

**Annexure N**

Participant Name, Address & DP Id  
(Pre-printed)

**INTER-DEPOSITORY DELIVERY INSTRUCTIONS**

Serial No ( Pre-printed)						Date: _____
Client -Id ( Pre-Stamped)						
I/We hereby request you to <b>debit</b> my /our account as per the following details :						
Market Type: _____ (To be filled if the deliverer is a Clearing Member)					Settlement No.	
Target Depository -Id :		ISIN	Security Name	Quantity (In Figures)	Quantity (In Words)	Instruction No. (To be filled by DP)
Target Client - Id	Target Settlement Details					
Execution Date : _____						
<b>Participant Stamp, Date &amp; Time</b>				<b>Authorised Signatory(ies)</b>		

Instructions : To be submitted in duplicate for acknowledgement