	R CLAIMING UN	CLAIMED OR U	J NPAID DISTR I	IBUTION
AMOUNT				

Effective Date	The policy shall come into effect from March 1, 2024.
Approval Date	February 12, 2024
Approved By	Board of Directors of Brookprop Management Services Private Limited
	("Manager") in its capacity as the manager of the Brookfield India Real Estate Trust
	(the "Brookfield India REIT")
Total pages	23

1. Overview

Regulations 18(16)(e) and 18(16)(f) of the Securities and Exchange Board of India (Real Estate Investment Trust) Regulations, 2014, as amended from time to time, along with the circulars, notifications or guidelines issued thereunder ("SEBI REIT Regulations") as amended or supplemented, from time to time, specifically read with circular no. SEBI/HO/DDHS/DDHS-RAC-1/P/CIR/2023/177 dated November 8, 2023, issued by the Securities and Exchange Board of India ("SEBI" and such circular the "SEBI Circular"), requires all the Real Estate Investment Trusts registered under the SEBI REIT Regulations, to frame a policy specifying the process to be followed by unitholders for claiming their unclaimed distribution amounts ("Policy").

Accordingly, this Policy aims to ensure timely and adequate processing of all claims made by the Claimants to the Brookfield India REIT with respect to their Unclaimed or Unpaid Amount lying under the Unpaid Distribution Account or transferred to IPEF, in such a manner as defined herein below.

2. Applicability

This Policy is applicable to the Brookfield India REIT and shall be implemented by the Manager.

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 REIT Regulations.

"Board" shall mean the board of directors of the Manager.

"Brookfield India REIT" / "REIT" shall mean the Brookfield India Real Estate Trust.

"Claimant" shall include:

- (i) sole Unitholder; or
- (ii) legal heir(s) or successor(s) or nominee(s), in case of demise of sole Unitholder; or
- (iii) surviving joint Unitholders in case of demise of first joint Unitholder, where the Unit(s) of Brookfield India REIT is held in joint demat account; or
- (iv) co-parceners of HUF in case of demise of Karta, where the Unit(s) of the Brookfield India REIT is held in the name of Hindu Undivided Family (**HUF**),

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

"Distribution" shall mean the distribution made by the Brookfield India REIT from time to time, in compliance with Regulation 18(16) of SEBI REIT Regulations and Distribution Policy of the Brookfield India REIT.

- "Distribution Account" means an account opened by the Brookfield India REIT with a scheduled bank, on a quarterly basis, for making distribution to the Unitholders.
- "IPEF" shall means Investor Protection and Education Fund.
- "Manager" shall mean Brookprop Management Services Private Limited.
- "Nodal Officer" shall mean the Compliance Officer of the Brookfield India REIT appointed under the SEBI REIT Regulations, or such other person designated as such by the Manager, from time to time.
- "SEBI" shall mean Securities and Exchange Board of India.
- "Unit" shall mean an undivided beneficial interest in the Brookfield India REIT, and such Units together represent the entire beneficial interest in the Brookfield India REIT.
- "Unitholders" shall mean any person who holds any Unit of the Brookfield India REIT.
- "Unclaimed or Unpaid Amount" shall mean an amount which remains unpaid or unclaimed to the Unitholders and is liable to be transferred to Unpaid Distribution Account of the Brookfield India REIT or IPEF, as the case may be, in such a manner and time, as specified under SEBI REIT Regulations, the SEBI Circular or any other circular(s) or notification(s) issued by the SEBI, from time to time.
- "Unpaid Distribution Account" shall mean the respective quarterly Distribution Account, which is redesignated as the unpaid distribution account within 7 working days from the expiry of timelines specified under Regulation 18(16)(c) of the REIT Regulations.¹

4. A. Transfer of Unclaimed or Unpaid Amount to Unpaid Distribution Account

- (i) In terms of Regulation 18(16) of the SEBI REIT Regulations and Distribution Policy of Brookfield India REIT, the Manager shall, at least once in every quarter of the financial year, make distribution to the Unitholders of Brookfield India REIT, subject to the approval of Board and payment of such distribution shall be completed within five working days from the record date¹.
- (ii) Upon payment of distribution by the Manager acting on behalf of Brookfield India REIT, in the event the Unclaimed or Unpaid Amount remains unpaid or unclaimed by Unitholders for a period of <u>five</u> working days from record date¹, such amounts will be transferred by the Manager within 7 working days from the expiry of such period of <u>five</u> working days from the record date¹, to Unpaid Distribution Account.

¹ Pursuant to the clause 13 of the policy, the above clause 4A and definition of unpaid distribution account has been amended in accordance with the amendment made under regulation 18(16)(c) of REIT Regulations vide Securities and Exchange Board of India (Real Estate Investment Trusts) (Third Amendment) Regulations, 2024 dated September 26, 2024 and circular no. SEBI/HO/DDHS/DDHS-PoD-2/P/CIR/2024/158 dated November 13, 2024, issued by SEBI.

4. B. Transfer of Unclaimed or Unpaid Amount to IPEF

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. Designation of Nodal Officer

- (i) The Manager shall designate the Nodal Officer, to act as the point of contact for the Unitholders entitled to claim their Unclaimed Amounts, SEBI, stock exchanges and depositories. The details of the Nodal Officer including their name, designation and contact details shall be displayed on the website of the Brookfield India REIT.
- (ii) The Nodal Officer of the Brookfield India REIT is authorised to amend/change/alter/substitute the clauses and formats in this Policy, to the extent of any changes made under Applicable Law or as he/she may deem fit for procedural requirements or for factual changes, without any further action or approval from the Board.
- (iii) In case there is a change in the Nodal Officer due to any reason, the Board shall designate another person as a Nodal Officer as per Applicable Law. .

6. Formats in which claim to be submitted by the Unitholder or Claimant

<u>S. No</u>	<u>Particulars</u>	Formats
A	For Sole Unitholder.	
	Format of claim for Sole Unitholder for claiming unclaimed or unpaid	Annexure-I
	lying in the Unpaid Distribution Account of Brookfield India REIT or	
	transferred to IEPF by the Brookfield India REIT	
В	For Nominee(s) of the deceased Sole Unitholder.	
	Request letter for Nominee(s) as mentioned in the demat account held	Annexure-II
	with the Depository Participants by the deceased unitholder, for	
	claiming unclaimed or unpaid lying in the Unpaid Distribution Account	
	of Brookfield India REIT or transferred to IEPF by the Brookfield India	
	REIT.	
C	For Legal Heir(s)/Successor(s)/Administrator(s) of the deceased	
	Sole Unitholder and where no nomination has been made by	
	deceased Unitholder.	
	Request letter from legal heir(s)/successor(s)/administrator(s) of the	Annexure-II
	deceased Unitholder, for claiming unclaimed or unpaid lying under the	
	Unpaid Distribution Account of Brookfield India REIT or transferred	
	into IEPF by the Brookfield India REIT, where no nomination has been	
	made by deceased Unitholder in the records of Depository Participants.	
	Format of Affidavit from Legal heir/Successor	Annexure-IIA
	Format of Indemnity Bond from Legal heir/Successor	Annexure-IIB
	Format of No Objection Certificate from Legal heir/Successor	Annexure-IIC
D	For Surviving Joint Unitholders, in case of Joint Demat Account.	
	Request letter by surviving unitholder in case of demise of Unitholder,	Annexure-III
	with whom units of Brookfield India REIT were held jointly.	

7. Procedure and Documentation for making a claim by Claimant.

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 Manager, shall submit details for such claim along with the specified documents in the following manner, and as set out in paragraph 8 below:

I. Procedure and Documentation for making a claim by the sole Unitholder:

- (a) Claimant may submit the following documents, duly certified by him/her, for claiming the unclaimed or unpaid amount lying under the Unpaid Distribution Account or an amount which has been transferred to IPEF, to the Nodal Officer of the Brookfield India REIT:
 - (i) Format of letter for submitting the claim as stipulated under *Annexure-I*.
 - (ii) Details of the distributions unclaimed for the relevant quarter (for e.g. if distribution is not received from June 2021, then it should be mentioned as Q1-2021) 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 Dividend Warrant/Demand Draft (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 Unitholder. In case of foreigners and NRI, copy of Passport, OCI and PIO card to be provided.
 - (viii) Any other document as may be required by the Nodal Officer under Applicable Law.
- (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 shall process the Claim in accordance with the internal policy adopted by the Brookfield India REIT for remitting payment of Unclaimed or Unpaid Amount through electronic mode into the bank account of the Claimant within the timelines as mentioned in this Policy or under Applicable Law. The Nodal Officer at their discretion, may call for further information/clarification with respect to the claim submitted by the Unitholder.
- (c) After verifying and processing the request by the Nodal Officer or concerned department, a confirmation will be sent to the effect that the claim submitted by the Claimant is processed and a refund of unclaimed or unpaid amount has been initiated.

II. <u>Procedure and Documentation for making a claim by the Legal Heir(s)/ Successor(s)/ Administrator(s)/Nominee(s)</u>, etc. of the deceased sole Unitholder:

- 1. In case of death of the Unitholder, the Legal heir(s)/Successor(s)/Administrator(s)/Nominee(s), etc. of deceased Unitholder shall submit the following documents to the Nodal Officer of the REIT as follows:
- A. <u>IN THE EVENT NOMINATION IS PROVIDED IN THE DEMAT ACCOUNT HELD</u> <u>WITH DEPOSITORY PARTCIPANTS.</u>

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

- (i) copy of the PAN of deceased Unitholder;
- (ii) Address proof of deceased Unitholder;
- (iii) DP and Client ID of 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:
 - -Permanent Account Number of the Nominee(s) issued by the Income Tax Department; and
 - -Bank Account details of Nominee where the amount of unclaimed is to be transferred along with the cancelled cheque;
 - -Copy of Identity proof i.e. Copy of Adhaar card, Passport, Driving license etc.
 - -In case of foreigners and NRI, copy of Passport, OCI and PIO card to be provided.

B. <u>IN THE EVENT NO NOMINATION IS PROVIDED IN THE DEMAT ACCOUNT HELD</u> <u>WITH DEPOSITORY PARTCIPANTS.</u>

Request letter (in the format prescribed under *Annexure-II*), for claiming the amount along with following details of deceased Unitholder by Legal heir/Successor.

- (i) Copy of PAN of deceased Unitholder
- (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)/successor(s)/administrator(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)/claimant(s), issued by the Income Tax Department.
- (vi) Notarized Affidavit (in the format prescribed under *Annexure-IIA*) from all the Legal heir(s)/Successor(s)/Administrator(s) 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), etc., 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 heirs, 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) etc., 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 a 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 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 etc., for indemnifying the Brookfield India REIT; and
 - Legal Heir Certificate issued by the Competent Government Authority; and
 - No Objection Certificate from all Legal Heir(s) in favour of claimant; and
 - Affidavit from witness about confirmation of Will wherever alive or otherwise death certificate of such witness; and
 - Affidavit with regard to the Will as last Will and no matter is pending before any court with regard to such Will; and
 - 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 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 etc., for indemnifying the REIT; and
 - No objection (*in the format prescribed under Annexure-IIC*) from all non-claimants (remaining legal heirs), stating that they have relinquished their rights to the claim for unclaimed distribution 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.
- (x) In cases where the value of distribution is Rs. 5,000 or less, as on date of application by the claimant, and where the documents mentioned in point no. (v), (vi) and (vii) are not available, the legal heir(s)/claimant(s) may submit the following documents:
 - 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 etc., for indemnifying the REIT; and
 - No Objection (in the format prescribed under Annexure-IIC) from all non-claimants (remaining legal heirs), stating that they have relinquished their rights to the claim for unclaimed distribution 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 Claimant and shall process the Claim in accordance with the internal policy adopted by the Brookfield India REIT for remitting payment of Unclaimed or Unpaid Amount into the bank account of such Claimant within the

timelines as mentioned in this Policy or under Applicable Law. However, Nodal Officer at its discretion may call for further information/clarification with respect to the claim submitted by the Unitholder.

3. After verifying and processing of the request by the Nodal Officer or concerned department, a confirmation will be sent to the effect that the claim submitted by the Claimant is processed and refund of unclaimed or unpaid amount has been initiated.

III. WHEN UNITS ARE HELD IN THE NAME OF JOINT HOLDER(S).

- 1. Upon the death of the Unitholder, the surviving holders shall be the persons recognized by the REIT as having any title of interest of deceased unitholder in the unclaimed distribution to have to submit following documents to the REIT or RTA of the REIT:
 - Request letter as stipulated in *Annexure-III*, along with the following details of deceased Unitholder.
 - PAN of deceased Unitholder
 - Address proof of deceased Unitholder
 - DP and Client ID of deceased Unitholder
 - Copy of Death Certificate of 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.
 - Client master report of the demat account in the name of the surviving holder(s)
 - 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 Claimant and shall process the Claim in accordance with the internal policy adopted by the Brookfield India REIT for remitting payment of Unclaimed or Unpaid Amount into the bank account of such Claimant within the timelines as mentioned in this Policy or under Applicable Law. 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 effect that the claim submitted by the Claimant is processed and refund of unclaimed or unpaid amount has been initiated.

8. Manner of Submission of Claim

A. Search facility available to Unitholders

The Brookfield India REIT has provided a search facility to the Claimant, to verify the Unclaimed or Unpaid Amount due to them and lying under the Unpaid Distribution Account of the Brookfield India REIT or transferred to IPEF. Search facility can be accessed through below path:

Brookfield India Real Estate Trust > Investors Section > Stakeholders Information > Distribution History. (Link of the Website: https://www.brookfieldindiareit.in/distribution-history#Distribution-History)

The Claimant shall make a claim once they have accessed the search facility and share a copy/screenshot of the search results along with the documents specified in Paragraph 7 above.

B. Submission of Claim

Claimant can submit their claims along with requisite documents duly certified by him/her, as mentioned above, to the Nodal Officer, at the addresses below.

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Nodal Officer

The Compliance Officer/Company Secretary **Brookfield India Real Estate Trust** Email ID: reit.compliance@brookfield.com Address: 1st Floor, Asset No. 8, Unit No. 101, Worldmark-2, Hospitality District Aerocity,

Mumbai 400083 Tel: +91 22 4918 6270;

IGI Airport, New Delhi 110037

Fax: +91 22 4918 6060

Intime

Email: bonds.helpdesk@linkintime.co.in

India

(Unit: Brookfield India Real Estate Trust)

(formerly known as Link Intime India Private

C 101, 247 Park, LBS Marg, Vikhroli (West),

Private

Limited

The manner of filing the formats, execution signing instructions, is already part of the formats included in the Annexures to this Policy. While submitting the claim, Claimant needs to submit the complete documents as per this Policy.

9. Timelines

A. Timelines for Claimant.

Upon the receipt of claim from Claimant, if the Nodal Officer, upon examination, finds it necessary to call for further information or finds the claim or documents submitted by Claimant to be defective or incomplete, in any respect, then the 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 from the Nodal Officer, failing which the claim may be rejected. However, rejection of claim does not debar a Claimant from filing a fresh claim.

B. Timelines for 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 or within 30 days from the date when complete information as called upon, is provided by the Claimant. The claim shall be processed only if the documents submitted by the Claimant are in accordance with the requirement mentioned above. However, in case of claiming the Unclaimed or Unpaid amount from the IEPF, the Manager shall process the claim within 30 days from the date when the amount has been refunded by the IPEF to the Brookfield India REIT.

10. Conditions for rejection of Claim by Nodal Officer.

The claims made by Claimants under this Policy may be rejected including if the:

- documents/clarifications sought on the claim submitted by the Claimant, are not received with (i) the timelines as specified in this Policy or under Applicable Law;
- documents/ clarifications provided by the Claimant are incorrect, incomplete, inadequate, (ii) cannot be verified or not as per the requirements under this Policy or under Applicable Law;

(iii) claim application is returned by SEBI in case of Unclaimed or Unpaid Amounts lying in the IEPF in accordance with the SEBI Circular and the Claimant does not make any attempts/makes insufficient attempts to rectify the deficiencies in the application, after being notified by the Manager, within 30 days.

In these cases, the Nodal Officer, may reject the claim by citing the reason of rejection, in writing (through email or physical letter) to the Claimant. However, the rejection of claim does not debar a Claimant from filing a fresh claim.

11. Contact Details

The Claimant may contact on the below details to check the status of their claim submitted or for any other matter related to the Distribution.

Email Id	reit.compliance@brookfield.com
Contact No.	+91 11 4929 5555

12. Consequences in case of default

- (i) In case any default is made in transferring the Unclaimed or Unpaid Amount to the Unpaid Distribution Account, Brookfield India 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 Brookfield India 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 ₹ 100,000 and in case of continuing failure, a further penalty of ₹ 500 for each day that the failure continues, subject to a maximum of ₹ 1,000,000 or any other penalty as may be specified by SEBI from time to time in this regard. The Manager shall not recover such a penalty in the form of fees or any other form, payable to the Manager by the Brookfield India REIT.

13. Amendment of the Policy

Notwithstanding the above, this Policy will stand amended to the extent of any change in Applicable Law without any action of the Manager or approval of the Board. 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 applicable.

Format in respect of Claiming Unpaid or Unclaimed Amount by sole Unitholder.

Date:			
To,			
Nodal Officer Brookfield India Real Estate To 1st Floor, Asset No. 8, Unit No. 2 Worldmark-2, Hospitality District Airport, New Delhi 110037 Tel: +91 11 4929 5555 Email: reit.compliance@brookfie	rust 101, (ct Aerocity, IGI 101, (ct Aeroc	known as Link Intime Unit: Brookfield Ind	S Marg, Vikhroli (West),
Dear Sir,			
Sub: Request for payment of	Unclaimed or Un	paid Amount	
residing solemnly declare and confirm the mentioned below. In this regard, copies of the documents required Distribution amount from the; ☐ Amount(s) lying under the U ☐ Amount(s) which has been to the declaration of the	nat I/we have not not not in I/we am/are provided to enable you to the Inclaimed Distribut	iding the following info process the payment ion Account of the Bro	formation and enclosing the street of Unclaimed or Unpaid pokfield India REIT.
Name of the Unitholder			
DP Id			
Client Id			
Amount of distribution Unpaid or Unclaimed	Quarter Ended	No. of units held	Amount unpaid
PAN No. (Self-attested)			
Mobile No			
Email Id of the Unitholder			
Reason of Unclaimed			

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/ we 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 hereby jointly and severally indemnify and keep indemnified Brookfield India REIT, the Manager of Brookfield India REIT, its successors and assigns, its estate and effects, and its directors, managers, secretaries and unitholders and their heirs, executors and assigns from and against all actions, suits, proceedings, accounts, claims and demands whatsoever for or on account of the said distribution amount or any part thereof or otherwise in connection with the same, and from and against all losses, costs, claims, actions, demands, risks, charges, expenses, damages and losses arising in any manner howsoever.

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:

- 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 CMI
- 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 (for eg. Driving License, Adhaar card, passport) of Unitholder.

Signature of unitholder:	
Email:	
Contact No.:	
Date:	

Request Letter in respect of Claiming Unclaimed Amount by Legal Heir(s)/Successor(s)/Nominee(s)/Administrator(s) of the deceased Unitholder.

Date:	
To,	
Nodal Officer Brookfield India Real Estate Trust 1st Floor, Asset No. 8, Unit No. 101, Worldmark-2, Hospitality District Aerocity, IGI Airport, New Delhi 110037 Tel: +91 11 4929 5555 Email: reit.compliance@brookfield.com	MUFG Intime India Private Limited (formerly known as Link Intime India Private Limited) (Unit: Brookfield India Real Estate Trust) C 101, 247 Park, L B S Marg, Vikhroli (West), Mumbai 400083 Tel: +91 22 4918 6270; Fax: +91 22 4918 6060 Email: bonds.helpdesk@linkintime.co.in
Dear Sir/Madam,	
Sub: Submission of Claim by the Legal F Unitholder.	Heir(s)/Successor(s)/Nominee(s) of the Deceased
Name of Claimant#	
Mr./Ms.	
Name of the Guardian (in case of Claimant is M	inor)
Mr./Ms	
in case the claimant is a minor \rightarrow Date of Birth	of the minor*
Relationship with Minor: (Please tick appropriat	ely √)
☐ Father ☐ Mother	☐ Court Appointed Guardian*:
PAN (Claimant(s)/Guardian):	
(Dlagge tiels annuamietals: (C)	
(Please tick appropriately √) □ KYC Acknowledgment attached or □ KYC for	orm attached
Tax Status: □ Resident Individual □ Resident	
☐ PIO ☐ Other (Please tick appropriately ✓)	, , ,
# in case of multiple claimants, separate form duly signed by *Please attach relevant proof	each claimant shall be provided to Brookfield India REIT.
	reby inform you about the demise of the below mit the unclaimed distribution amount held by the pacity as –
□ Nominee □	Legal Heir
	Administrator of the Estate of the deceased
☐ Co-parceners of HUF (in case demise of Karta	a)
(Please tick appropriately √)	
Name of deceased holder(s)	Date of Demise**

^{**} Please attach certified copy of Death Certificate.

Deceased Unitholder Vear ended for which amount is unclaimed or unpaid Deceased Person Unitholder Unitholder Unitholder Vear ended for which amount is unclaimed or unpaid Unitholder Unitholder		_		1	T	
As per Nomination OR as per the Will/Probate/Succession Certificate/Letter of Administration/ Legal Heirship Certificate product of the Claimant: Contact details of the Claimant:			which amount	Deceased	unpaid or	% of Claim@
automate certificate/ Court Decree, if applicable. If no such information is provided, then the claim will be processed amongstalamant in equal proportionate. Contact details of the Claimant:			unpaid			
aunvalent certificates / Court Decree, if applicable. If no such information is provided, then the claim will be processed amongs latinated in equal proportionate. Contact details of the Claimant:						
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automate certificate/ Court Decree, if applicable. If no such information is provided, then the claim will be processed amongstalamant in equal proportionate. Contact details of the Claimant:						
City:State:						
Mobile Number Telephone Number Email ID Address City: State:			ij no such injormation is p	roviaea, inen ine ciair	n wiii be processea	amongsi aii ii
Mobile Number Telephone Number Email ID	Contact dotails	of the Claimant				
Telephone Number Email ID Address^ City: State:						
City:						
City:						
PIN Code:	Address^					
PIN Code:						
PIN Code:						
PIN Code:						
Please note that the address will be updated as per the address on KYC form / KYC Registration Agency records. Bank Name Account Number Account Type* IFSC Code MICR No. Name of Bank Branch City PIN Please attach the copy of cancelled cheque with claimant name printed or claimant Passbook or Bank Statement duly attested and Manager. Additional KYC Information: (Please tick appropriately ✓) Occupation: □ Private Sector Service □ Public Sector Service □ Government Service □ Business □ Professional □ Agriculturist □ Retired □ Home Maker □ Sture □ Forex Dealer □ Others The Claimant is □ a Politically Exposed Person □ Related to a Politically Exposed Person □ Neither (Not applicable) Gross Annual Income (₹): □ Below 1 Lac □ 1-5 Lacs □ 5-10 Lacs □ 10-25 Lacs □ 25 Lacs-1 Crore □ >1 Crore FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India? □ Yes □ No		City:		State:		
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 attach the copy of cancelled cheque with claimant name printed or claimant Passbook or Bank Statement duly attested and Manager. Additional KYC Information: (Please tick appropriately ✓) Occupation: □ Private Sector Service □ Public Sector Service □ Government Service □ Business □ Professional □ Agriculturist □ Retired □ Home Maker □ Sturular Distriction of the Claimant is □ a Politically Exposed Person □ Related to a Politically Exposed Person □ Neither (Not applicable) Gross Annual Income (₹): □ Below 1 Lac □ 1-5 Lacs □ 5-10 Lacs □ 10-25 Lacs □ 25 Lacs-1 Crore □ >1 Crore FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India? □ Yes □ No		PIN Code:				
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Account Type* IFSC Code MICR No. Name of Bank Branch City PIN						
### IFSC Code MICR No. Name of Bank Branch						
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□Forex Dealer □ Others The Claimant is □ a Politically Exposed Person □ Related to a Politically Exposed Person □ Neither (Not applicable) Gross Annual Income (₹): □ Below 1 Lac □ 1-5 Lacs □ 5-10 Lacs □ 10-25 Lacs □ 25Lacs-1 Crore □ >1Crore FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India? □ Yes □ No	Occupation:	Private Sector Servi	ce Dublic Secto	or Service □Go	vernment Serv	ice
The Claimant is □ a Politically Exposed Person □ Related to a Politically Exposed Person □ Neither (Not applicable) Gross Annual Income (₹): □ Below 1 Lac □ 1-5 Lacs □ 5-10 Lacs □ 10-25 Lacs □ 25Lacs-1 Crore □ >1Crore FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India? □ Yes □ No			Agriculturist \square	Retired \square H	lome Maker	□Student
□ Neither (Not applicable) Gross Annual Income (₹): □ Below 1 Lac □ 1-5 Lacs □ 5-10 Lacs □ 10-25 Lacs □ 25Lacs-1 Crore □ >1Crore FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India? □ Yes □ No			15 551		1.5	
Gross Annual Income (₹): □ Below 1 Lac □ 1-5 Lacs □ 5-10 Lacs □ 10-25 Lacs □ 25Lacs-1 Crore □ >1Crore FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India? □ Yes □ No			osed Person ⊔ Rela	ited to a Political	lly Exposed Pe	rson
☐ 25Lacs-1 Crore ☐>1Crore FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India? ☐ Yes ☐ No			v.1 I.a. □ 1.5 I.a.a.	O 5 10 I aaa	□ 10.25 I	
FATCA and CRS Information: Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India?	Gross Annual				□ 10-23 L	acs
Country of Birth: Place of Birth: Nationality: Are you a tax resident of any country other than India?		O ZSEAC	.s I GIOIC	U>101010		
Place of Birth: Nationality: Are you a tax resident of any country other than India?	FATCA and CI	RS Information:				
Place of Birth: Nationality: Are you a tax resident of any country other than India?	Country of Bir	rth:				
Are you a tax resident of any country other than India? ☐ Yes ☐ No	•					
	Nationality:					
If Vos places mention all the countries in which were more death for the						
If Yes, please mention all the countries in which you are resident for tax purposes and associated Taxpayer Identification Number and its identification type in the column below.						

Country	Tax-Payer Identification Number	Identification Type

Declaration and Signature of the Claimant(s)

Place:

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 Brookfield India Real Estate Trust, its Manager, 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 Brookfield India Real Estate Trust, its Manager, its Registrar and Transfer Agent to provide/ share any of the information provided by me including my holdings, if any in the Brookfield India Real Estate Trust 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/ we 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 hereby jointly and severally indemnify and keep indemnified Brookfield India REIT, the Manager of Brookfield India REIT, its successors and assigns, its estate and effects, and its directors, managers, secretaries, and unitholders and their heirs, executors and assigns from and against all actions, suits, proceedings, accounts, claims and demands whatsoever for or on account of the said distribution amount or any part thereof or otherwise in connection with the same, and from and against all losses, costs, claims, actions, demands, risks, charges, expenses, damages and losses arising in any manner howsoever.

Date:	
	Signature of Claimant
Encl:	
🗆 Copy of Death Certificate of the deceased hold	der.
Copy of Birth Certificate (in case the Claiman	t is a minor).
Copy of PAN Card of Claimant / Guardian.	,
☐ Address proof of Claimant	
☐ KYC Acknowledgment OR KYC form	of Claimant pursuant to SERI Circular
SEBI/HO/MIRSD/SECFATF/P/CIR/2023/169 a	•
☐ Cancelled cheque with claimant's name print	
<u>.</u>	ed ON Gamani 3 Dank Statement, 1 assbook.
□ Affidavits as per Annexure-IIA.	
□ Bond of Indemnity as per Annexure-IIB.	
□ NOC as per Annexure-IIC.	
•	

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)
--

[,	(Name of Claimant), Son/Daughter of							
residing at				,				
do hereby solemnly a	ffirm and state on oath	as follows.						
That Mr./Mrs	(N	ame of Deceased Unit	holder) has the fol	lowing unclaimed				
or unpaid Distribution	Amount in his/her na	me as single holder:						
Name of Deceased	DP and Client ID	Quarter and Year	No. of Units	Amount				
Unitholder	of Deceased	ended for which	held by	unpaid or				
	Unitholder	amount is	Deceased	unclaimed				
		unclaimed or	Person					
		unpaid						
	l	l	l					
☐ That the aforesaid o	deceased Unitholder d	ied intestate leaving be	ehind him/her, the	following persons				
as the only surviving l	neirs as per the Success	sion Certificate/Legal 1	Heirship Certificate	e (or its equivalent				
certificate)/Court Dec	ree dated	/ according to the I	Law of Intestate Su	ccession by which				
he/she was governed	at the time of his/her d	eath and without regis	tering any nomine	e.*				
OR								
☐ That the aforesaid	deceased holder died	eaving behind the foll	owing persons as t	the legatees as per				
the Will/ Probated Wi	ill/ Letter of Administr	ration dated and withou	ut registering any r	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 equivalent certificate)*/Court Decre	e*/ Probate of Will*/ Will*/ Letter of Administrate e* is attached herewith.	I tion*/Legal	Heirship Certificate*(or its
That among the aforesaid leg agedyears is		represe er/mother	•
		Si	gnature of Deponent:
	Verification		
	state that what is stated herein above is at we I am competent to contract and entistribution of the deceased.		_
Solemnly affirmed at:		Sig	nature of Deponent:
	Signed before me		
Place:			
Date:			
Signature of Notary with Official Seal of Notary & Ro	egn. No.		

^{*} Strikethrough whichever is not applicable.

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

<u>For claiming of Unclaimed or Unpaid Distribution, on death of Sole Unitholder where NO NOMINATION has been registered)</u>

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

has the following unc	laimed o	or unpaid Dist	ribution Amount in his	`	v	Deceased Unitholder) single holder:
Name of Deceased Unitholder	DP an of Dec Unith		Quarter and Year ended for which amount is unclaimed or unpaid	helo	of Units d by ceased cson	S Amount unpaid or unclaimed
	pplicabl	e to him/her by	y which he/she was go			ccording to the laws of time of his/her death. Relation with the Deceased
1)						
2)						
3)						
•						
That the aforesaid de	followin					g any nominee, leaving cording to the laws of
That the aforesaid de	ollowin on.	g persons as	, with			
That the aforesaid de behind him/her the testamentary succession	ollowin on.	g persons as	, withouthe only surviving le		eirs, acc	Relation with the
That the aforesaid de behind him/her the testamentary succession.	ollowin on.	g persons as	, withouthe only surviving le		eirs, acc	Relation with the

refund of claim submitted for Unclaimed or Unpa	aid Distribution Account 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 Cour	t Order, for which we execute an indemnity as is						
herein contained and on relying on the information her	rein 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 leg	al heir(s)/claimant(s)].						
I/We hereby jointly and severely agree and underta	ke to indemnify and keep indemnified, saved,						
defended, harmless, [Name of REI	Γ/Manager of REIT/RTA] and its successors and						
assigns for all time hereafter against all losses, costs, cl	aims, actions, demands, risks, charges, expenses,						
damages, etc., whatsoever which they may suffer a	nd/or incur by reason of transferring the said						
Unclaimed or Unpaid Amount, as herein above me	ntioned, 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 Wi	ll / 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 befo	re me						
DI.							
Place:							
Date:							
6							
Signature of Notary with							
Official Seal of Notary & Regn. No.							

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.

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

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

<u>aeain oj</u>	Sole U	<u>nunotaer wne</u>	re NO NOMINATIO	<u>v nas been re</u>	gistei	<u>rea)</u>
No-Objection Certific	ate froi	n all the Lega	l Heir(s).			
		<u>D</u>	ECLARATION			
I/We, the legal heir(s declare as follows –	s) of late	e Mr. / Ms		(Name of the	Dece	eased Unitholder)
(i) That the above nar in his / her name as			as the following uncla	aimed or unpa	aid di	stribution amount
Name of Deceased Unitholder	DP an of Dec Unith		Quarter and Year ended for which amount is unclaimed or unpaid	No. of Unitable held by Deceased Person	S	Amount unpaid or unclaimed
(ii)That the deceased (iii) That the following amount:	g Claim	ant(s) has/have	applied for the afores		uncla	nimed distribution
Name of the Claima	ant(s)	Address	and contact details	Age	Re	elation with the Deceased
1)						Deceased
2)						
3)						
<i>3)</i>					<u> </u>	
(iv) That I / We are the applied for claiming			deceased holder, apart paid distribution amou			

(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)				
wilfully relinquish & ren	at, I / we do not desire to m unpaid distribution amoun ounce all my /our rights in r shall have no legal claim u	t held by the espect of the	ne deceas e aforesai	ed and I / we hereby d unclaimed or unpaid
	are that I / we have NO OE processing the aforesaid un) Mr. / Ms.	nclaimed or	unpaid o	distribution amount in
(vii) I / we hereby state the knowledge and nothing	nat whatever is stated here has been concealed therein.		re true t	o the best of my/our
Name(s) and Signature(s)	of Legal Heir(s) who are N	Non – Clain	nant(s):	
1) 2) 3)				
	<u>VERIFICATIO</u>	<u>ON</u>		
We hereby solemnly affirm and nothing has been cond rights and benefits of the al	ealed therein and that we	are compete	ent to cor	ntract and entitled to
Solemnly affirmed at				
Deponents (1)	, (2)		, (3)	<u> </u>

<u>Request letter by surviving unitholder in case of demise of Unitholder, with whom units of Brookfield</u> <u>India REIT were held jointly.</u>

To Nodal Officer Brookfield India Real Estate Trust 1st Floor, Asset No. 8, Unit No. 101, Worldmark-2, Hospitality District Aerocity, IGI Airport, New Delhi 110037 Tel: +91 11 4929 5555

Email: <u>reit.compliance@brookfield.com</u>

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/YYY.

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 First Holder		Name of Joint Account Holder(s)			
Second Holder					
Third Holder					
DP Id				ı	
Client Id					
Amount of distribution Unpaid or Unclaimed	Quarter E	nded	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/we 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 hereby jointly and severally indemnify and keep indemnified Brookfield India REIT, the Manager of Brookfield India REIT, its successors and assigns, its estate and effects, and its directors, managers, secretaries and unitholders and their heirs, executors and assigns from and against all actions, suits, proceedings, accounts, claims and demands whatsoever for or on account of the said distribution amount or any part thereof or otherwise in connection with the same, and from and against all losses, costs, claims, actions, demands, risks, charges, expenses, damages and losses arising in any manner howsoever.

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. Self-attested copy of PAN
- 2. Copy of cancelled cheque
- 3. Latest Client Master Ledger stating the current bank details.
- 4. Original Dividend Warrant/Demand Draft (if available with the Unitholder)
- 5. Self-attested copy of Address Proof
- 6. Death Certificate of First Joint Holder

Signature of Surviving Unitholder:

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