NERL

Instruction Slip for Delivery on eNAM Platform

NCDEX Group Company

FOR NERL CLIENTS   (Please fill in Block Letters Only)
(To be filled in duplicate)

Application No: _____   **Date:** _____
(To be filled by RP)

Repository Participant (RP) Name: _____

R P I D | (boxes) | **Client ID** | (boxes)

Name of Client: _____
I/We request you to initiate transaction as mentioned hereunder-registered in my/our name.

eNWR Details:

| Warehouse Code | (boxes) | **Commodity Name** | |

Sr.	eNWR No.	Minimum Buyers	Allow multiple bids (Y/N)	Minimum selling price	Mandi Tax paid (Y/N)	Mandi Tax doc no	Mandi Tax Amt	Fee category (Com ID)
1								
2								
3								
4								
5								

	First Authorized Signatory	Second Authorized Signatory	Third Authorized Signatory
Name			
Signature			

---Acknowledgement Receipt--

Instruction details		RP details	
Application No		**Employee Name & Code**	
Client Name		**Designation**	
Client ID		**Sign & Stamp**	
Date & Time			