

Policy Title	Policy on claiming unclaimed amounts by unitholders
Entity	Bagmane Realty Investment Manager Private Limited (acting as Investment Manager to Bagmane Prime Office REIT)
Approval Date	28 th December, 2025
Approving Authority	Board of Directors of Bagmane Realty Investment Manager Private Limited (acting as Investment Manager to Bagmane Prime Office REIT)

POLICY ON CLAIMING UNCLAIMED AMOUNTS BY UNITHOLDERS

1. APPLICABILITY:

This Policy is applicable to Bagmane Prime Office REIT (“**Bagmane REIT**”) and shall be implemented through the Bagmane Realty Investment Manager Private Limited (“**Manager**”).

2. OBJECTIVE AND PURPOSE:

The Policy lays down the framework and process to be followed by the Claimant for claiming their unclaimed or unpaid distribution lying in Unpaid Distribution Account, in accordance with the Regulation 18(16)(e) and 18(16)(f) of the Securities and Exchange Board of India (Real Estate Investment Trust) Regulations, 2014, (the “**SEBI REIT Regulations**”) as amended or supplemented, from time to time, read with the Securities and Exchange Board of India (“**SEBI**”) circular no. SEBI/HO/DDHS/DDHS-RAC-1/P/CIR/2023/177 on ‘*Procedural framework for dealing with unclaimed amounts lying with Real Estate Investment Trusts (REITs) and manner of claiming such amounts by unitholders*’ dated November 8, 2023 as amended or supplemented, from time to time, (hereinafter referred to as “**SEBI Circular**”).

3. DEFINITIONS

“**Applicable Law**” means any statute, law, regulation, ordinance, rule, judgement, order, decree, bye-law, approval of any governmental agency, directive, guideline, policy, requirement or other government restriction or any similar form of decision of or determination by, or any interpretation having the force of law of any of the foregoing governmental agency having jurisdiction, applicable to any party, in force from time to time, including but not limited to the SEBI REIT Regulations.

“**Board**” shall mean the board of directors of the Manager of Bagmane REIT.

“**Claimant**” shall include,

- i. Unitholder; or
- ii. Legal Heir(s); or
- iii. Nominee(s); or
- iv. Surviving joint Unitholder(s) in case of demise of first joint Unitholder, where the unit(s) of Bagmane REIT is held in joint demat account; or

- v. Co-parceners of HUF in case of demise of karta, where the unit(s) of Bagmane REIT is held in the name of hindu undivided family (HUF),

who has filed a claim with Bagmane REIT in accordance with the SEBI Circular and this Policy.

“Distribution” shall mean distribution made by Bagmane REIT to its Unitholders from time to time, in accordance with Regulation 18(16) of the SEBI REIT Regulations and the distribution policy of the Bagmane REIT, as approved and adopted by the Manager from time to time.

“Distribution Account” means an account opened by the Bagmane REIT with a scheduled bank from time to time, for making distribution to the Unitholders, as approved by the Board of Directors of the Manager.

“IPEF” shall mean Investor Protection and Education Fund, which is a fund created by SEBI under the Securities and Exchange Board of India Act, 1992 and regulated under Securities and Exchange Board of India (Investor Protection and Education Fund) Regulations, 2009.

“Legal Heir(s)” shall mean the legal heir(s) or successor(s) of a Unitholder who satisfies the provisions specified under the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 and circulars issued thereunder, for the transmission of Units and/ or the corresponding claim, as applicable.

“Nodal Officer” shall mean the compliance officer of Manager who is designated as nodal officer in accordance with the SEBI Circular.

“Nominee” shall mean nominee of an individual Unitholder as specified in his respective demat account with depository participant, who satisfies the provisions specified under the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 and circulars issued thereunder, for the transmission of Units and/ or the corresponding claim, as applicable

“Unit” shall mean an undivided beneficial interest in Bagmane REIT, and such Units together represent the entire beneficial interest in Bagmane REIT.

“Unitholder” shall mean any person who holds any Unit of Bagmane REIT.

“Unclaimed or Unpaid Amount” means an amount which remains unclaimed by the Unitholders and liable to be transferred to Unpaid Distribution Account or IPEF, as the case may be, in accordance with SEBI REIT Regulations, SEBI Circular or any circular(s) or notification(s) issued by the SEBI, from time to time.

“Unpaid Distribution Account” mean the respective Distribution Account opened with a scheduled bank, whereby the nomenclature of the account is changed to unpaid distribution account within 7 working days from the date of expiry of timelines specified under the REIT Regulations from declaration of distribution by Bagmane REIT.

4. **TRANSFER OF UNCLAIMED OR UNPAID AMOUNT TO UNPAID DISTRIBUTION ACCOUNT**

- i. In the event, Distribution made by Bagmane REIT, any amount of which remains Unclaimed or Unpaid Amount by Unitholders for a period of 15 days from the date of declaration, the Manager shall within 7 working days from the date of expiry of

timelines specified under the REIT Regulations, transfer such Unclaimed or Unpaid Amount to Unpaid Distribution Account; and

- ii. In the event, any amount transferred to the Unpaid Distribution Account remains unpaid or unclaimed for a period of 7 years from the due date of such transfer, such amount along with interest accrued, if any, shall be transferred by the Manager to the IPEF, within 30 days from the date of expiry of 7 years. Such transfer shall be made in the manner prescribed under SEBI circular no. SEBI/HO/GSD/TAD/P/CIR/2023/149 dated September 4, 2023, as amended or supplemented.

5. INTEREST IN CASE OF DEFAULT

- i. In case any default is made in transferring the Unclaimed or Unpaid Amount to the Unpaid Distribution Account, Bagmane REIT shall pay interest on the amount that has not been transferred to the said account, for the period of default i.e. from the date of default till the date of transfer to the Unpaid Distribution Account, at the rate of interest as may be specified by SEBI from time to time. The said interest amount shall accrue to the Unitholder in proportion to the amount remaining unclaimed. The Manager shall not recover such interest in the form of fees or any other form payable to the Manager by Bagmane REIT.
- ii. In case any default is made in transferring the amount to the IPEF by the Manager, the Manager shall be liable to a penalty of one lakh rupees and in case of continuing failure, a further penalty of five hundred rupees for each day that the failure continues, subject to a maximum of ten lakh rupees, or any other such penalty as may be specified by SEBI from time to time. The Manager shall not recover such penalty in the form of fees or any other form, payable to the Manager by the Bagmane REIT.

6. NODAL OFFICER

The Manager shall designate a Nodal Officer. Such Nodal Officer shall be the point of contact for the Unitholders entitled to claim their Unclaimed or Unpaid Amount, SEBI, stock exchanges and depositories. The details of the Nodal Officer shall be available on the website of Bagmane REIT.

7. PROCEDURE AND DOCUMENTATION REQUIRED FOR MAKING A CLAIM

Any Claimant claiming their Unclaimed or Unpaid Amount which has been (a) transferred to the Unpaid Distribution Account or (b) has been transferred to the IPEF by the Manager, shall submit details for such claim along with the specified documents in the following manner:

I. Procedure and documentation for making a claim by sole Unitholder or karta of HUF:

- (a) Claimant being a sole Unitholder or karta of a HUF shall submit following documents, duly certified by it/him/her, for claiming the Unclaimed or Unpaid Amount lying in the Unpaid Distribution Account or an amount which has been transferred to IPEF, to the Nodal Officer:
 - (i) Format of letter for submitting the claim as stipulated under **Annexure-I.**

- (ii) Details of the Distributions unclaimed in accordance with the distribution policy adopted by the Bagmane REIT) (for e.g. If distribution is not received from June, then it should be mentioned as Q1-2025 or so) in the request letter.
 - (iii) Self-attested latest Client Master Ledger (CML) stating the current bank account details from Depository Participants.
 - (iv) Copy of cancelled cheque of bank account where payment to be remitted, as mentioned in CML.
 - (v) Original Distribution Warrant/Demand Draft, as applicable (if available with the Unitholder)
 - (vi) Self-attested copy of PAN Card of the Unitholder.
 - (vii) Self-attested copy of Address Proof (for eg. Driving License, Adhaar card, passport) of the Unitholder. In case of foreigners and NRI, copy of Passport, OCI and PIO card to be provided.
- (b) Upon the receipt of the documents, the Nodal Officer or concerned department will verify the particulars of the claim submitted by the Claimant and will process them for remitting payment of Unclaimed or Unpaid Amount through electronic mode into the bank account of the Claimant within the timelines as mentioned hereinbelow in the Policy. Nodal Officer at its discretion, may call for further information/clarification with respect to the claim submitted by the Claimant.
- (c) After verifying and processing the request by the Nodal Officer or concerned department, a confirmation will be sent to the Claimant to the effect that the claim submitted by the Claimant is processed and refund of Unclaimed or Unpaid Amount has been initiated.

II. Procedure and Documentation for making a claim by the Legal Heir(s) or Nominee(s) of the deceased sole Unitholder:

1. In the event of death of the Unitholder, Legal Heir(s)/ Nominee(s) of the deceased Unitholder shall submit the following documents to the Nodal Officer:

A. In the event nomination is provided in the demat account held with depository participants

Request letter (in the format prescribed under **Annexure-II**), for claiming the Unclaimed or Unpaid Amount, along with following details of deceased Unitholder shall be submitted by the Nominee:

- (i) Copy of Permanent Account Number (PAN) of the deceased Unitholder issued by the Income Tax Department
- (ii) Address proof of the deceased Unitholder

- (iii) DP and Client ID of the deceased Unitholder
- (iv) Copy of death certificate attested by the Nominee, subject to verification with the original or copy of death certificate duly attested by a notary public or by a gazetted officer.
- (v) Self-attested copy of –
 - a) Permanent Account Number of the Nominee(s) issued by the Income Tax Department
 - b) Bank account details of Nominee where the Unclaimed or Unpaid Amount is to be transferred along with the cancelled cheque
 - c) Copy of identity proof i.e. copy of adhaar card, passport or driving license
 - d) In case of foreigners and NRI, copy of Passport, OCI and PIO card to be provided.

B. In the event no nomination is provided in the demat account held with depository participants.

- (a) Request letter (in the format prescribed under **Annexure-II**), for claiming the Unclaimed or Unpaid Amount along with following details of deceased Unitholder shall be submitted by the Legal Heir:
 - (i) Copy of Permanent Account Number (PAN) of the deceased Unitholder issued by the Income Tax Department
 - (ii) Address proof of deceased Unitholder
 - (iii) DP and Client ID of deceased Unitholder
 - (iv) Copy of death certificate attested by the Legal Heir(s), subject to verification with the original or copy of death certificate duly attested by a notary public or by a gazetted officer.
 - (v) self-attested copy of the Permanent Account Number card of the Legal Heir(s), issued by the Income Tax Department.
 - (vi) Notarized Affidavit (in the format prescribed under **Annexure-IIA**) from the Legal Heir(s) made on the non-judicial stamp paper of appropriate value, to the effect of identification and claim of legal ownership to the Units.

However, in case the Legal Heir(s) are named in succession certificate or probate of will or will or letter of administration as may be applicable in terms of Indian Succession Act, 1925 (39 of 1925) or legal heirship certificate or its equivalent certificate issued by a competent government authority, instead of affidavit from all Legal Heir(s), an affidavit from such Legal Heir(s)/Claimant(s) alone shall be sufficient.

- (vii) a copy of succession certificate or probate of will or will or letter of administration or court decree as may be applicable in terms of Indian Succession Act, 1925 (39 of 1925) or legal heirship certificate or its equivalent certificate issued by a competent government authority, attested by the Legal Heir(s)/Claimant(s) subject to verification with the original or copy of such document duly attested by a notary public or by a gazetted officer.
- (viii) In cases where a copy of will is submitted as may be applicable in terms of Indian Succession Act, 1925 (39 of 1925), then the same shall be accompanied with the following additional documents:
 - a) a notarized indemnity bond (in the format prescribed under **Annexure-IIB**) made on the non-judicial stamp paper of appropriate value from the Legal Heir(s)/Claimant
 - b) No Objection Certificate from all Legal Heir(s) in favour of Claimant
 - c) Affidavit from witness about confirmation of will wherever alive or otherwise death certificate of such witness
 - d) Affidavit with regard to the will being the last will and no matter is pending before any court with regard to such will
 - e) Surety Affidavit by at least two sureties with their PAN Card
- (ix) In cases where a copy of legal heirship certificate or its equivalent certificate issued by a competent government authority is submitted, the same shall be accompanied with the following additional documents:
 - a) a notarized indemnity bond (in the format prescribed under **Annexure-IIB**) made on the

non-judicial stamp paper of appropriate value from the Legal Heir(s)/Claimant

- b) No Objection (in the format prescribed under **Annexure-II C**) from all non-claimants (remaining legal heirs), stating that they have relinquished their rights to the claim for Unclaimed or Unpaid Amount, duly attested by a notary public or by a gazetted officer or copy of duly executed family settlement deed by all legal heirs and duly attested by a notary public or by a gazetted officer.
2. Upon the receipt of the Documents as stated above, the Nodal Officer or concerned department will verify the particulars of the claim submitted by the Legal Heir(s)/ Nominee(s), as the case may be and will process in accordance with the internal policy adopted by the Bagmane REIT for crediting the Unclaimed or Unpaid Amount into the bank account of such Claimant within the timelines as mentioned hereinbelow in the Policy. However, Nodal Officer at its discretion, may call for further information/clarification with respect to the claim submitted by the Legal Heir(s)/ Nominee(s).
3. After verifying and processing of the request by the Nodal Officer or concerned department, a confirmation will be sent to the Claimant to the effect that the claim submitted by the Legal Heir(s)/ Nominee(s) is processed and payment of Unclaimed or Unpaid Amount has been initiated.

III. When units are held in the name of joint holder(s)

1. In the event of the death of the first holder, the surviving holders shall submit following documents to the Nodal Officer:

Request letter as stipulated in **Annexure-III**, along with the following details of deceased Unitholder:
 - (i) Copy of Permanent Account Number (PAN) of the deceased Unitholder issued by the Income Tax Department
 - (ii) Address proof of deceased Unitholder
 - (iii) In case of foreigners and NRI, copy of Passport, OCI and PIO card to be provided.
 - (iv) DP and Client ID of deceased Unitholder
 - (v) Copy of death certificate of the deceased unitholder, duly attested by the surviving holders(s), which shall be subject to the verification with the original or copy of death certificate duly attested by the notary public or gazette officer.
 - (vi) Client Master Report (CML) of the demat account in the name of the surviving holder(s)

(vii) Copy of cancelled cheque for remittance of payment.

2. Upon the receipt of the documents as stated above, completed in all aspects, the Nodal Officer or concerned department will verify the particulars of the claim submitted by the surviving holder(s) and will process for crediting the unclaimed amount into the bank account of such Claimant within the timelines as mentioned hereinbelow in the Policy. However, Nodal Officer at its discretion may call for further information/clarification with respect to the claim submitted by the Claimant.
3. After verifying and processing of the request by the Nodal Officer or concerned department, a confirmation will be sent to the Claimant to the effect that the claim submitted by the surviving holder(s) is processed and payment of unclaimed or unpaid amount has been initiated.

8. **MANNER OF SUBMISSION OF CLAIM BY THE CLAIMANT**

- a) Bagmane REIT shall provide a search facility to the Unitholders, to verify the Unclaimed or Unpaid Amount due to them and lying in the Unpaid Distribution Account or transferred to IPEF. Search facility can be accessed through below path:
- b) Claimant can submit their claims along with requisite documents duly certified by it/him/her, as mentioned above, to the Nodal Officer, at the email addresses below

Company Secretary & Compliance Officer

Nodal Officer

Email ID: reitcompliance@bagmanereit.com

Address: 5th floor, B Block, Bagmane Laurel, Bagmane Tech Park, C V Raman Nagar, Bengaluru 560093

The manner of filing the formats, execution signing instructions are part of the formats annexed with this Policy. While submitting the claim, Claimant(s) need to submit the complete documents as per the format.

- c) The Nodal Officer is authorised to amend/change/alter/substitute the above formats to the extent of any changes under Applicable Law or as it may deem fit for procedural requirements or for factual changes, without any further action or approval from the Board.

9. **TIMELINES:**

I. Timelines for the Claimant.

Upon the receipt of claim from Claimant, if Nodal Officer, upon examination, finds it necessary to call for further information or finds that the claim or documents submitted by Claimant to be defective or incomplete, in any respect, then Nodal Officer shall intimate the Claimant, to furnish such other information or to rectify such defects or incompleteness of documents through email or written communication within 30 days from the date of receipt of communication sent by the Nodal Officer to the Claimant,

failing which the claim may be rejected. However, rejection of claim does not debar a Claimant from filing a fresh claim after rectifying the deficiencies.

II. Timelines within which the claim shall be processed by the Manager

The claim submitted by the Claimant shall be processed by the Nodal Officer and the payment of unclaimed amount will be processed through electronic mode into the bank account of claimant, within the 30 days from the date of receipt of Claim complete in all respects or within 30 days from the date when complete information (including additional documents, if requested) as called upon is provided by the Claimant. The claim shall be processed only subject to the documents being submitted by the claimant are in accordance with the requirements mentioned in this Policy or any other s. However, in case of claiming the Unclaimed or Unpaid Amount from the IPEF, the time limit for 30 days for processing of claim shall be from the date when the amount has been refunded by the IPEF to Bagmane REIT.

10. CONDITION OF REJECTION OF CLAIM BY NODAL OFFICER.

If the documents/clarification sought on the claim submitted by the Claimant, is not received with the timelines as specified above in the policy or the same are incorrect/ incomplete/ inadequate or cannot be verified or not in accordance with the requirements specified in this Policy, then the Nodal Officer, may reject the claim by citing the reasons for rejection, in writing (through email or physical letter) to the Claimant. However, such rejection of claim does not debar a Claimant from filing a fresh claim.

11. CONTACT DETAILS OF NODAL OFFICER.

The Nodal Officer shall be the Compliance Officer of Manager pursuant to the SEBI Circular or any other person who may be a director, chief financial officer of Bagmane REIT as may be approved and designated by the Board. The name, designation and contact details of the Nodal Officer shall be made available on the website of Bagmane REIT.

In the event, there is any change in the Nodal Officer appointed by the Manager, the Manager on behalf of Bagmane REIT shall designate another person as a Nodal Officer with immediate effect.

12. AMENDMENT OF THE POLICY

Notwithstanding the above, this Policy will stand amended to the extent of any change in Applicable Laws without any action of the Manager or approval of the Board or the Unitholders. The Board reserves the right to amend or modify this Policy, in whole or in part, from time to time, in accordance with Applicable Law, as may be required.

Annexure-I

Format for claiming Unpaid or Unclaimed Amount by sole Unitholder or Karta of HUF

Date:

To,

Compliance Officer
Bagmane Prime Office REIT
5th Floor, 'B' Block, Laurel Building
C.V. Raman Nagar, Bagmane Tech Park
Bengaluru 560 093
Karnataka, India

KFin Technologies Limited
Selenium Tower B
Plot 31 & 32, Gachibowli
Financial District,
Nanakramguda,
Serilingampally
Hyderabad 500 032
Telangana, India
Tel: +91 ;
Fax: +91
Email: cinward.ris@kfintech.com

Dear Sir,

Sub: Request for payment of Unclaimed or Unpaid Amount

I/We _____ (name of unitholder), aged ____ years, son/daughter of _____ residing at _____, [acting as karta of _____ (retain as applicable)] do solemnly declare and confirm that I/we have not received the distribution for the period/quarter as mentioned below. In this regard, I/we am/are providing the following information and enclosing the copies of the documents required to enable you to process the payment of Unclaimed or Unpaid Amount from the;

☐ Amount(s) lying under the Unpaid Distribution Account of Bagmane Prime Office REIT.

OR

☐ Amount(s) which has been transferred to Investor Protection and Education Fund (“IPEF”)

(Please tick appropriately ✓)

Name of the Unitholder			
DP Id			
Client Id			
Amount of distribution unpaid or unclaimed	Period for which distribution is unpaid or unclaimed	No. of units held	Amount unpaid
PAN No. (Self-attested)			

BAGMANE PRIME OFFICE REIT 5th floor, B Block Bagmane Tech Park, 65/2 Bagmane Laurel, C. V. Raman Nagar, Bangalore North, Bangalore- 560093, Karnataka | Tel: +91-80-40329999, Fax: +91-80-40329900 | SEBI REGISTRATION NUMBER: IN/REIT/25-26/0007 | Email reitcompliance@bagmanereit.com

Mobile No	
Email Id of the Unitholder	
Reason of Unclaimed Amount	

I, request you to credit the above distribution amount in my bank account as per details mentioned below, in lieu of original demand draft(s) issued.

Bank Name	
Account Number	
Account Type*	
IFSC Code	
MICR No.	
Name of Bank Branch	
City	
PIN	

In consideration of you having agreed to credit the distribution amount in the bank account as per the details mentioned above in my name, I hereby agree to undertake that upon having agreed to credit the above distribution amount in the bank account, I/we the undersigned applicant hereunder on behalf of myself/ ourself, my/our heirs, executors, administrators and assigns shall jointly and severally, indemnify and keep indemnified Bagmane Prime Office REIT, the Manager of Bagmane Prime Office REIT, its successors, assigns, its directors, officers, employees and unitholders and their heirs, executors and assigns, at all times, from and against any and all actions, suits, proceedings, accounts, claims and demands made, suffered or incurred, including any legal or other fees and expenses actually incurred in connection with investigating, disputing, preparing or defending any actions, claims, suits or proceedings, to which such entities/individuals may become subject to under any applicable law or otherwise consequent upon or arising, directly or indirectly, out of or on account of the said distribution amount or any part thereof or otherwise in connection with the same.

I hereby also undertake to surrender the said original Demand Draft to the Manager for cancellation, if and when the same is/are found at a later date.

I/ We am/ are enclosing the following documents along with the Claim format for remitting the payments:

1. Self-attested latest Client Master Ledger (CML) stating the current bank account details from Depository Participants.
2. Copy of cancelled cheque of bank account where payment to be remitted, as mentioned in CML.
3. Original Dividend Warrant/Demand Draft (if available with the Unitholder)
4. Self-attested copy of PAN Card of the Unitholder.
5. Self-attested copy of Address Proof (Driving License, Adhaar Card, Passport) of the Unitholder.

Signature of Unitholder:



Email:

Contact No.:

Date:

Annexure-II

Request letter in respect of claiming Unclaimed or Unpaid Amount by Legal Heir(s)/Successor(s)/Nominee(s)/Administrator(s) of the deceased Unitholder.

Date:

To,

Compliance Officer
Bagmane Prime Office REIT
 5th Floor, 'B' Block, Laurel Building
 C.V. Raman Nagar, Bagmane Tech Park
 Bengaluru 560 093
 Karnataka, India

KFin Technologies Limited
(Unit: [●])
 Selenium Tower B
 Plot 31 & 32, Gachibowli
 Financial District,
 Nanakramguda,
 Serilingampally
 Hyderabad 500 032
 Telangana, India
 Tel: +91 [●];
 Fax: +91 [●]
 Email: [inward.ris@kfintech.com]

Dear Sir/Madam,

Sub: Submission of Claim by the Legal Heir(s)/Successor(s)/Nominee(s) of the Deceased Unitholder.

Name of Claimant[#] Mr./Ms.
Name of the Guardian (<i>in case of Claimant is Minor</i>) Mr./Ms.
<i>in case the claimant is a minor</i> → Date of Birth of the minor* _____
Relationship with Minor: (Please tick appropriately ✓) <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed Guardian*:
PAN (Claimant(s)/Guardian): _____ (Please tick appropriately ✓) <input type="checkbox"/> KYC Acknowledgment attached or <input type="checkbox"/> KYC form attached
Tax Status: <input type="checkbox"/> Resident Individual <input type="checkbox"/> Resident Minor (through Guardian) <input type="checkbox"/> NRI <input type="checkbox"/> PIO <input type="checkbox"/> Other (Please tick appropriately ✓)

in case of multiple claimants, separate form duly signed by each claimant shall be provided to the Manager of Bagmane Prime Office REIT.

**Please attach relevant proof*

I/We, the claimant(s) named hereinabove, hereby inform you about the demise of the below mentioned Unitholder(s) and request you to remit the unclaimed or unpaid distribution amount held by the deceased holder(s) in my/our favor in my/our capacity as – <input type="checkbox"/> Nominee <input type="checkbox"/> Legal Heir <input type="checkbox"/> Successor to the Estate of the deceased <input type="checkbox"/> Administrator of the Estate of the deceased <input type="checkbox"/> Co-parceners of HUF (in case demise of Karta) (Please tick appropriately ✓)
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BAGMANE PRIME OFFICE REIT 5th floor, B Block Bagmane Tech Park, 65/2 Bagmane Laurel, C. V. Raman Nagar, Bangalore North, Bangalore- 560093, Karnataka | Tel: +91-80-40329999, Fax: +91-80-40329900 | SEBI REGISTRATION NUMBER: IN/REIT/25-26/0007 | Email reitcompliance@bagmanereit.com

Name of deceased holder(s)	Date of Demise**

** Please attach certified copy of Death Certificate.

Details of Unclaimed or Unpaid Amount:

Name of Deceased Unitholder	DP and Client ID of Deceased Unitholder	Period for which amount is unclaimed or unpaid	No. of Units held by Deceased Person	Amount unpaid or unclaimed	% of Claim [@]

[@] As per Nomination OR as per the Will/Probate/Succession Certificate/Letter of Administration/ Legal Heirship Certificate (or its equivalent certificate)/ Court Decree, if applicable. If no such information is provided, then the claim will be processed amongst all claimants in equal proportionate.

Contact details of the Claimant:

Mobile Number	
Telephone Number	
Email ID	
Address[^]	<div></div> <div></div> <div>City: _____ State: _____</div> <div>PIN Code: _____</div>

[^] Please note that the address will be updated as per the address on KYC form / KYC Registration Agency records.

Bank Account Details of the Claimant:

Bank Name	
Account Number	
Account Type*	
IFSC Code	
MICR No.	
Name of Bank Branch	
City	
PIN	

* Please attached the copy of cancelled cheque with claimant name printed or claimant Passbook or Bank Statement duly attested by the Bank Manager.

Additional KYC Information: (Please tick appropriately ✓)

Occupation: <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service

<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Home Maker <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others
The Claimant is <input type="checkbox"/> a Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/> Neither (Not applicable)
Gross Annual Income (₹): <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25Lacs-1 Crore <input type="checkbox"/> >1Crore

FATCA and CRS Information:

Country of Birth:		
Place of Birth:		
Nationality:		
Are you a tax resident of any country other than India? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, please mention all the countries in which you are resident for tax purposes and the associated Taxpayer Identification Number and its identification type in the column below.</i>		
<i>Country</i>	<i>Tax-Payer Identification Number</i>	<i>Identification Type</i>

Declaration and Signature of the Claimant(s)

I have attached herewith all the relevant / required documents as indicated in the Policy with respect to the claim submitted by the Legal Heir/Successor/Nominee.

I confirm that the information provided above is true and correct to the best of my knowledge and belief.

I undertake to keep Bagmane Prime Office REIT, its Manager and its Registrar and Transfer Agent informed about any changes/modification to the above information in future and undertake to provide any other additional information as may be required by them.

I hereby authorize Bagmane Prime Office REIT, its Manager and its Registrar and Transfer Agent to provide/ share any of the information provided by me including my holdings, if any in Bagmane Prime Office REIT to any governmental or statutory or judicial authorities/agencies as required by law without any obligation of informing me of the same.

In consideration of you having agreed to credit the distribution amount in the bank account as per the details mentioned above in my name, I hereby agree to undertake that upon having agreed to credit the above distribution amount in the bank account, I/we the undersigned applicant hereunder for myself/ ourself, my/our heirs, executors, administrators and assigns shall jointly and severally, indemnify and keep indemnified Bagmane Prime Office REIT, the Manager of Bagmane Prime Office REIT, its successors, assigns, its directors, officers, employees and unitholders and their heirs, executors and assigns, at all times, from and against any and all actions, suits, proceedings, accounts, claims and demands made, suffered or incurred, including any legal or other fees and expenses actually incurred in connection with investigating, disputing, preparing or defending any actions, claims, suits or proceedings, to which such entities/individuals may become subject to under any applicable law or otherwise consequent upon or arising, directly or indirectly, out of or on account of the said distribution amount or any part thereof or otherwise in connection with the same.

Place:	Signature of Claimant
Date:	

Encl:

- ☐ *Copy of Permanent Account Number (PAN) of the deceased Unitholder*
- ☐ *Address proof of the deceased Unitholder*
- ☐ *Copy of Death Certificate of the deceased holder.*
- ☐ *Copy of Birth Certificate (in case the Claimant is a minor).*
- ☐ *Copy of PAN Card of Claimant / Guardian.*
- ☐ *Address proof of Claimant*
- ☐ *KYC Acknowledgment OR KYC form of Claimant pursuant to SEBI Circular SEBI/HO/MIRSD/SECFATF/P/CIR/2023/169 dated October 12, 2023*
- ☐ *Cancelled cheque with claimant's name printed OR Claimant's Bank Statement/Passbook.*
- ☐ *Affidavits as per Annexure-IIA (if no nomination)*
- ☐ *Bond of Indemnity as per Annexure-IIB (if no nomination)*
- ☐ *NOC as per Annexure-IIC (if no nomination)*

Annexure-II A

Affidavits to be given by all to be given by all the Legal Heirs or Legal Heirs named in Succession Certificate/ Probate of Will/ Will/ Letter of Administration/ Legal Heirship Certificate (or its equivalent certificate)/Court Decree.

For claiming of Unclaimed or Unpaid Distribution, on death of Sole Unitholder where no nomination has been registered

Each Deponent (legal heir) shall sign separate Affidavits.

(To be executed on a Non-Judicial Stamp of appropriate Value and Notarized)

I, _____ (Name of Claimant), Son/Daughter of _____
residing at _____,

do hereby solemnly affirm and state on oath as follows.

That Mr./Mrs. _____ (Name of Deceased Unitholder) has the following unclaimed or unpaid Distribution Amount in his/her name as single holder:

Name of Deceased Unitholder	DP and Client ID of Deceased Unitholder	Period for which amount is unclaimed or unpaid	No. of Units held by Deceased Person	Amount unpaid or unclaimed

☐ That the aforesaid deceased Unitholder died intestate leaving behind him/her, the following persons as the only surviving heirs as per the Succession Certificate/Legal Heirship Certificate (or its equivalent certificate)/Court Decree dated _____ / according to the Law of Intestate Succession by which he/she was governed at the time of his/her death and without registering any nominee.*

OR

☐ That the aforesaid deceased holder died leaving behind the following persons as the legatees as per the Will/ Probated Will/ Letter of Administration dated _____ and without registering any nominee.*

Name of the Legal Heir(s)	Address and contact details	Age	Relation with the Deceased
1)			
2)			
3)			

A copy of the Succession Certificate/Probate of Will*/Will*/Letter of Administration*/Legal Heirship Certificate*(or its equivalent certificate)*/Court Decree* is attached herewith.*

That among the aforesaid legal heirs, Master/ Kumari. _____,
aged _____ years is a minor and is being represented by Mr./Ms.
_____ (Name of Guardian) being his/her father/mother/legal guardian.*

Signature of Deponent:

Verification

I hereby solemnly affirm and state that what is stated herein above is true and correct and nothing has been concealed therein and that we I am competent to contract and entitled to rights and benefits of the abovementioned unclaimed or unpaid distribution amount of the deceased.

Solemnly affirmed at: _____

Signature of Deponent:

Signed before me

Place:

Date :

Signature of Notary with

Official Seal of Notary & Regn. No.

** Strikethrough whichever is not applicable.*

Annexure-II B

Indemnity Bond given by all Legal Heir(s) of the deceased Unitholder including Claimant(s)

For claiming of Unclaimed or Unpaid Distribution, on death of Sole Unitholder where no nomination has been registered

(To be executed on a Non-Judicial Stamp of appropriate Value and Notarized)

I/We do hereby solemnly affirm and state on oath as follows:

That Mr./Mrs. _____ (Name of Deceased Unitholder)
has the following unclaimed or unpaid Distribution Amount in his/her name as single holder:

Name of Deceased Unitholder	DP and Client ID of Deceased Unitholder	Period for which amount is unclaimed or unpaid	No. of Units held by Deceased Person	Amount unpaid or unclaimed

That the aforesaid deceased holder died intestate on _____, without registering any nominee, leaving behind him/her the following persons as the only surviving legal heirs, according to the laws of intestate succession applicable to him/her by which he/she was governed at the time of his/her death.

Name of the Legal Heir(s)	Address and contact details	Age	Relation with the Deceased
1)			
2)			
3)			

OR

That the aforesaid deceased holder died on _____, without registering any nominee, leaving behind him/her the following persons as the only surviving legal heirs, according to the laws of testamentary succession.

Name of the Legal Heir(s)	Address and contact details	Age	Relation with the Deceased
1)			
2)			
3)			

Therefore, I/We, the Legal Heir(s)/Claimant(s) and deponent(s) herein has/have, approached _____ (Name of Bagmane Prime Office REIT/Manager of Bagmane Prime Office REIT/RTA) with a request to process the refund of claim submitted for Unclaimed or Unpaid Amount in the name of the undersigned Mr. /Ms. _____ [Name(s) of the legal heir(s)/claimant(s)], on my/our behalf, without insisting on production of a Succession **BAGMANE PRIME OFFICE REIT** 5th floor, B Block Bagmane Tech Park, 65/2 Bagmane Laurel, C. V. Raman Nagar, Bangalore North, Bangalore- 560093, Karnataka | Tel: +91-80-40329999, Fax: +91-80-40329900 | SEBI REGISTRATION NUMBER: IN/REIT/25-26/0007 | Email reitcompliance@bagmanereit.com

Certificate/ Probate of Will / Letter of Administration or any Court Order, for which we execute an indemnity as is herein contained and on relying on the information herein given by us, believing the same to be true.

In consideration therefore of my/our request to process the above claim, to the name of the undersigned Mr. /Ms. _____ [Name(s) of the legal heir(s)/claimant(s)].

I/We hereby jointly and severely agree and undertake to indemnify and keep indemnified, saved, defended, harmless, Bagmane Prime Office REIT, Manager of Bagmane Prime Office REIT and its successors and assigns for all time hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages, etc., whatsoever which they may suffer and/or incur by reason of transferring the said Unclaimed or Unpaid Amount, as herein above mentioned, at my/our request to the undersigned Mr./Ms. _____ [Name(s) of the legal heir(s)/claimant(s)], without insisting on production of a Succession Certificate / Probate of Will / Letter of Administration or any Court order.

IN WITNESS WHEREOF the said

1) Mr. /Ms. _____

(Name and signature of the witness) And

2) Mr. /Ms. _____

(Name and signature of the witness),

have hereunto set their respective hands and seals this day of _____.

Signed and delivered by the said legal heir/s.

Name the Legal Heirs	Signature of the Legal Heirs
1	
2	
3	

Signed before me

Place:

Date :

Signature of Notary with

Official Seal of Notary & Regn. No.

Annexure-II C

No Objection given by all Legal Heir(s)/Successor(s)/Nominee(s)/Administrator(s) of the deceased Unitholder in favour Claimant(s) for transfer of unclaimed or unpaid distribution in his/her name.

Format of NOC from all other Legal Heir(s) for Claimant claiming of Unclaimed or Unpaid Distribution, on death of Sole Unitholder where no nomination has been registered

[To be submitted in non-judicial stamp paper of appropriate value]

DECLARATION

I/We, the legal heir(s) of late Mr. / Ms. _____ (Name of the Deceased Unitholder) declare as follows –

- (i) That the above named deceased holder has the following unclaimed or unpaid distribution amount in his / her name as single holder:

Name of Deceased Unitholder	DP and Client ID of Deceased Unitholder	Period for which amount is unclaimed or unpaid	No. of Units held by Deceased Person	Amount unpaid or unclaimed

- (ii) That the deceased had died intestate on [D D / M M / Y Y Y Y] and without registering any nominee.

- (iii) That the following Claimant(s) has/have applied for the aforesaid unpaid or unclaimed distribution amount:

Name of the Claimant(s)	Address and contact details	Age	Relation with the Deceased
1)			
2)			
3)			

- (iv) That I / We are the legal heir(s) of the deceased holder, apart from the Claimant(s) who has/have applied for claiming the unclaimed or unpaid distribution amount as aforesaid and our details are as follows:

Name of the Legal Heirs(s)	Address and contact details	Age	Relation with the Deceased
1)			
2)			
3)			

- (v) I / we hereby declare that, I / we do not desire to make any claim in respect of the title to the aforesaid unclaimed or unpaid distribution amount held by the deceased and I / we hereby wilfully relinquish & renounce all my /our rights in respect of the aforesaid unclaimed or unpaid distribution amount and shall have no legal claim upon said unclaimed or unpaid distribution amount, in future.
- (vi) Accordingly, I / we declare that I / we have NO OBJECTION WHATSOEVER in Bagmane Prime Office REIT, processing the aforesaid unclaimed or unpaid distribution amount in favour of the Claimant(s) Mr. / Ms. _____ (Name of Claimants).
- (vii) I / we hereby state that whatever is stated herein above are true to the best of my/our knowledge and nothing has been concealed therein.

Name(s) and Signature(s) of Legal Heir(s) who are Non – Claimant(s):

- 1)
- 2)
- 3)

VERIFICATION

We hereby solemnly affirm and state that what is stated herein above is true to our knowledge and nothing has been concealed therein and that we are competent to contract and entitled to rights and benefits of the above mentioned unclaimed or unpaid distribution amount.

Solemnly affirmed at _____

Deponents (1) _____, (2) _____, (3) _____

Annexure-III

Request letter by surviving unitholder in case of demise of first holder, with which units of Bagmane Prime Office REIT were held jointly

To

Compliance Officer
Bagmane Prime Office REIT
5th Floor, 'B' Block, Laurel Building
C.V. Raman Nagar, Bagmane Tech Park
Bengaluru 560 093
Karnataka, India

KFin Technologies Limited
(Unit: [●])
Selenium Tower B
Plot 31 & 32, Gachibowli
Financial District,
Nanakramguda,
Serilingampally
Hyderabad 500 032
Telangana, India
Tel: +91 [●];
Fax: +91 [●]
Email: [einward.ris@kfintech.com]

Dear Sir,

I/We, undersigned, being the surviving holder(s), in the joint demat account, hereby request you to remit the unclaimed distribution amount in the name of second holder, due to the death of first holder on DD/MM/YYYY.

We, hereby enclosed a copy of Death Certificate of demised first holder, duly attested by the Notary Public or Gazette Officer.

Account Holder details			
Details of the Holder		Name of Joint Account Holder(s)	
First Holder			
Second Holder			
Third Holder			
DP Id			
Client Id			
Amount of distribution Unpaid or Unclaimed	Period for which distribution is Unpaid or Unclaimed	No. of units held	Amount unpaid
Mobile No			
Email Id of the Unitholder			

I, request you to credit the above distribution amount in my bank account as per details mentioned below.

Bank Name	
Account Number	
Account Type*	
IFSC Code	
MICR No.	
Name of Bank Branch	
City	
PIN	

In consideration of you having agreed to credit the distribution amount in the bank account as per the details mentioned above in my name, I hereby agree to undertake that upon having agreed to credit the above distribution amount in the bank account, I/we the undersigned applicant hereunder for myself/ourselves, my/our heirs, executors, administrators and assigns shall jointly and severally, indemnify and keep indemnified Bagmane REIT, the Manager of Bagmane REIT, its successors, assigns, its directors, officers, employees and unitholders and their heirs, executors and assigns, at all times, from and against any and all actions, suits, proceedings, accounts, claims and demands made, suffered or incurred, including any legal or other fees and expenses actually incurred in connection with investigating, disputing, preparing or defending any actions, claims, suits or proceedings, to which such entities/individuals may become subject to under any applicable law or otherwise consequent upon or arising, directly or indirectly, out of or on account of the said distribution amount or any part thereof or otherwise in connection with the same.

I hereby also undertake to surrender the said original Demand draft to the Company for cancellation, if and when the same is/are found at a later date.

I/ We am/ are enclosing the following documents along with the Claim format for remitting the payments:

I/ We am/ are enclosing the following documents along with the Claim format for remitting the payments:

1. Copy of Permanent Account Number (PAN) of the deceased Unitholder issued by the Income Tax Department
2. Address proof of deceased Unitholder
3. DP and Client ID of deceased Unitholder
4. Self-attested copy of PAN of the Claimant
5. Copy of cancelled cheque
6. Latest Client Master Ledger stating the current bank details.
7. Original Dividend Warrant/Demand Draft (if available with the Unitholder)
8. Self-attested copy of Address Proof of the Claimant

9. Death Certificate of First Joint Holder duly attested by the surviving holders(s), which shall be subject to the verification with the original or copy of death certificate duly attested by the notary public or gazette officer

Signature of Surviving Unitholder:

Name of Surviving holder(s)		
Signature		
Email:		
Contact No		
Date		
Place		