$(Declaration\ by\ Non-resident-Individual)$

From (name, address, email and contact details)

	Date
To Company Secretary EPL Limited Top Floor, Times Tower, Kamala City, Senapati Bapat Marg Lower Parel. Mumbai 400013, India	
Sub: Declaration and details for claiming lower withholding tax deduction from payment of Dividend, under Double Taxation Avoidance Agreement (DTAA)	
Ref	: Folio /DP and Client ID:
Dea	ar Sir
1	I,(Name of the shareholder) confirm that I am a tax resident of and are eligible to claim benefits of the India (country name) Double Tax Avoidance Agreement (DTAA), read with the provisions laid down in Multilateral Instrument (MLI), wherever applicable.
2	My Tax Identification Number issued by
3	I, am beneficial owner of the shares allotted in above folio number / demat account as well as of the dividend arising from such shareholding.
4	I further declare that I have the right to use and enjoy the dividend received/ receivable from the above shares and such right is not constrained by any contractual and/ or legal obligation to pass on such dividend to another person.
5	I do not have a Permanent Establishment (PE) or any fixed base in India as defined under the Income Tax Act, 1961 and DTAA between India and read with the provisions laid down in Multilateral Instruments (MLI), wherever applicable, during the financial year In the event of I would have a PE or fixed base in India., I acknowledge my obligation to inform you forthwith with necessary details.
I undertake to intimate EPL Limited immediately in case of any alteration in the aforesaid declaration including change in tax residential status, etc. I understand that based on the details, form submitted by me, the Company will decide the rate of withholding tax as per DTAA or such rate as per Indian Income Tax Act, as it think most relevant or appropriate.	
	ne above mentioned and undersigned, hereby declare that the contents above are correct, implete and truly stated.
You	ars Sincerely,
Sign Nar	
Not	e: This Declaration and details is submitted along with the Form 10.