ANNEXURE B - 2
ON THE LETTERHEAD OF APPLICANT
To be certified by Compliance Officer/Partner stamped and dated.

Details of Partners (in case of partnership firm) and Compliance/Designated Officers as on _____

S.No	Full Name	Designation	Date of Birth	Education	PAN	Residential Address & Telephone Nos.	Compliance/ Designated Officer (Yes/No) #	Capital contribution in applicant entity		Directorships/controlling shareholding in other cos. (If yes, then mention name of entity)
								Amt	% total	
1										
2										
3										

For and on behalf of _____

(Signature & Seal)
Name:
Designation:
Date:
Place:

Legends:

#	Identify Partner and Compliance/Designated officer who shall be responsible for overseeing compliance of the applicant entity