

POLICY FOR UNCLAIMED DISTRIBUTIONS OF ANZEN INDIA ENERGY YIELD PLUS TRUST

1. PREAMBLE

The Board of Directors of Edelweiss Real Assets Managers Limited (the “**Board**”), the Investment Manager (the “**Investment Manager**”) of Anzen India Energy Yield Plus Trust (the “**Trust**” or “**Anzen**”), has adopted the following policy to formulate a claims process to be followed by the unitholders of Anzen (“**Unitholders**”) in relation to unclaimed or unpaid amounts from distributions made to them by Anzen and transferred to the Unpaid Distribution Account, and subsequently, to the Investor Protection and Education Fund (“**IPEF**”) in accordance with the Securities and Exchange Board of India (Infrastructure Investment Trust) Regulations, 2014 (the “**Policy**”).

2. APPLICABILITY

This Policy is applicable to Anzen and shall be adopted and implemented through the Investment Manager.

3. OBJECTIVE AND PURPOSE

The Policy lays down the framework and process to be followed by a Claimant (as defined below) for claiming their unclaimed or unpaid distribution amount, lying in the Unpaid Distribution Account or IPEF, in accordance with Regulations 18(6)(e) and 18(6)(f) of the Securities and Exchange Board of India (Infrastructure Investment Trust) Regulations, 2014, as amended or supplemented (“**InvIT Regulations**”), read with the Securities and Exchange Board of India (“**SEBI**”) circular no. SEBI/HO/DDHS/DDHS-RAC-1/P/CIR/2023/178 on ‘*Procedural framework for dealing with unclaimed amounts lying with Infrastructure Investment Trusts (InvITs) 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**”).

4. 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 InvIT Regulations.

“**Board**” shall mean the board of directors of Edelweiss Real Assets Managers Limited.

“**Claimant**” shall mean without limitation, the following:

- 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 Anzen is held in joint demat account; or

- v. Co-parceners of HUF in case of demise of Karta, where the unit(s) of Anzen is held in the name of Hindu Undivided Family (**HUF**), who has filed a claim with Anzen in accordance with this Policy.

“Distribution” shall mean distribution made by Anzen to its Unitholders from time to time, in accordance with the InvIT Regulations and the Distribution Policy of Anzen (**“Distribution Policy”**).

“Distribution Account” means an account opened by Anzen with a scheduled bank, for making distribution to the Unitholders, in accordance with the InvIT Regulations and the Distribution Policy.

“IPEF” shall mean the Investor Protection and Education 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 chief financial officer or company secretary and/or compliance officer or any director of the Investment 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.

“RTA / RTA Agent” shall mean the Registrar and Transfer Agent appointed by the Investment Manager of Anzen.

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

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

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

“Unpaid Distribution Account” shall mean the Distribution Account, for each period respectively for which distribution is made, opened with a scheduled bank, which is re-designated to unpaid distribution account within 7 working days from the expiry of period of 15 days from declaration of distribution by Anzen.

“Working Day” shall mean any day other than the second and fourth Saturday of the relevant month, a Sunday or a public holiday or a day on which scheduled commercial banks are authorized or obligated by law to close in Mumbai, India.

5. TRANSFER OF UNCLAIMED OR UNPAID AMOUNT TO UNPAID DISTRIBUTION ACCOUNT

- i. Where a distribution has been made by Anzen, through its Investment Manager, but the payment to Unitholders has remained unpaid or unclaimed for a period of up to 15 days from the date of such declaration, the Investment Manager shall within 7 Working Days from the date of expiry of such period of 15 days, transfer such unclaimed or unpaid amount to Unpaid Distribution Account; and
- ii. In the event that any amount transferred to the Unpaid Distribution Account in accordance with the above, 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, wherein such interest shall be accrued in case of default and for the period of default, as given in para 6 below shall be transferred by the Investment 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.

6. CONSEQUENCES IN CASE OF DEFAULT

In case any default is made in transferring the Unclaimed or Unpaid Amount to the Unpaid Distribution Account, Anzen shall pay an interest on the amount that has not been transferred to the Unpaid Distribution Account, for the period of default, being, from the date of default till the date of transfer of the Unclaimed or Unpaid Amount 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 Investment Manager shall not recover such interest in the form of fees or any other form payable to the Investment Manager by Anzen.

7. NODAL OFFICER

The Investment 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 Anzen.

In the event that there is any change in the Nodal Officer appointed by the Investment Manager, the Investment Manager on behalf of Anzen shall designate another person as a Nodal Officer within 15 days or within such timelines as may be specified by SEBI from time to time, of such change.

8. SEARCH FACILITY FOR THE UNITHOLDERS

In case if there is any Unclaimed or Unpaid Amount at Anzen level, the Investment Manager shall provide a search facility on the website of Anzen for the Unitholders to verify if there is any Unclaimed or Unpaid Amount due to them and lying in the Unpaid Distribution Account of Anzen or the IPEF based on a search criteria as prescribed under

the InvIT Regulations and the circulars, guidelines, rules issued thereunder.

9. PROCEDURE AND DOCUMENTATION REQUIRED FOR MAKING A CLAIM

Any Claimant claiming their Unclaimed or Unpaid Amount which (a) is lying in the Unpaid Distribution Account or (b) has been transferred to the IPEF by the Investment 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 Unitholder or Karta of HUF:

- (a) Claimant being a Unitholder or Karta of an HUF shall submit the following documents, duly certified by it/him/ her, to the Nodal Officer for claiming the Unclaimed or Unpaid Amount lying in the Unpaid Distribution Account or an amount which has been transferred from the Unpaid Distribution Account to the IPEF:
 - (i) Information in the format of the letter provided herein as **Annexure-I**, for submitting the claim.
 - (ii) Request Letter containing details of the unclaimed distributions for the respective quarter(s) (for e.g. If distribution is not received for the April - June quarter of FY 2022-23, then it should be mentioned as Q1- FY 2022-23).
 - (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 is to be remitted, as mentioned in CML.
 - (v) Original Distribution Warrant/Demand Draft (if the validity period of the DD is not expired)
 - (vi) Self-attested copy of Permanent Account Number (PAN) of the Claimant issued by the Income Tax Department of India.
 - (vii) Self-attested copy of Address Proof (for e.g. Driving License, Adhaar card, passport) of the Unitholder. In case of foreigners and Non-Resident Indian (NRI), copy of Passport, Overseas Citizen of India (OCI) or Person of Indian Origin (PIO) card to be provided.
 - (viii) In case of non-individual unitholders, requisite documents evidencing the authorization to the person who is claiming the Unclaimed amount on behalf of such unitholder for example power of attorney, board resolution or letter of authority.
- (b) Upon the receipt of the documents, the Nodal Officer or the concerned department or the RTA will verify the particulars of the claim submitted by the Claimant and will process the claim in accordance with the internal policy adopted by Anzen for remitting payment of Unclaimed or Unpaid Amount through electronic mode into the bank account of the Claimant within the timelines as specified in the Policy. Nodal Officer/ concerned department/

RTA, 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 or RTA, a confirmation will be sent to the Claimant to the effect that the claim submitted by the Claimant is processed and payment of Unclaimed or Unpaid Amount has been remitted.

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

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

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 of India.
- (ii) Address proof of the deceased Unitholder.
- (iii) Depository Participant (DP) and Client ID of the deceased Unitholder.
- (iv) Copy of the Client Master Ledger (CML) of the deceased Unitholder
- (v) 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.
- (vi) 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) Identity proof of the Nominee i.e. copy of adhaar card, passport or driving license
 - d) Address Proof of the Nominee. In case of foreigners and Non-Resident Indian (NRI), copy of Passport, Overseas Citizen of India (OCI) and Person of Indian Origin (PIO) card to be provided.

(b) *In the event no nomination is provided in the demat account held with depository participants.*

- (i) 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(s):
- a) Copy of Permanent Account Number (“PAN”) of the deceased Unitholder issued by the Income Tax Department
 - b) Address proof of deceased Unitholder
 - c) Depository Participant (DP) and Client ID of deceased Unitholder
 - d) Copy of the Client Master Ledger (CML) of the deceased Unitholder
 - e) 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.
 - f) Self-attested copy of
 - 1. the PAN card of the Legal Heir(s), issued by the Income Tax Department of India.
 - 2. Bank account details of Legal heir(s) where the Unclaimed or Unpaid Amount is to be transferred along with the cancelled cheque.
 - 3. Identity proof of the Legal heir(s) i.e. copy of adhaar card, passport or driving license.
 - 4. Address Proof of the Legal heir(s). In case of foreigners and Non-Resident Indian (NRI), copy of Passport, Overseas Citizen of India(OCI) and Person of India Origin (PIO) card to be provided.
 - g) 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.)

- h) a copy of the succession certificate or probate of 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.
- i) 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:
1. 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
 2. No Objection Certificate from all Legal Heir(s) in favour of Claimant
 3. Affidavit from witness about confirmation of will wherever alive or otherwise death certificate of such witness
 4. Affidavit confirming the will as the last will and that no litigation is pending before any court with regard to such will
 5. Surety Affidavit by at least two sureties with their PAN Card
- j) In cases where a copy of the 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:
1. a notarized indemnity bond from the Legal Heir(s)/Claimant (in the format prescribed under **Annexure-IIB**) made on non-judicial stamp paper of appropriate value
 2. No Objection (in the format prescribed under **Annexure-IIC**) from all non-claimants (including 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.
- (c) Upon the receipt of the documents as stated above, the Nodal Officer or concerned department or RTA will verify the particulars of the claim submitted by the Legal Heir(s)/ Nominee(s), as the case may be and will be processed in accordance with the internal policy adopted by Anzen 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 or concerned department or RTA at its discretion, may call for further information/clarification with respect to the claim submitted by the Legal Heir(s)/ Nominee(s).

- (d) After verifying and processing the documents and information requested by the Nodal Officer or concerned department or RTA, a confirmation will be sent to the Claimant confirming that the claim submitted by the Legal Heir(s)/ Nominee(s) is processed and payment of the Unclaimed or Unpaid Amount has been initiated.

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

- (a) 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 the deceased Unitholder:

- (i) Copy of PAN of the deceased Unitholder issued by the Income Tax Department
 - (ii) Address proof of deceased Unitholder
 - (iii) In case of foreigners and Non-Resident Indian (NRI), copy of Passport, Overseas Citizen of India (OCI) and Person of Indian Origin (PIO) card to be provided.
 - (iv) Depository Participant (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) Original Distribution Warrant/Demand Draft (if the validity period of the DD is not expired)
 - (vii) Client Master Report (“CML”) of the demat account in the name of the surviving holder(s)
 - (viii) Copy of cancelled cheque for remittance of payment.
- (b) Upon the receipt of the documents as stated above, completed in all aspects, the Nodal Officer/or concerned department or RTA will verify the particulars of the claim submitted by the surviving holder(s) and will process the claim to initiate the crediting of the unclaimed amount into the bank account of such Claimant within the timelines as specified in this Policy. However, the Nodal Officer or concerned department or RTA 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 received by the Nodal Officer or concerned department or RTA, a confirmation will be sent to the Claimant confirming that the claim submitted by the survivingholder(s) is processed and payment of Unclaimed or Unpaid amount has been initiated.

10. MANNER OF SUBMISSION OF CLAIM BY THE CLAIMANT

- a) Claimant(s) can submit their claims along with requisite documents duly certified by them, as mentioned above, to the Nodal Officer, at the email id InvITinvestorgrievances@edelweissalts.com and by sending the hard copy of the same at the Registered Office of the Investment Manager.

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

- b) 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 and/or its Committee.

11. TIMELINES:

I. Timelines for the Claimant.

Upon the receipt of claim from Claimant, if Nodal Officer or concerned department or RTA, 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 or concerned department or RTA 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 or concerned department or RTA 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 Investment Manager.

The claim submitted by the Claimant shall be processed by the Nodal Officer or concerned department or RTA 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 statutory requirement.

12. CONDITION OF REJECTION OF CLAIM

If the documents/clarification sought on the claim submitted by the Claimant, is not received within the timelines as specified in the Policy or the same are incorrect/ incomplete/ inadequate or cannot be verified in accordance with the requirements specified in this Policy, then the Nodal Officer or concerned department or RTA, 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.

13. PRESERVATION OF INFORMATION

Anzen shall preserve the information pertaining to the unclaimed amounts of the Unitholders including relevant documentation for such period as prescribed under the InvIT Regulations and the circulars, guidelines, rules or notifications issued thereunder.

14. CONFLICT WITH APPLICABLE LAW

The Policy shall not contradict with the provisions of any applicable law. In case of any discrepancy, the provisions of Applicable Law shall prevail over the provisions of this Policy.

15. AMENDMENT

- i. Any amendment or variation to this Policy shall be approved by the board of directors of the Investment Manager and undertaken in compliance with the InvIT Regulations and Applicable Law.
- ii. Notwithstanding the above, this Policy will stand amended to the extent of any change in Applicable Law, including any amendment to the InvIT Regulations, without any action from the Investment Manager or approval of the unitholders Anzen.

Adopted by the board of directors of Edelweiss Real Assets Managers Limited on behalf of the Anzen on March 27, 2024.

Annexure-I

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

Date:

To,
Nodal Officer,
Edelweiss Real Assets Managers Limited
(Acting in its capacity as the Investment Manager to Anzen India Energy Yield Plus Trust)
Plot no 294/3, Edelweiss House, off CST Road, kalina,
Santacruz East Mumbai 4000098

Email id: InvITinvestorgrievances@edelweissalts.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 Anzen India Energy Yield Plus Trust (“Anzen”).

OR

- Amount(s) which has been transferred to Investor Protection and Education Fund (“IPEF”)(Please tick appropriately ✓)

Name of the Unitholder			
DPI 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)			
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 Anzen, the Investment Manager of Anzen, 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 Investment 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 Distribution Warrant/Demand Draft (if the validity period of DD is not over)
4. Self-attested copy of PAN Card of the Unitholder.
5. Self-attested copy of Address Proof (for e.g. Driving License, Adhaar card, passport) of the Unitholder. In case of foreigners and Non Resident Indian (NR), copy of Passport, Overseas Citizen of India (OCI) and Person of Indian Origin (PIO) card to be provided.
6. In case of non-individual unitholders, requisite documents evidencing the authorization to the person who is claiming the Unclaimed amount on behalf of such unitholder for

example Power of Attorney, Board Resolution or Letter of Authority.

Signature of Unitholder:

Email: Contact No.:Date:

Copy to:

KFIN Technologies Limited
Selenium, Tower B, Plot No. 31 and 32,
Financial District, Nanakramguda,
Serilingampally, Hyderabad
Rangareddi 500 032, Telangana, India
Tel.: +91 40 6716 2222
E-mail: anzen.invitpp@kfintech.com

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,
Nodal Officer,
Edelweiss Real Assets Managers Limited
(Acting in its capacity as the Investment Manager to Anzen India Energy Yield Plus Trust)
Plot no 294/3, Edelweiss House, off CST Road, kalina,
Santacruz East Mumbai 4000098

Email id:InvITinvestorgrievances@edelweissalts.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 Investment Manager of Anzen India Energy Yield Plus Trust ("Anzen").

*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 -	
<ul style="list-style-type: none"> Nominee Legal Heir Successor to the Estate of the deceased Administrator of the Estate of the deceased Co-parceners of HUF (in case demise of Karta) (Please tick appropriately ✓)	
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 distribution is unpaid or unclaimed	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[^]	<hr/> <hr/> <hr/> City: _____ State: _____ PIN Code: _____

[^] 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>

<i>Declaration and Signature of the Claimant(s)</i>
<p>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.</p> <p>I confirm that the information provided above is true and correct to the best of my knowledge and belief.</p> <p>I undertake to keep Anzen, its Investment 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.</p> <p>I hereby authorize Anzen, its Investment Manager and its Registrar and Transfer Agent to provide/ share any of the information provided by me including my holdings, if any in Anzen to any governmental or statutory or judicial authorities/agencies as required by law without any obligation of informing me of the same.</p> <p>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 Anzen, the Investment Manager of Anzen, 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.</p>

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 the Client Master Ledger (CML) of the deceased Unitholder.
- Copy of Birth Certificate (in case the Claimant is a minor).
- Copy of PAN Card of Claimant / Guardian.
- Address proof of Claimant

- Identity 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)*

Copy to:

KFIN Technologies Limited

Selenium, Tower B, Plot No. 31 and 32,

Financial District, Nanakramguda,

Serilingampally, Hyderabad

Rangareddi 500 032, Telangana, India

Tel.: +91 40 6716 2222

E-mail: anzen.invitpp@kfintech.com

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 distribution is unpaid or unclaimed	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 distribution is unpaid or unclaimed	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 Anzen India Energy Yield Plus Trust/ Investment Manager of Anzen/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 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 severally agree and undertake to indemnify and keep indemnified, saved, defended, harmless, Anzen, Investment Manager of Anzen 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 distribution is unpaid or unclaimed	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 Anzen India Energy Yield Plus Trust, 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 Anzen India Energy Yield Plus Trust were held jointly

To,
Nodal Officer,
Edelweiss Real Assets Managers Limited
(Acting in its capacity as the Investment Manager to Anzen India Energy Yield Plus Trust)
Plot no 294/3, Edelweiss House, off CST Road, kalina,
Santacruz East Mumbai 4000098

Email id: InvITinvestorgrievances@edelweissalts.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/ ourself, my/our heirs, executors, administrators and assigns shall jointly and severally, indemnify and keep indemnified Anzen, the Investment Manager of Anzen, 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 Distribution Warrant/Demand Draft (if the validity period of the DD is not expired)
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		

Copy to:

KFIN Technologies Limited
Selenium, Tower B, Plot No. 31 and 32,
Financial District, Nanakramguda,
Serilingampally, Hyderabad
Rangareddi 500 032, Telangana, India
Tel.: +91 40 6716 2222
E-mail: anzen.invitpp@kfintech.com