BID-CUM-APPLICATION FORM FOR ELIGIBLE EMPLOYEES BIDDING UNDER EMPLOYEE RESERVATION PORTION

STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED - ELIGIBLE EMPLOYEES FORM

Registered and Corporate Office: No.1, New Tank Street,Valluvarkottam High Road, Nungambakkam, Chennai Tamil Nadu 600 034 India; **Tel:** +91 44 2828 8800; **Website:** www.starhealth.in; **Contact Person:** Jayashree Sethuraman, Company Secretary and Compliance Officer; **E-mail:** investors@starhealth.in; **Corporate Identity Number:** U66010TN2005PLC056649; **IRDAI Registration Number:** 129

FOR ELIGIBLE EMPLOYEES BIDDING IN THE EMPLOYEE RESERVATION PORTION

To,
The Board of Directors
STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED

100% BOOK BUILT OFFER
ISIN : INE575P01011

Bid cum Application Form No.

MEMBERS OF THE SYNDICATE STAMP & CODE	REGISTERED BROKER/SCSB/CDP/CRTA 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 BIDDER

Mr. /Ms.

Address

Email

Tel. No. (with STD code) / Mobile

2. PAN OF SOLE / FIRST BIDDER

3. BIDDER'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

4. BID OPTIONS (ELIGIBLE EMPLOYEES BIDDING IN THE EMPLOYEE RESERVATION PORTION CAN BID AT "CUT-OFF")

Bid Options	No. of Equity Shares Bid (In Figures) (Bids must be in multiples of Bid Lot as advertised)	Price per Equity Share (₹)/ "Cut-off" (Price in multiples of ₹ 1/- only) (In Figures only)			
		Bid Price	Employee Discount	Net Price	"Cut-off" (Please✓tick)
	8 7 6 5 4 3 2 1	3 2 1	3 2 1	3 2 1	
Option 1					☐
(OR) Option 2					☐
(OR) Option 3					☐

5. CATEGORY

Eligible Employee

6. INVESTOR STATUS

☐ Eligible Employees - EMP

EMPLOYEE CODE / NUMBER

7. PAYMENT DETAILS [IN CAPITAL LETTERS]

PAYMENT OPTION : FULL PAYMENT ☑

Amount blocked (₹ in figures) (₹ in words)

ASBA
Bank A/c No.
Bank Name & Branch

I/WE (ON BEHALF OF JOINT BIDDERS, IF ANY) HEREBY CONFIRM THAT I/WE HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS COMMON BID CUM APPLICATION FORM, THE ATTACHED ABRIDGED PROSPECTUS AND THE GENERAL INFORMATION DOCUMENT FOR INVESTING IN PUBLIC OFFERS (**"GID"**) AND HEREBY AGREE AND CONFIRM THE 'BIDDER'S UNDERTAKING' AS GIVEN OVERLEAF. IF I/WE HAVE APPLIED FOR 1% OR MORE BUT LESS THAN 5% OF THE POST-OFFER PAID UP EQUITY SHARE CAPITAL OF THE COMPANY, THEN I/WE HEREBY CONFIRM AND CERTIFY THAT I / WE ARE SATISFYING THE "FIT AND PROPER" CRITERIA AS SET BY THE COMPANY AND AS SET OUT IN THE SECTION "OFFER PROCEDURE" ON PAGE 423 OF THE RHP.

8A. SIGNATURE OF SOLE/ FIRST BIDDER

Date : _____, 2021

8B. 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 Offer.

1)
2)
3)

SYNDICATE MEMBER / SUB-SYNDICATE MEMBER / REGISTERED BROKER / SCSB / CDP / RTA STAMP (Acknowledging upload of Bid in Stock Exchange system)

TEAR HERE

STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED
INITIAL PUBLIC OFFER - ELIGIBLE EMPLOYEES BIDDING IN THE EMPLOYEE RESERVATION PORTION

Acknowledgement Slip for Syndicate Member/Registered Broker/SCSB/ CDP/RTAs/Sub-Syndicate Member/Agents

Bid cum Application Form No.

PAN of Sole / First Bidder

DPID / CLID

Amount blocked (₹ in figures) | ASBA Bank A/c No.

Bank Name & Branch

Stamp & Signature of SCSB Branch

Received from Mr./Ms./M/s.

Telephone / Mobile | Email

TEAR HERE

STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED - INITIAL PUBLIC OFFER - ELIGIBLE EMPLOYEES BIDDING IN THE EMPLOYEE RESERVATION PORTION

	Option 1	Option 2	Option 3
No. of Equity Shares			
Bid Price per Equity Share (₹)			
Amount Blocked (₹ in figures)			

Stamp & Signature of Syndicate Member/Registered Broker/SCSB/CDP/RTAs/Sub-Syndicate Member/Agents

Name of Sole / First Bidder

Acknowledgement Slip for Bidder

ASBA Bank A/c No.
Bank Name & Branch

Bid cum Application Form No.

Important Note : Application made using third party ASBA Bank A/c are liable to be rejected.

TEAR HERE · PLEASE FILL IN BLOCK LETTERS · TEAR HERE

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