



**BOSCH**

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Scrip code:500530

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Listing Department  
National Stock Exchange of India Ltd.  
Exchange Plaza, C-1, Block G  
Bandra-Kurla Complex  
Bandra (E)  
Mumbai – 400 051  
Scrip code: BOSCHLTD

22.06.2026

Dear Sir/Madam,

**Ref: Regulation 47 of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015.**

**Sub: Newspaper Publication regarding notice of loss of Share Certificate(s)**

Please find enclosed copies of the newspaper advertisement published on 21.06.26 in the Business Standard (in English) inter alia informing about the loss of Share Certificate(s).

Kindly take the same on record.

Thanking you,

Yours faithfully,  
**for Bosch Limited,**

**V Srinivasan**  
**Company Secretary & Compliance Officer**

Enclosed: as above

# Pushy product sales become tougher

**BANK-WISE.** New RBI norms make consent, disclosures and suitability central to everyday customer protection

**Kumar Shankar Roy**  
bl. research bureau

A customer applies for a loan. Along the way, an insurance cover is added. A credit card is sold as free, but the fee waiver depends on minimum spending. A mobile banking app flashes a limited-period loan offer with a countdown timer. An agent says a third-party product is "from the bank", though the bank is only a distributor. These are familiar situations for many financial consumers. The RBI's latest amendment directions on advertising, marketing and sale of financial products and services try to address precisely this grey zone between selling and mis-selling.

On June 15, 2026, RBI issued final amendment directions covering a wide set of regulated entities. These include commercial banks, small finance banks, payments banks, local area banks, regional rural banks, urban and rural co-operative banks, All India Financial Institutions, housing finance companies, and most NBFCs. However, Core Investment Companies, Account Aggregators, Non-Operative Financial Holding Companies, and NBFCs with no customer interface are excluded from these rules. The directions will come into effect from January 1, 2027. The core message is simple — Financial products cannot be pushed through confusing consent, hidden add-ons, unsuitable recommendations, misleading ads or manipulative digital design.

## CLEAR CONSENT

One of the most important changes is the focus on explicit consent (i.e. clear and specific permission). A financial product or service, whether offered by the regulated entity itself or by a third party, can be sold only with the customer's specific and informed consent.

This consent may be through a signed declaration, OTP approval, digitally recorded confirmation, or a clearly separated section in the agreement. They must also keep proof of the customer's consent for one year after that product or service relationship ends.

This matters because many customers do not always realise what they have agreed to. In loan, card or account-opening journeys, multiple products can be placed in the same form. The new rules say each product or service must be clearly listed, and the customer must have the option to choose only what is desired. The default choice for consent on any interface must be "No" or "I do not agree".

To ensure customers fully understand what they are signing, all sale documents and terms for the entity's own products must be made available in the local regional language or a language understood by the customer. Furthermore, following an application, the entity must send a secure message or email acknowledging receipt, which must contain a phone number the customer can call for any further queries.

RBI has defined mis-selling in a wider way. A sale can be treated as mis-selling if the

## MAJOR CHANGES

- Explicit consent required for all sales
- Forced bundling of products is banned
- Deceptive dark patterns are strictly prohibited

product is unsuitable for the individual customer's profile evaluated specifically at the time of sale, if correct and complete information was not provided, if consent was not explicit, or if another product was compulsorily bundled with the requested product.

Importantly, even explicit consent may not protect the seller if the product was unsuitable for the customer's profile at the time of the sale. However, basic products determined by the institution's policy to be suitable for all customers are exempt from this strict suitability profiling.

## NO FORCED ADD-ONS

The new rules also target compulsory bundling (forcing one product along with another). A regulated entity cannot make one product conditional on another product, whether its own or from a third party. For example, a customer taking a loan should not be forced to buy insurance only from the lender's preferred partner. If a product is genuinely needed as a risk mitigant, the customer must be allowed to buy it from any provider. Additionally, lenders are strictly prohibited from funding

the purchase of any product or service (whether their own or a third party's) out of the customer's sanctioned loan facility without the customer's explicit consent.

Another major area is dark patterns (app or website tricks that push users into choices). RBI has listed several examples relevant to financial services. These include false urgency, basket sneaking (adding paid extras without clear permission), confirm shaming (making users feel guilty for saying no), forced action (making users do something unnecessary to continue), subscription traps, and interface interference (design that hides or highlights choices unfairly).

There is also bait-and-switch (promising one thing but giving another), drip pricing (revealing charges only later), disguised advertisements, nagging, and trick wording.

The new rules put responsibility on regulated entities for their DSAs (direct selling agents), DMAs (direct marketing agents), sub-agents, and third-party representatives. These agents cannot mislead customers about their identity or falsely present themselves as employees of the bank or NBFC. Furthermore, any outsourced agent or third-party representative selling products inside a branch must be visually distinguishable from regular employees, including wearing clear 'on-person' identification.

To remove the root motivation for aggressive mis-selling, employees of regulated entities are barred from directly or in-

directly receiving any sales incentives or commissions from a third-party product providers. Entities must also maintain updated lists of DSAs and DMAs on their websites.

Sales calls and visits are restricted to between 09:00 hours and 19:00 hours, and visits to a customer's premises need explicit consent.

## QUESTIONS TO ASK

Before agreeing to any financial product, customers should ask basic questions: Is this product compulsory or optional? Is it from the bank or a third party? What are the fees, charges, lock-in, exit terms and penalties? Has any add-on been selected by default?

If a product appears to have been mis-sold, the customer can complain to the regulated entity within the timeline specified by the regulator. If no timeline is specified, the rules provide a 30-day window from receipt of the signed agreement. If mis-selling is established, the entity must refund the amount paid and compensate the customer for losses.

Regulated entities must also build a mechanism to seek feedback within 30 days of a sale, which may involve randomly selecting customers.

To ensure a fair and objective review, this feedback must be collected by a separate department that was not associated with selling the product.

The takeaway is clear. Saying yes to a financial product should be an informed choice, not the result of pressure, confusion or design manipulation.

## INSURANCE QUERY.



**TAPAN SINGHEL**

**I am 30 and want to increase my sum insured this year. Do I need to undergo medical tests again?**

**Aryan**

Aryan, this is a question many young policyholders are asking today, and it reflects a welcome shift in how people are thinking about health insurance. As per industry sources, medical inflation in the country is rising at approximately 13-14 per cent, which is two to three times of the pace of general inflation. With changing healthcare needs, reviewing and enhancing one's sum insured at regular intervals is both prudent and necessary.

You would be happy to know that in most cases, increasing your health insurance sum insured does not automatically mean you will have to undergo fresh medical tests, particularly at your age. The requirement for medicals is evaluated on a risk-based approach and depends on factors such as age, overall health condition, any pre-existing diseases, and the extent of the increase you are opting for. For younger and healthy individuals, insurers often allow reasonable enhancements without insisting on additional tests.

Let's go through some facts for better understanding. Under the latest IRDAI

guidelines (2024-2025), insurers are required to simplify processes, reduce unnecessary medical tests unless risk factors clearly justify them, and make preventive care more accessible. This ensures that policyholders are not subjected to any additional procedures where they are not needed.

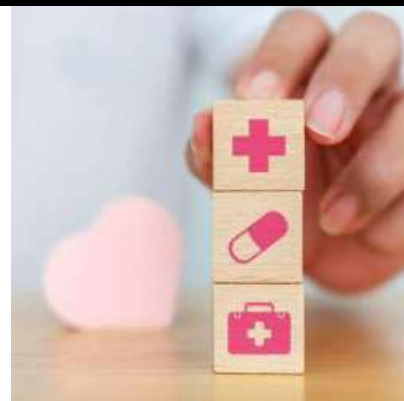
**Age-related risks:** Medical tests are usually required above a certain age, commonly post-45 years, or if you choose to opt for a significant increase in sum insured, or if you have had any pre-existing disease or discovered a disease. In other cases, and for younger and healthy individuals, insurers usually allow increases without medical tests.

**Sum insured increase:** If you are raising your cover from a modest level (e.g., ₹5 lakhs to ₹10 lakh), many insurers may not insist on tests. But for higher jumps (₹20-50 lakh or more), medical underwriting is common.

**Preventive health focus:** IRDAI's 2025 reforms emphasize preventive health check-ups and wellness programs. Many insurers now include annual check-ups in standard policies, which can serve as a substitute for fresh medicals when increasing cover.

**Government push for accessibility:** The regulator has removed age limits for health insurance, reduced waiting periods for pre-existing diseases, and mandated wider cashless networks.

**Inclusivity for high-risk conditions:** Insurers cannot deny coverage for severe conditions like cancer, heart disease, renal failure, AIDS, etc., subject to underwriting, but they



can still require medicals if risk assessment demands it.

**Steps you should take:** The first thing you can do is check your policy terms. Some insurers specify in the policy documents whether medicals are needed for sum insured enhancement and in which scenarios. Another way to increase the sum insured is through top-up or super top-up plans, which insurers may allow without fresh medical tests, especially when you already have a base policy. If medicals are required, and your policy includes annual preventive health check-ups, those reports may be accepted instead of fresh tests, provided the reports are not too old.

**Risks and considerations:** This question arises when the person is 45 years or older or has chronic conditions like diabetes, hypertension, or heart disease. In such scenarios, there is a possibility that insurers are more likely to require medicals. Also, in cases where one is increasing coverage from very

basic to very high levels, it triggers medical underwriting. Even if medicals are waived, premiums will rise proportionally with the increased sum insured.

It is also important to note that after increasing your sum insured, any waiting period for pre-existing diseases will generally apply only to the enhanced portion of the cover and not to the original sum insured. If medical tests are required, current regulations mandate insurers to bear at least 50 per cent of the cost, and in many cases, the entire cost is covered when tests are conducted at network facilities. At the same time, policyholders must ensure full and honest disclosure of any new medical conditions since the last renewal, as non-disclosure can adversely impact claims.

So, at the age of 30, if you are in good health and planning a reasonable increase in coverage, you may not need to undergo medical tests again. What is far more important is to review your health cover proactively, understand the terms clearly, and enhance it in a way that keeps pace with medical inflation. A practical approach is to reassess your sum insured every 2-3 years, depending on life events and changing health needs. A well-chosen health insurance policy is not just about meeting today's needs, but about securing long-term financial and healthcare confidence for the future.

The author is MD&CEO of Bajaj General Insurance Limited (formerly known as Bajaj Allianz General Insurance Company Limited)

## Bank FD interest rates (%)

Bank	<1 year	1 to 2 years	2 to 3 years	3 to 5 years	w.e.f
<b>FOREIGN BANKS</b>					
DBS Bank	6	6.85	6.4	6.4	May 06
Deutsche Bank	5	7	6.25	6.25	Jul 25
HSBC	4.1	5.5	5.35	5.5	Jul 17
Standard Chartered	5.75	6.6	6.5	6.5	Aug 29
<b>INDIAN: PUBLIC SECTOR BANKS</b>					
Bank of Maharashtra	5.25	6.65	5.25	5	May 27
Bank of Baroda	6	6.6	6.5	6.4	Jun 12
Bank of India	5.5	6.6	6.7	6.25	May 18
Canara Bank	5.5	6.6	6.25	6.25	Mar 17
Central Bank of India	6.5	6.7	6.25	6	Jun 10
Indian Bank	4.75	6.8	6.75	6.05	Jun 05
Indian Overseas Bank	5.5	6.6	6.4	6.1	May 15
Punjab National Bank	5.6	6.6	6.35	6.35	Jun 01
Punjab & Sind Bank	4.85	6.85	6.1	5.95	Jun 16
State Bank of India	5.9	6.45	6.4	6.3	Dec 15
UCO Bank	5	6.45	6.1	6	Apr 01
Union Bank	5.6	6.65	6.1	6	Jun 01
<b>INDIAN: PRIVATE SECTOR BANKS</b>					
Axis Bank	5.75	6.45	6.45	6.45	Jun 19
Bandhan Bank	4.20	7	7.25	7.25	Mar 25
CSB Bank	6.75	7.35	6.5	5.75	Apr 06
City Union Bank	6.25	7.25	6.5	6.25	Jun 16
DCB Bank	6.5	7.5	7.5	7.5	Jun 01
Dhanlaxmi Bank	5.25	7.1	6.5	7.25	Jun 01
Federal Bank	6	6.8	6.75	6.4	Jun 03
HDFC Bank	5.75	6.45	6.45	6.5	Mar 06
ICICI Bank	5.5	6.3	6.45	6.5	Jun 19
IDBI Bank	5.8	6.45	6.5	6.35	Feb 23
IDFC First Bank	6.5	7.35	7.35	6.75	Jun 10
IndusInd Bank	6.25	7	7	6.65	Jun 01
J & K Bank	6	6.8	7.3	6.7	Jun 11
Karnataka Bank	5.75	7	6.15	6.15	Jun 08
Kotak Bank	6	6.8	6.8	6.4	Jun 10
Karur Vysya Bank	7	7.2	6.55	6.55	Jun 08
RBL Bank	6.05	7.2	7.2	7	Sep 24
South Indian Bank	5.9	6.6	6.8	6.2	Jun 19
Tamilnad Mercantile Bank	6.5	7.25	7	6.7	Apr 10
TNSC Bank	6.85	7.6	7.1	6.85	NA
Yes Bank	6.5	7	7	6.75	Jun 02
<b>SMALL FINANCE BANKS</b>					
Equitas Small Finance Bank	6.35	7.1	7.75	8	Jun 16
ESAF Small Finance Bank	6	7.75	7.75	6	Jun 18
Jana Small Finance Bank	7	7.3	7.5	7.77	Jun 02
Suryoday Small Finance Bank	6.5	7.6	8.1	7.9	29-Mar
Utkarsh Small Finance Bank	6	8.1	7.5	7.25	May 05
Ujjivan Small Finance Bank	6	7.4	7.25	7.55	05-Jun

Data as on respective banks' website on 19 Jun 2026; For each year range, the maximum offered interest rate is considered; interest rate is for a normal fixed deposit amount below ₹1 crore. Compiled by BankBazaar.com.

## Small Savings Schemes - Interest rates

Small Savings Scheme	Interest rate (%)		Compounding frequency	
	Jan 1 - Mar 31, 2026	Apr 1 - Jun 30, 2026		
Post Office Savings Deposit	4.0	4.0	Annually	
	1 year	6.9	6.9	Quarterly
	2 year	7.0	7.0	Quarterly
	3 year	7.1	7.1	Quarterly
Post Office Recurring Deposit (5 year)	6.7	6.7	Quarterly	
	5 year	7.5	7.5	Quarterly
Senior Citizen Savings Scheme	8.2	8.2	Quarterly and paid	
Post Office Monthly Income Scheme	7.4	7.4	Monthly and paid	
National Savings Certificate	7.7	7.7	Annually	
Public Provident Fund	7.1	7.1	Annually	
Kisan Vikas Patra	7.5*	7.5*	Annually	
Sukanya Samridhi Yojana	8.2	8.2	Annually	

Note: Small savings rate as on the latest quarterly reset on March 30, 2026. \*Will mature in 115 months. Source: Department of Economic Affairs, Ministry of Finance, Govt of India.

## Bosch Limited

Registered Office: Hosur Road, Adugodi, Bengaluru - 560 030  
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CIN:L85110KA1951PLC000761

### PUBLIC NOTICE FOR LOSS OF SHARE CERTIFICATE(S)

Notice is hereby given that following equity Shares Certificate(s) of the Company have been reported as lost/misplaced and the registered Equity Shareholder's/Claimants have applied to the Company for issuance of duplicate equity share certificate(s) in accordance with applicable provisions.

Shareholder's Name and/or Claimant's (Legal Heirs) Name	Folio Number	Share Certificate Number's	Distinctive Numbers	Number of Shares of Rs.100/- each
Kalyanji Harshi Shafia (Deceased) Jointly with Nirupama Kalyanji Shafia	S03683	00087087	1837517-1837518	02

The Public is hereby warned against purchasing, transacting in or otherwise dealing with the aforesaid securities in any manner.

Any person(s) having any claim/objection or interest in respect of the said Equity Shares Certificate(s) are requested to inform by furnishing the necessary documents to Integrated Registry Management Services Pvt Ltd, the Company's Registrar to an Issue and Share Transfer Agent ("RTA"), at email ID blr@integratedindia.in or at their office No.30, Ramana Residency, 4th Cross, Malleswaram, Bengaluru, Pin-560003 or the Company at email ID secretarial.corp@in.bosch.com for further assistance.

If no claim or objection is received within 15 days from the date of publication of this notice, the Company shall proceed to issue duplicate equity shares certificates / credit of shares / issuance of the entitlement letter in accordance with applicable laws.

Please note that no claims will be accepted by the Company or the RTA with respect to original Equity Shares Certificate(s) after the issue of duplicate thereof.

**For Bosch Limited,**  
V. Srinivasan  
Company Secretary & Compliance Officer

Place: Bengaluru  
Date : 20.06.2026

## Health insurance premium tracker

For a 30-year-old male, non-smoker, sum insured of ₹10 lakh living in a metro city

Insurer	Plan name	Key features	Premium (₹)
ICICI Lombard	Elevate	OPD rider with no sub-limits. Single pvt AC Room. ₹2 lakh NCB. Unlimited Restoration of cover.	7,792
Care	Care Supreme	Guaranteed 7x increase over 5 years with rider. No Room Rent Limit. ₹15 lakh Renewal Bonus; optional Unlimited Restoration of cover.	10,838
Niva Bupa Health	Health ReAssure	Unlimited claims up to the cover amount. No Room Rent Limit. ₹5 lakh NCB. Unlimited Restoration of cover.	12,033
Star Health	Super Star	Fully loaded plan with one-time unlimited claim. Unlimited bonus. Lock the age till 50. No Room Rent Limit. ₹5 lakh NCB.	8,173
Aditya Birla Health	Activ One Max	100% issuance offer guarantee. No Room Rent Limit. ₹10 lakh Renewal Bonus; optional Unlimited Restoration of cover	8,828
Tata AIG	Medicare Select	Special discount for young families and salaried customers. Single pvt AC Room. ₹5 lakh NCB. Unlimited Restoration of cover.	7,474
Reliance General	My HealthCare	Additional 30% discount on premium & fully customisable plan. Single pvt AC Room. ₹3.33 lakh NCB. Restoration of cover once a year.	7,326

Date: June 19, 2026. Source: www.policybazaar.com. NCB: No Claim Bonus

## Term insurance premium tracker

For a 30-year-old male/female, non smoker, living in a metro city, Sum assured ₹1 crore with coverage up to 70 yrs

Insurance company	Plan name	Max coverage up to	Max policy term	Annual premium		Claim settlement ratio (%)
		(years)	(years)	Male	Female	
Aditya Birla Capital	Super Term Plan	85	55	11,167	9,203	98.4
Bajaj Life	eTouch II	85	55	10,714	8,832	99.3
Canara HSBC Life	Young Term Plan - Life Secure	99	69	11,345	9,477	99.2
HDFC Life	Click 2 Protect Super	85	55	12,390	10,531	99.7
ICICI Prudential	iProtect Smart	99	69	14,462	9,645	99.3
Axis Max Life	Smart Term Plan Plus	85	55	11,217	9,527	99.7
SBI Life	Smart Shield Plus	79	49	13,206	11,109	99.4
TATA AIA Life	Sampoorna Raksha Promise	100	70	11,111	9,429	99.4
Bandhan Life	iTerm Prime	70	40	11,466	9,963	99.7

Claim settlement ratio as per data provided by insurer  
Source: www.policybazaar.com, Date: June 19, 2026