

FORM T. R. T. D.-9
(See rule 24(1))

Form of Register of Nokar/ Agents to be maintained by the Licensee

| Serial No. | Name, address and age of the Nokar/Agent in whose name the NOKARNAMA is issued | Date of issue of NOKARNAMA | Chalan No. and date of payment of fee | Place at and purpose for which the Nokar/Agent is appointed | Remark, if any |
|------------|--|----------------------------|---------------------------------------|---|----------------|
| (1) | (2) | (3) | (4) | (5) | (6) |
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