

Annexure 1

Application Form for availing benefit under Technology Subsidy Programme for trading in BSE derivatives segment

To,

Business Development Department,

Bombay Stock Exchange Ltd,

P.J Towers, Dalal Street,

Mumbai 400001, India

1. We _____ (name of the member & Clearing Number) are interested to avail the following subsidy under the technology subsidy scheme offered by the Exchange.

| | <u>Subsidy</u> | <u>Quantity</u> |
|--------------------------|-----------------------|------------------------------|
| <input type="checkbox"/> | ODIN CTCL ids | |
| <input type="checkbox"/> | ODIN Diet ids | |
| <input type="checkbox"/> | Greek ids | |
| <input type="checkbox"/> | uTrade ids | |
| <input type="checkbox"/> | Racks Space | 0.25 / 0.5 / 1 (please tick) |
| | | |
| | <u>Servers</u> | |
| <input type="checkbox"/> | Powernet | |
| <input type="checkbox"/> | Xtremenet | |
| <input type="checkbox"/> | Poweredge | |

2. We have read and understood the terms and conditions of the programme and agree to abide by the same
3. We understand that this programme provides only GATS software id licenses to us and we will have to procure all the necessary hardware and software required to utilize the said ids (applicable only in case member opts for Greek ids)
4. We will abide by the letter and spirit of this circular (as well as all circulars issued by SEBI and the BSE) to maintain the sanctity of the market place. We are aware that BSE reserves the right to render certain members ineligible from further participation in the programme if they engage in activities that are detrimental to the development of the market
5. We understand that BSE has the right to terminate this programme or amend or expand one or more of the conditions laid down in this circular at its discretion
6. We agree to pay and honor any invoices arising out of usage of the said ids per the terms and conditions laid down in this circular
7. We hereby agree that BSE Ltd does not solicit any particular vendor and any trading or other risks arising out of usage of the opted subsidy are our sole responsibility.

Name Position (Designated Person)

Contact person name and number from I.T

(Signature / Stamp of the company)

Place, date

Phone & Email id