

LETTERFORNON-RECEIPTOFDIVIDENDWARRANT

Date: _____

The Manager
CDC Shares Registrar Services Limited
CDC House, 99-B, Block –B, S.M.C.H.S,
Main Shahra-e- Faisal,
Karachi-74400.

Dear Sir,

COMPANY NAME: HI-TECH LUBRICANTS LIMITED
NON-RECEIPTOFDIVIDENDWARRANT

Please be informed that I / We have not received my / our dividend warrant issued by company for the period / year ended _____.

You are requested to kindly check and let me know the status of my dividend warrant at your earliest.

My particulars are as follows:

Folio / CDC Account #: _____

Name of Shareholder: _____

Father's / Husband's Name: _____

Address: _____

CNIC #: _____

Contact No: _____

Your early response in this regard will be highly appreciated.

Regards,

Signature of Shareholder

Encl: Photocopy of CNIC

The Director / Company Secretary,
M/s HI-TECH LUBRICANTS LIMITED
Lahore.

Dear Sir,

Letter of Indemnity for Issue of Duplicate Dividend Warrant(s)

I, _____ S/W/D of _____ Muslim, adult, residing at _____
_____ do hereby declare that dividend warrant(s) as detailed below has been lost / misplaced:

Sr. No.	Dividend Warrant #	Folio/CDS A/c #	Name of Shareholder	Amount (Rs.)	Dividend Issue #

In consideration of your issuing to me /us the duplicate dividend warrant(s) in lieu of the above warrant(s), I/We,
_____ S/W/D of _____ (Applicant) and I/We _____
S/W/D of _____ (Guarantor) do hereby declare that I/We will hold **M/s HI-TECH LUBRICANTS LIMITED**
harmless and indemnified against all claims, losses, damages, costs, charges and expenses which your company may sustain due to
issuing the duplicate dividend warrant(s).

I/We further declare that the said dividend warrant(s) have not been hypothecated, mortgaged, negotiated or dealt with in any manner
whatsoever and do hereby undertake to deliver you the original dividend warrant(s) in question if and when it comes to my/our hand at any
future date.

I/We also hereby declare that whatsoever is stated above is true to the best of my/our knowledge and nothing has been concealed.

Date this _____ day of _____ 20 ____.

WITNESSES :

(1)

Signature: _____
Name: _____
CNIC No: _____
Occupation: _____
Address: _____

Contact Tel. # _____

(2)

Signature: _____
Name: _____
CNIC No: _____
Occupation: _____
Address: _____

Contact Tel. # _____

**SIGNED AND DELIVERED BY THE
WITHIN NAMED APPLICANT:**

Signature: _____
Name: _____
CNIC No: _____
Occupation: _____
Address: _____

Contact Tel. # _____

**SIGNED AND COMPLETED
BY THE GUARANTOR:**

Signature: _____
Name: _____
CNIC No: _____
Occupation: _____
Address: _____

Contact Tel. # _____

IMPORTANT INSTRUCTIONS:

- All under noted requirements should be fully complied with; otherwise indemnity will not be accepted and returned.**
- Original, Notarized Indemnity Bond on Rs. 500/- Stamp Paper should be submitted to the Share Registrar Department of Central Depository Company of Pakistan Limited along with attested copies of valid Computerized National Identity Cards (CNIC) of Applicant(s), Guarantor and Witnesses.**
 - Applicant(s) signature must match with the specimen available in company's records, while in case of CDS account holder, his / her signature must tally with the signature appearing on his / her CNIC.**
 - Each page of Indemnity Bond must be signed by the Applicant(s) and Guarantor.**
