSB / CDP / RTA / AGENT STAMP (Acknowledging upload of Application in Stock Exchange system)
--	---	---

TEAR HERE



SRIVASAVI ADHESIVE TAPES LIMITED
COMMON REVISION FORM -
INITIAL PUBLIC OFFER - NR

**Acknowledgement Slip for
Members of the Syndicate /
Sub-Syndicate Member / Registered
Broker / SCSB / CDP / RTA / Agent**

**Application
Form No.**

[illegible]

TEAR HERE

SRIVASATI ADHESIVE TAPES LIMITED - COMMON / REVISION FORM - - INITIAL PUBLIC OFFER - NR		Option 1	Option 2	Option 3	Stamp & Signature of Members of the Syndicate / Sub-Syndicate Member / Registered Broker / SCSB / CDP / RTA / Agent	Name of Sole / First Applicant _____ _____
	No. of Equity Shares					
	Application Price					
	Additional Amount Blocked (₹ in figures)					
	ASBA Bank A/c No. /UPI ID _____ Bank Name & Branch _____					Acknowledgement Slip for Applicant
Important Note : Application made using third party UPI ID or ASBA Bank A/c are liable to be rejected.					Application Form No.	_____ _____