Notice to Fixed Deposit Holders

Refunds to FD Holders on grounds of medical exigency, as approved by the Hon'ble Supreme Court vide its Order dated 01.02.2023 on the recommendations of Justice (Retd.) A.M. Sapre

1. List of FD Holders to whom refunds have been allowed:

It is hereby notified for the information of all such FD Holders to whom the refunds have been approved by the Hon'ble Supreme Court on the grounds of Medical Exigencies vide its order dated 01.02.2023, that payments shall be made upon submission of documents, as detailed below. The List of FD Holders who have been found eligible is attached herewith.

It may be noted that the list being uploaded now has been cleaned up to take care of multiple/ duplicate entries/ correction of names etc.

2. Procedure to be followed by the concerned FD Holders:

The following procedure shall be followed for making the said refunds:

- 2.1 The FD Holders are required to submit the following documents by two modes:
 - (a) <u>Electronic mode</u>: on the dedicated email <u>fdholdersmedicalrefunds@unitechgroup.com</u>, and
 - (b) <u>Physical mode</u>: addressed to Sh. S. R. Tiwari, Senior Executive, Commercial Division (Mob. 9871304835, Landline No. 0124-4726860) at the Corporate Office of Unitech Limited, Tower-B, Signature Towers, 13th Floor, South City-I, Gurugram-122007, latest by 01.03.2023.

Submission of the required documents in electronic mode would enable the Management to immediately start processing the cases for refund in parallel by the time physical copies of the documents are received in the Company.

- 2.2 The FD Holders are required to submit the following original documents in physical form either through Registered Post/ Courier/ or in person to the designated officer in the Commercial Accounts Division, as mentioned in para 2(1) above:
 - (i) Original Fixed Deposit Receipt (FDR);
 - (ii) One latest passport size photograph;
 - (iii) PAN Card (self-attested copy);
 - (iv) Aadhaar Card (self-attested copy);

- (v) One cancelled cheque in respect of the Bank Account in which the FD Holder intends his refund to be electronically transferred;
- (vi) Advance Receipt (in the format given in **Form-I**) for the Net Amount qua the Fixed Deposit(s); and
- (vii) Undertaking (Form-II);
- 2.3 In case the original FD receipt is lost or stolen, then a copy of the FIR to the effect and an Indemnity Bond (**Form-III**) on non-judicial stamp paper of Rs. 100/- shall be submitted.
- In case of death of one FD Holder, payment will be made to the Joint FD Holder. In case there is no Joint holder or in the event of death of both the Joint holders, payment will be made to the nominee as mentioned in Unitech records. In such cases, Death Certificate of FD Holder(s) and above documents of any surviving Joint Holder or nominee are to be submitted. In case there is no surviving FD Holder or joint Holder or Nominee, then the claimant shall provide the Registered Will or Succession Certificate in favour of the claimant, as issued by a Court of competent jurisdiction, alongwith the above mentioned documents.
- 2.3 The process of transfer of funds would start after the requisite amount has been received in the Company's Account from the Supreme Court Registry. FD Holders are requested to submit the documents at the earliest so that payments can be released expeditiously.

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Unitech Limited

Head Office: 1306-1308, 13th Floor, Tower-B,

Signature Towers, South City-I, Gurugram- 122001, Haryana, India

ADVANCE RECEIPT

(For the Refund to FD Holders on account of Medical Exigencies, in pursuance to Hon'ble Supreme Court Order dated 01.02.2023)

Received with thanks from	m Unitech	Limited,	a sum	of Rs	
(in words)
on account of Refund on the g	grounds of N	Medical Exi	gencies. I	My details a	re as under:
FD Holder's Name					
Folio Number					
FDR Numbers					
S. No. as in Unitech's List					
Bank Name (where funds are to be transferred)					
Bank Account No.					
IFSC Code					
PAN No.					
Aadhar No.					
Present Address					
Email Id					
Mobile/ Tel. No.					

Signature

(to be signed by each Claimant/ FD Holder/ Nominee) (Paste Revenue Stamp)

UNDERTAKING

I/ We,	, aged about years, son						
of/ wife of/ daughter	r of Sh,						
resident of							
do hereby solemnly affin	m and declare as under:						
and FD by Unitech Limite	igned had invested in FDR(s) bearing Folio Number issued and for a total deposited amount of Rs (in).						
·	have not been paid a partial refund of Rs) by						
-	That I had applied for refund of my/ our deposited amounts on the grounds of Medical Exigencies.						
•	That I have submitted and shall submit all the original documents, in connection with the above, to the company before receipt of FDR amount.						
-	That I undertake to refund any amount, which may be found to have been refunded to me in excess of the deposited amount.						
been concealed the civil or criminal of	That the above averments are true and correct and nothing material has been concealed therefrom. The undersigned shall be liable for any action, civil or criminal or both, if any statement or part thereof is found false or incorrect or misleading.						
Gurugram Date:	Signature (to be signed by each Claimant/ FD Holder/Nominee)						
	(Name and Address)						

Unitech Limited

Head Office: 1306-1308, 13th Floor, Tower-B,

Signature Towers, South City-I, Gurugram- 122001, Haryana, India

Indemnity Undertaking

	I, the under	rsigned, sol	emnly affi	rm and st	ate that I have lost, misplaced or
unabl	e to find	my Fixed	Deposit	Receipt	No dated
	for	r Rs			and swear that I have not
transi	ferred, pledge	ed hypothed	cated or as	ssigned th	e above FDR in any manner, and
have	not taken any	y loan or ad	lvance aga	inst the s	aid F.D.R. and state that the said
depos	sit was my ab	solute and	clear prop	erty at the	e time of such loss, misplacement
or de	struction the	ereof and n	othing sir	nce then	has happened to affect my such
absol	ute and clear	right/ title	to the amo	ount stand	ling against the said FDR.
0	In code env	alaimant	ath an than	. m a /11a	somes forward to stake alaim on
2.	•				comes forward to stake claim on of this/ these FDR(s), I/we shall
	U		•	-	and expense. Accordingly, I/We
		•			and expense. Accordingly, 1/ we ainst any such claim by any third
	•		•		lemnified against all actions and
	-				one in respect of the said FDR(s)
-	count of refu	_			-
on ac	count of Teru	ind of the sa	ia amount	to me, us	•
3.	I undertake	to return	the above	Fixed De	eposit Receipt duly discharged, if
found	l, at a later da	ite, immedi	ately to the	e Compan	y.
					Yours faithfully,
			(Ciama	tumas / NTa	one and address of the Donasiton)
Witne	200		(Signa	itures/ Na	me and address of the Depositor)
VVILII	288.				
1.	Signature	:			
	Name	:			
	Address	:			
2	Signature	:			
	Name	:			
	Address	:			