SYNDICATE ASBA FORM

COMMON BID CUM APPLICATION FORM

HEXAGON NUTRITION LIMITED - INITIAL PUBLIC OFFER - NR

Registered and Corporate Office: 404 Global Chamber, Adarsh Nagar, Link Road, Andheri (W), Mumbai – 400 053, Maharashtra, India
Contact Person: Vedanti Swapnil Vartak, Company Secretary and Compliance Officer; **Email:** cs.hnpl@hexagonnutrition.com
Telephone: +91 22 62136710/711; **Website:** www.hexagonnutrition.com
Corporate Identity Number: U24110MH1993PLC072189

FOR NON-RESIDENTS, INCLUDING ELIGIBLE NRIS, FPIS, FVCIS AND REGISTERED MULTI LATERAL AND BILATERAL DEVELOPMENT FINANCIAL INSTITUTIONS ETC. APPLYING ON A REPATRIATION BASIS FOR BID SIZE ABOVE INR 500,000

HEXAGON NUTRITION

To,
The Board of Directors
Hexagon Nutrition Limited

100% BOOK BUILT OFFER
ISIN: INE0JUI01012
LEI No.: 3358007T4DOSDQD2HP32

Bid cum Application Form No.

MEMBERS OF THE SYNDICATE STAMP & CODE	SUB-SYNDICATE MEMBER/ REGISTERED BROKER SCSB/CDP/RTA STAMP & CODE
SUB-BROKER'S / SUB-AGENT'S STAMP & CODE	**SCSB BRANCH STAMP & CODE**
BANK BRANCH SERIAL NO.	**SCSB SERIAL NO.**

1. NAME & CONTACT DETAILS OF SOLE / FIRST BIDDER

Mr. /Ms./M/s.

Address

Email

Tel. No. (with STD code) / Mobile

2. PAN OF SOLE / FIRST BIDDER

3. BIDDER'S DEPOSITORY ACCOUNT DETAILS ☐ NSDL ☐ CDSL

For NSDL enter 8 digit DP ID followed by 8 digit Client ID / For CDSL enter 16 digit Client ID

4. BID OPTIONS

Bid Options	No. of Equity Shares Bid (In Figures) (Bids must be in multiples of Bid Lot as advertised)	PRICE PER EQUITY SHARE/ "Cut off". (Price in multiples of ₹ 1 only) (In Figures only)										"Cut off" (Please✓tick)
		Bid Price				Retail Discount			Net Price			
	8 7 6 5 4 3 2 1	4	3	2	1	3	2	1	4	3	2	1	
Option 1													☐
(OR) Option 2													☐
(OR) Option 3													☐

5. CATEGORY

☐ Non-Institutional Bidder

☐ QIB

6. INVESTOR STATUS

- ☐ Non-Resident Indian(s) (Repatration basis) - NRI
- ☐ Foreign Portfolio Investor - FPI
- ☐ All entities other than QIBs, Bodies Corporate and Individuals - NOH
- ☐ Foreign Venture Capital Investor(s) - FVCI(s)
- ☐ Registered Bilateral and Multilateral Development Financial Institutions - RBM
- ☐ Other - OTH

7. PAYMENT DETAILS [IN CAPITAL LETTERS]

PAYMENT OPTION : FULL PAYMENT ☑

Amount blocked (₹ in figures) (₹ in words)

ASBA Bank A/c No.

Bank Name & Branch

Bank Reference Number

SYNDICATE ASBA FORM

I/WE (ON BEHALF OF JOINT BIDDERS, IF ANY) HEREBY CONFIRM THAT I/WE HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS COMMON BID CUM APPLICATION FORM, THE ATTACHED ABRIDGED PROSPECTUS AND THE GENERAL INFORMATION DOCUMENT FOR INVESTING IN PUBLIC OFFERS (**"GID"**) AND HEREBY AGREE AND CONFIRM THE 'BIDDER'S UNDERTAKING' AS GIVEN OVERLEAF. I/WE (ON BEHALF OF JOINT BIDDERS, IF ANY) HEREBY CONFIRM THAT I/WE HAVE READ THE INSTRUCTIONS FOR FILLING UP THIS COMMON BID CUM APPLICATION FORM GIVEN OVERLEAF.

8A. SIGNATURE OF SOLE/ FIRST BIDDER	8B. SIGNATURE OF ASBA BANK ACCOUNT HOLDER(S) (AS PER BANK RECORDS)	8C. MEMBERS OF THE SYNDICATE / SUB - SYNDICATE MEMBER / REGISTERED BROKER / SCSB / CDP / RTA / AGENT STAMP (Acknowledging upload of Bid in Stock Exchange System)
Date : _____, 2026	I/We authorise the SCSB to do all acts as are necessary to make the application in the Offer. 1) 2) 3)	

TEAR HERE

SYNDICATE ASBA FORM

HEXAGON NUTRITION

HEXAGON NUTRITION LIMITED
INITIAL PUBLIC OFFER - NR

Acknowledgement Slip for members of the Syndicate / Sub-Syndicate Member / Registered Broker / CDP / RTA / Agent

Bid cum Application Form No.

PAN of Sole / First Bidder

DP ID / CL ID

Amount blocked (₹ in figures) | ASBA Bank A/c No.

Bank Name & Branch

Stamp & Signature of SCSB Branch / members of the Syndicate / Sub-Syndicate Member / Registered Broker / CDP / RTA / Agent

Received from Mr./Ms./M/s.

Telephone / Mobile | Email

SYNDICATE ASBA FORM

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SYNDICATE ASBA FORM

HEXAGON NUTRITION LIMITED - INITIAL PUBLIC OFFER - NR

	Option 1	Option 2	Option 3
No. of Equity Shares			
Bid Price (₹)			
Amount Blocked (₹ in figures)			

Stamp & Signature of members of the Syndicate / Sub-Syndicate Member / Registered Broker / SCSB / CDP / RTA / Agent

SYNDICATE ASBA FORM

ASBA Bank A/c No.

Bank Name & Branch

Important Note : Application made using third party ASBA Bank A/c are liable to be rejected.

Name of Sole / First Bidder

Acknowledgement Slip for Bidder

Bid cum Application Form No.

HEXAGON NUTRITION LIMITED 1

Orient Press Limited, Tel. 022-42977310

PLEASE FILL IN BLOCK LETTERS

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SYNDICATE ASBA FORM

COMMON BID REVISION FORM

HEXAGON NUTRITION LIMITED - INITIAL PUBLIC OFFER - NR

Registered and Corporate Office: 404 Global Chamber, Adarsh Nagar, Link Road, Andheri (W), Mumbai – 400 053, Maharashtra, India
Contact Person: Vedanti Swapnil Vartak, Company Secretary and Compliance Officer; **Email:** cs.hnpl@hexagonnutrition.com
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Bid cum Application Form No.

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BANK BRANCH SERIAL NO.	**SCSB SERIAL NO.**

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Mr. /Ms./M/s.

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Tel. No. (with STD code) / Mobile

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3. BIDDER'S DEPOSITORY ACCOUNT DETAILS ☐ NSDL ☐ CDSL

For NSDL enter 8 digit DP ID followed by 8 digit Client ID / For CDSL enter 16 digit Client ID

PLEASE CHANGE MY BID

4. FROM (AS PER LAST BID OR REVISION)

Bid Options	No. of Equity Shares Bid (Bids must be in multiples of Bid Lot as advertised) (In Figures) 8 7 6 5 4 3 2 1	Price per Equity Share (₹) (Price in multiples of ₹ 1/- only) (In Figures Only) Bid Price 4 3 2 1	Retail Discount 3 2 1	Net Price 4 3 2 1	(Please ✓ tick)
Option 1					☐
(OR) Option 2	OLD BID				☐
(OR) Option 3					☐

5. TO (REVISED BID)

Bid Options	No. of Equity Shares Bid (Bids must be in multiples of Bid Lot as advertised) (In Figures) 8 7 6 5 4 3 2 1	Price per Equity Share (₹) (Price in multiples of ₹ 1/- only) (In Figures Only) Bid Price 4 3 2 1	Retail Discount 3 2 1	Net Price 4 3 2 1	(Please ✓ tick)
Option 1					☐
(OR) Option 2	REVISED BID				☐
(OR) Option 3					☐

6. PAYMENT DETAILS [IN CAPITAL LETTERS]

PAYMENT OPTION : FULL PAYMENT ☑

Additional Amount Blocked (₹ in figures) (₹ in words)

ASBA Bank A/c No.

Bank Name & Branch

Bank Reference Number

SYNDICATE ASBA FORM

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HEXAGON NUTRITION LIMITED
COMMON BID REVISION FORM - INITIAL PUBLIC OFFER - NR

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Bid cum Application Form No.

PAN of Sole / First Bidder

DP ID / CL ID

REVISED BID

Additional Amount Blocked (₹ in figures) | ASBA Bank A/c No.

Bank Name & Branch

Stamp & Signature of SCSB Branch / members of the Syndicate / Sub-Syndicate Member / Registered Broker / CDP / RTA / Agent

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Received from Mr./Ms./M/s.

Telephone / Mobile | Email

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SYNDICATE ASBA FORM

HEXAGON NUTRITION LIMITED - COMMON BID REVISION FORM - INITIAL PUBLIC OFFER - NR

	Option 1	Option 2	Option 3
No. of Equity Shares		REVISED BID	
Bid Price (₹)			
Additional Amount Blocked (₹ in figures)			

Stamp & Signature of members of the Syndicate / Sub-Syndicate Member / Registered Broker / SCSB / CDP / RTA / Agent

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