SHCIL & Non-SHCIL ACC					I	ESI/Error Report/ Template/2.1
Error Reporting Fo	or E-st	amping S	ystem			
Certificate Number (if any)	:	IN				
Jnique Doc Reference (if any)	:	SUBIN				
Supervisor Name complete)	:					
Supervisor ID	:					
ACC Name	:					
Branch Name	:					
City Nature of error	: : Connec	ctivity failure	•	Power failure	_ State :	ate on multiple pages □
pelow)		Jam in printe		Certificate torn		☐ (please specify
Remarks	:					
Complete description)						
First Party Name		:				
Second Party Name		:				
Amount of Stamp Duty		:				
Certificate Generation I	Date	:			Time:	
Signature of Superviso	r	:				
For Confirmation	n by A	CC Branch H	lead / Auti	horized Signatory		Affix Seal/Stamp
Request Approved By	:				Signature	Amx Seal/Stamp
Designation	:				Location :	
For Confirmation by SF	ICIL Au	thorized Off	icer			467 0 10
Request Approved By	:				Signature	Affix Seal/Stamp_
Designation	:				Location :	
For CRA Use Only						
Action:				Date :		_ Time :
Jser Name :				User ld :		
Remarks :						
Please attach PDF repor	t from s	ystem if avai	lable			Ver 2.1 Oct 2008

Please attach PDF report from system if available Fax: 022 22829045 Scan and mail: estamping@stockholding.com