



# HISAR METAL INDUSTRIES LIMITED

REGD. Off. & Works : Near Industrial Development Colony Hisar - 125 005 (Haryana) INDIA

Ph. : 01662-220067, 220367, 220738, Fax : 91-1662-220265

E-mail : [info@hisarmetal.com](mailto:info@hisarmetal.com)

Delhi Off. Ph. : 011 - 45056727, 27354176 Fax : 011 - 43851119

Website : [www.hisarmetal.com](http://www.hisarmetal.com)

CIN-L74899HR1990PLC030937

Corporate Relationship Department  
Bombay Stock Exchange  
Phiroze Jeejeebhoy Towers  
Dalal Street  
Mumbai - 400 001  
**Scrip Code: 590018**  
(Permitted Security/BSE indonext)

Corporate Listing Department  
National Stock Exchange of India Limited  
Exchange Plaza, 5th Floor  
Plot No. C-1, G Block  
Bandra Kurla Complex, Bandra East  
Mumbai - 400051  
**Scrip Code: HISARMETAL**

**SUB:-Certificate under Regulation 54(5) for the quarter ended on 31<sup>st</sup> March 2018**

In compliance with regulations 54(5) of SEBI (Depositories and Participants ) Regulations, 1996, We enclose herewith a copy of the certificate for the quarter ended March 31,2018 as received from M/s Skyline Financial Services Pvt. Ltd., the Registrar and Share Transfer Agent of the company

This is for your kind information and records.

Warm Regards

For Hisar Metal Industries Limited

**(Vishesh Kumar Chugh )**  
**Company Secretary & Compliance Officer**



Towards Excellence

# Skyline Financial Services Pvt. Ltd.

SEBI Registered Category-1 Registrars & Share Transfer Agent

Regd. & Corp. Office : D-153A, 1st Floor, Okhla Industrial Area, Phase-I, New Delhi - 110 020

Tel. : +91-11-64732681-88, 26812682-83 E-mail : info@skylinerta.com Website : www.skylinerta.com

CIN No. : U74899DL1995PTC071324

Thursday April 05, 2018

THE MANAGING DIRECTOR

**NATIONAL SECURITIES DEPOSITORY LIMITD**

TRADE WORLD, 4<sup>TH</sup> FLOOR,

KAMALA MILLS COMPOUND,

SENAPATI BAPAT MARG,

LOWER PAREL,

MUMBAI- 400013

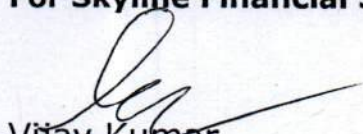
Dear Sir,

**Certificate under Regulation 54 (5) of the SEBI (Depositories and Participants) Regulations, 1996 for the quarter ended 31/03/2018**

This is to certify that the details of the securities dematerialized and rematerialized for all companies registered with us during the period mentioned above as required by Regulation 54 (5) of the SEBI (Depositories and Participants) Regulation 1996 have been furnished to all Stock Exchanges where the shares of the companies are listed.

Thanking you,

**For Skyline Financial Services Pvt. Limited**

  
Vijay Kumar  
(Authorized Signatory)





Towards Excellence

# Skyline Financial Services Pvt. Ltd.

SEBI Registered Category-1 Registrars & Share Transfer Agent

Regd. & Corp. Office : D-153A, 1st Floor, Okhla Industrial Area, Phase-I, New Delhi - 110 020

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CIN No. : U74899DL1995PTC071324

Thursday April 05, 2018

THE MANAGING DIRECTOR

**CENTRAL DEPOSITORY SERVICES (INDIA) LIMITED**

MARATHON FUTUREX, UNIT NO.2501

25<sup>TH</sup> FLOOR, A-WING MAFATLAL MILLS COMPOUND

N. M. JOSHI MARG

LOWER PAREL (EAST)

MUMBAI - 400 013

TELEPHONE NO.022-23023333

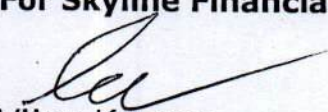
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Thanking you,


**For Skyline Financial Services Pvt. Limited**

  
Vijay Kumar

**(Authorized Signatory)**



01-2016

SHIPPER'S COPY	Customer Code					Consignee Code					NON NEGOTIABLE-AT OWNER'S RISK														
	Company	275623				Company																			
	Sender	SKYLINE FINANCIAL				Attn.	NATIONAL SECURITIES																		
	Address					Address																			
	City	D 153/A 1ST FLOOR				City	Bom																		
	Tel.	UKHLA INDUSTRIAL				Tel.					DOMESTIC PRIORITY														
	E-mail	NEW DELHI				E-mail					<table border="1"> <tr> <td>ORG</td> <td>SC</td> <td>DST</td> <td>SC</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>				ORG	SC	DST	SC							
ORG	SC	DST	SC																						
I hereby agree to the terms and conditions set forth on the reverse of this (Shipper's) copy of this non-negotiable waybill and warrant that the information contained on this waybill is true and correct.										Description DOA				Comm. Value of Consignment 		Code 099		INSURANCE <input type="checkbox"/> The Shipper has stated that: <input type="checkbox"/> He has not insured the Consignment <input type="checkbox"/> He has insured the Consignment				No. of Pkgs. ①		P/U W/I	
This shipment does not contain any cash or equivalent. If consignee fails to make any such payment(s) BDE shall be entitled to recover the same from the Shipper. Freight charge and GST shall be paid by the Shipper. Stamp duty if leviable on the waybill shall be borne by the Shipper exclusively.																				Dim (Cms) x x		Dim. Wt(kg) :			
Shipper's Signature 										1 5 3 7 6 8 8 4 6 9 2										Insurance Policy No.		Act. Wt(kg) : 0.5			
NAME 										PLEASE QUOTE THE ABOVE NUMBER IN FUTURE CORRESPONDENCE										Amount		Insurance :			
P/U 										FOG Code Cash (1) BCN/ (2) BTP (4) Code										Insurance Company		Others :			
Date 05/04 Time 										Cash Memo #										Total :		SUB PRODUCT CODE			
Ship P/U 109912 										In case this consignment contains anything of value, the company recommends insurance of the same. The company's liability on this shipment is limited to Rs. 5,000/- or cost of reconstruction whichever is lower.										GST (Rs.)		Special Instructions 131708		Any Customs, GST, duties, taxes as may be applicable on this shipment will be paid by the Consignee at the time of delivery of the shipment. BDE reserves the right of lien on any shipment till all its dues are paid in full in respect of Freight, Customs, GST, Taxes and other charges.	
Date 										BCN BTP No.										Del. Date 		Del. Emp # 		Del. Emp # 	
Sign 										Del. Date 										Del. Emp # 		Del. Emp # 		Del. Emp # 	
Name 										Del. Date 										Del. Emp # 		Del. Emp # 		Del. Emp # 	
Priority PUR # 										Del. Date 										Del. Emp # 		Del. Emp # 		Del. Emp # 	
GST No. 										Del. Date 										Del. Emp # 		Del. Emp # 		Del. Emp # 	

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SHIPPER	Customer Code		Consignee Code		NON NEGOTIABLE-AT OWNER'S RISK	
	Company		Company			
	Sender		Attn.		<b>BLUE DART</b> EXPRESS LIMITED	
	Address		Address			
	City		City			
Tel.		Tel.		<b>DOMESTIC PRIORITY</b> ORG SC DST SC No. of Pkgs. ① P/U W/I DOX-01 Non DOX-02 Dim (Cms) x x Dim. Wt(kg): Act. Wt(kg): 0.5 Amount: Insurance Company: GST (Rs.) Others: Total:		
E-mail:		E-mail:				

I hereby agree to the terms and conditions set forth on the reverse of this (Shipper's) copy of this non-negotiable waybill and warrant that the information contained on this waybill is true and correct.  This shipment does not contain any cash or equivalent. If consignee fails to make any such payment, BDE shall be entitled to recover the same from the Shipper. Freight charge and GST shall be paid by the Shipper. Stamp duty if levied on the waybill shall be borne by the Shipper exclusively.  Shipper's Signature: _____ NAME: _____ P/U: 05/04 Date: _____ Time: _____ Ship: P/U Date: _____ Emp: 109912 Sign: _____ Name: _____ Priority: PUR # _____ GST No: _____	Description: <u>DOX</u> Comm. Value of Consignment: _____      Code: <u>099</u>  <b>1 5 3 7 6 8 8 4 6 8 1</b> PLEASE QUOTE THE ABOVE NUMBER IN FUTURE CORRESPONDENCE	The Shipper has stated that: <input type="checkbox"/> He has not insured the Consignment <input type="checkbox"/> He has insured the Consignment Insurance Policy No.: _____ Amount: _____ Insurance Company: _____ GST (Rs.): _____ Cash Memo # _____ Special Instructions: <u>131709</u>
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In case this consignment contains anything of value, the company recommends insurance of the same. The company's liability on this shipment is limited to Rs. 5,000/- or cost of reconstruction whichever is lower.  FOC Code: _____      Cash: (1) BCN/ (2) BTP (4)      Credit: (3) Or Card (3) BCN/BTP No: _____      Del. Date: _____ Time: _____ Del. Emp # _____      Sign: _____ Name: _____	SUB PRODUCT CODE
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