



Form No.

DEMAT ACCOUNT REGISTRATION FORM

INDIVIDUAL / NON-INDIVIDUAL



ISF SECURITIES

Client Name _____

Client ID _____

Date of Registration _____

IMPORTANT INSTRUCTIONS :

1. Read the KYC form and overleaf instructions properly before filling the form.
2. Fill the KYC form in CAPITAL LETTERS (**including E-MAIL ID).
3. Use Black pen to fill KYC form.
4. Photograph affixed on KYC form should be signed across.
5. Separate KYC form is required for each joint holder.
6. In case of minor KYC form of minor as well as guardian is required.
7. All supporting documents should be submitted for all the account holders and should be self attested.
8. All supporting documents should be on A4 size paper.
9. No cutting/ over-writing/fluid will be allowed on KYC form.
10. Form should be complete in all respect.

CHECKLIST

INDIVIDUALS

1. Copy of Pan Card.
2. Copy of Valid Address Proof.(Address proof is to be submitted for permanent as well as correspondence address).
3. Passport size Photograph.
4. Cancel Cheque together with latest Bank Statement/Pass Book.
5. NRI's are required to submit address proof for Indian as well as Foreign address.

HUF

1. Copy of PAN Card of HUF & Karta.
2. Copy of Valid Address Proof of Karta.
3. Passport size Photograph of Karta.
4. Declaration by HUF is desired format.
5. Cancel Cheque of HUF'S bank account together with latest Bank Statement/Passbook.

MINOR

1. Copy of PAN Card of Minor & Guardian.
2. Date of Birth certificate of Minor.
3. Copy of Address Proof of Guardian.
4. Passport size Photograph of Minor & Guardian.
5. Cancel cheque of Minor's Bank account together with latest Bank Statement/Passbook.

Documents valid for Proof of Identity and Proof of Address (submit & Tick any one)

Proof of Identity (POI) <i>List of documents admissible as Proof of Identity :</i>		Proof of Address (POA) <i>List of documents admissible as Proof of Address: (*Documents having an expiry date should be valid on the date of submission)</i>	
	Unique Identification Number (UID) / Passport Voter ID Card / Driving License / PANCard with photograph		Passport / Voter Identity Card / Ration Card / Registered Lease or Sale Agreement of Residence / Driving License / Flat Maintenance bill / Insurance copy
	Identity Card/Document with applicant's Photo, issued by any of the following : a) Central/State Government and its Departments, b) Statutory/Regulatory Authorities, c) Public Sector Undertakings, d) Scheduled Commercial Banks, e) Public Financial Institutions, f) Colleges affiliated to Universities g) Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., To their Members, and h) Credit cards/Debit cards issued by Banks.		Utility bills like Telephone Bill (only land line), Electricity Bill or Gas Bill (not more than 3 months old) Bank Account Statement / Passbook (not more than 3 months old) Self Declaration by High Court and Supreme Court Judges, giving the new address in respect of their own accounts. Proof of address issued by the following : Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank / Multinational Foreign Banks / Gazatted Officer / Notary Public / Elected representatives to the Legislative Assembly / Parliament / Documents issued by any Govt. or Statutory Authority. Identity Card/Documents with address, issued by any of the following : Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members. For FII/sub account, Powre of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should betaken. The proof of address in the name of the spouse may be accepted.

CHECKLIST :
CORPORATES

1. Copy of Pan Card.
2. Board Resolution for opening and operating demat account (format enclosed in form).
3. Photograph, Identity proof and Add Proof of Authorized Signatories (other than directors if any).
4. Address Proof of Registered & Correspondence Address
5. Form 32 & Form 18 with ROC Receipt / Challan
6. Copy of cancelled cheque
7. Payment by cheque/cash
8. Copy of Membership Certificate from exchange (only for CM)
9. Copy of Allotment of CM-ID letter issued by exchange(only for CM)

Additional documents to be obtained under KRA are as mentioned below:

Types of entity	Documentary Requirments
Corporate	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). • Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. • Photograph, POI, POA, PAN of individual promoters holding control-either directly or indirectly. • Copies of the Memorandum and Articles of Association and certificate of incorporation. • Copy of the Board Resolution for investment in securities market. • Authorised signatories list with specimen signatures.
Partnership Firm	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Certificate of registration (for registered partnership firms only). • Copy of partnership deed. • Authorised signatories list with specimen signatures. • Photograph, POI, POA, PAN of Partners.
Trust	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Certificate of registration (for registered trust only). Copy of Trust deed. • List of trustees certified by managing trustees/CA. • Photograph, POI, POA, PAN of Trustees.
HUF	<ul style="list-style-type: none"> • PAN of HUF. • Deed of declaration of HUF/ List of coparceners. • Bank pass-book/bank statement in the name of HUF. • Photograph, POI, POA, PAN of Karta.
Unincorporated association or a body of individuals	<ul style="list-style-type: none"> • Proof of Existence/Constitution document. • Resolution of the managing body & Power of Attorney granted to transact business on its behalf. • Authorized signatories list with specimen signatures.
Banks/Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. • Authorized signatories list with specimen signatures.
Foreign Institutional Investors (FII)	<ul style="list-style-type: none"> • Copy of SEBI registration certificate. • Authorized signatories list with specimen signatures.
Army/Government Bodies	<ul style="list-style-type: none"> • Self-certification on letterhead. • Authorized signatories list with specimen signatures.
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Societies Registration Act. • List of Managing Committee members. • Committee resolution for persons authorised to act as authorised signatories with specimen signatures. • True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.

Separate KYC form is required for each joint holder.

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CONTACT DETAIL FOR INVESTOR GRIEVANCES

For any grievance/dispute please contact at the above address of mail us at email id : grievances@isfsecurities.com or contact us on 011-43500300. In case satisfied with the response, please contact the concerned depository at :

Depository Name	E-mail ID	Phone No.
CDSL	complaints@cdslindia.com	1800-200-5533




ACKNOWLEDGEMENT

ISF SECURITIES LIMITED

I/We hereby acknowledge the receipt of duly executed copy of Account Opening Form, Rights and Obligations of the Beneficial Owner and Depository Participant, Schedule of Service Charges and All Other Documents as executed by me/us.

Trading Code _____ Client ID _____

Name & Signature of Client

	Sole/First Holder Authorised Signatory	Second Holder Authorised Signatory	Third Holder Authorised Signatory
Signature	(1) 		
Name			

*Please Stamp & Sign in case of HUF Account. ** In case of Joint Holding, all joint holders must sign.

Date :.....

**Know Your Client (KYC)
Application Form (For Individuals Only)**



ISF SECURITIES LIMITED
Regd. & Corp. Office : 5A/4B, Ansari Road, Darya Ganj, New Delhi-110002
Ph. No.: 011-43500300 • Fax : 011-43500314 • E-mail : contactus@isfsecurities.com

Please fill in ENGLISH and in BLOCK LETTERS

Application No. :

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (As appearing in supporting identification document).

Name

Father's/Spouse Name

PHOTOGRAPH

Please affix
the recent passport
size photograph and
sign across it

2. Gender Male Female B. Marital status Single Married C. Date of Birth |d| |d| / |m| |m| / |y| |y| |y| |y|

3. Nationality Indian Other (Please specify) _____

4. Status Please tick (✓) Resident Individual Non Resident Foreign National (Passport Copy Mandatory for NRIs & Foreign Nationals)

5. PAN Please enclose a duly attested copy of your PAN Card
Aadhaar Number, if any: _____

6. Proof of Identity submitted for PAN exempt cases Please Tick (✓)
 UID (Aadhaar) Passport Voter ID Driving Licence Others |_____| (Please see guideline 'D' overleaf)

B. Address Details (please see guidelines overleaf)

1. Address for Correspondence

City / Town / Village								Pin Code			
State				Country							

2. Contact Details

Tel. (Off.) (ISD) (STD)		Tel. (Res.) (ISD) (STD)	
Mobile (ISD) (STD)		Fax (ISD) (STD)	
E-Mail Id. _____			

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport Ration Card Registered Lease/Sale Agreement of Residence Driving License Voter Identity Card *Latest Bank A/c Statement/Passbook
 *Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Gas Bill Others (Please specify) _____
*Not more than 3 Months old. Validity/Expiry date of proof of address submitted |d| |d| / |m| |m| / |y| |y| |y| |y|

4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant

City / Town / Village								Pin Code			
State				Country							

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport Ration Card Registered Lease/Sale Agreement of Residence Driving License Voter Identity Card *Latest Bank A/c Statement/Passbook
 *Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Gas Bill Others (Please specify) _____
*Not more than 3 Months old. Validity/Expiry date of proof of address submitted |d| |d| / |m| |m| / |y| |y| |y| |y|

6. Any other information: _____

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.

Place: _____

Date: _____

SIGNATURE OF APPLICANT



FOR OFFICE USE ONLY

IPV Done on |d| |d| / |m| |m| / |y| |y| |y| |y|

AMC/Intermediary name OR code _____

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received
Main Intermediary

Seal/Stamp of the intermediary should contain
Staff Name
Designation
Name of the Organization
Signature
Date

Seal/Stamp of the intermediary should contain
Staff Name
Designation
Name of the Organization
Signature
Date

Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant _____

PAN of the Applicant _____

Sr. No.	PAN	Name	DIN (For Directors) / UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed	Photograph
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	

Name & Signature of the Authorised Signatory(ies)

Date [d][d] / [m][m] / [y][y][y][y]

PEP: Politically Exposed Person RPEP: Related to Politically Exposed Person



ISF SECURITIES LTD.

Regd. & Corp. Office : 5A/4B, Ansari Road, Darya Ganj, New Delhi-110002

Phone No.: 011-43500300 • Fax : 011-43500314

E-mail : contactus@isfsecurities.com • Web : www.isfsecurities.com

DP ID : 12073300

ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT - FOR INDIVIDUAL

(To be filled by the Depository Participant)

Application No.											Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.																			
DP ID	1	2	0	7	3	3	0	0	Client ID										

(To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/our name as per following details :

A. HOLDERS DETAILS

Sole/First Holder's Name											PAN									
UID												Date of Birth	D	D	M	M	Y	Y	Y	Y
Second Holder's Name											PAN									
UID												Date of Birth	D	D	M	M	Y	Y	Y	Y
Third Holder's Name											PAN									
UID												Date of Birth	D	D	M	M	Y	Y	Y	Y

Name*											PAN									
											Date of Incorporation									

* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.

B. TYPE OF ACCOUNT (Please tick whichever is applicable)

<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual Director	<input type="checkbox"/> Individual Director's Relative
	<input type="checkbox"/> Individual HUF/AOP	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Minor
	<input type="checkbox"/> Individual Margin Trading A/c (Mantra)	<input type="checkbox"/> Others (Specify) _____	
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable	<input type="checkbox"/> NRI Repatriable Promoter
	<input type="checkbox"/> NRI Non-Repatriable Promoter	<input type="checkbox"/> NRI - Depository Receipts	<input type="checkbox"/> Others (Specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National-Depository Receipts	<input type="checkbox"/> Others (Specify) _____

C. DETAILS OF GUARDIAN (in case the account holder is minor)

Guardian's Name											PAN									
Relationship with the applicant											Date of birth									

I/We instruct the DP to receive each and every credit in my/our account (if not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end. (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement (If not marked, the default option would be as per SEBI Regulation)	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
I/We request you to send Electronic Transaction-cum-Holding Statement at the email Id _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
I would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I would like to receive the Annual Report (Tick the applicable box. If not marked the default option would be in Physical)	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical & Electronic

I/We wish to receive dividend/interest directly in to my/our bank account as given below through ECS. (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]	<input type="checkbox"/> Yes <input type="checkbox"/> No
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D. BANK DETAILS (Dividend Bank Details)

Bank Code (9 digit MICR Code)									
IFS Code (11 Character)									
Account Number									
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify) _____								
Bank Name									
Branch Name									
Bank Branch Address									
City		State		Country		PIN			

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque books is issued, (or)
 - (ii) Photocopy of the Bank Statement having name and address of the BO.
 - (iii) Photocopy of the Passbook having name and address of the BO, (or)
 - (iv) Letter from the Bank.
- In case of option (ii), (iii) and (iv) above, MICR Code of the branch should be present/mentioned on the document.

E. OTHER DETAILS (Mandatory information, to be filled by Client)

Gross Annual Income Details	Income Range per annum :								
	<input type="checkbox"/> Upto Rs. 1,00,000			<input type="checkbox"/> Rs. 1,00,001 to 5,00,000			<input type="checkbox"/> Rs. 5,00,001 to 10,00,000		
	<input type="checkbox"/> Rs. 10,00,001 to 25,00,000			<input type="checkbox"/> More than Rs. 25,00,000					
	Net Worth as on (Date) :						Rs.		
(Net Worth should not be older than 1 year)									
Occupation	<input type="checkbox"/> Private / Public Sector		<input type="checkbox"/> Govt. Service		<input type="checkbox"/> Business		<input type="checkbox"/> Professional		<input type="checkbox"/> Agriculture
	<input type="checkbox"/> Retired		<input type="checkbox"/> Housewife		<input type="checkbox"/> Student		<input type="checkbox"/> Others (Specify) _____		
Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP)		<input type="checkbox"/> Related to Politically Exposed Person (RPEP)						
Any other information									

SMS Alert Facility Refer to Terms & Conditions given as Annexure 2.4	MOBILE No.: +91-.....	<input type="checkbox"/> Yes
	[Mandatory, if you are giving Power of Attorney (POA)] (if POA is not granted & you do not wish to avail of this facility, cancel this option).	<input type="checkbox"/> No

Transactions Using Secured Texting Facility (TRUST) Refer to Terms and Conditions Annexure B	I wish to avail the TRUST facility using the Mobile Number registered for SMS Alert Facility, I have read and understood the Terms and Conditions prescribed by CDSL for the same. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST.		
	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)

Easi	To register for easi , please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.	<input type="checkbox"/> Yes <input type="checkbox"/> No
-------------	---	---

NOMINATION DETAILS

Dear Sir/Madam,

I/We the Sole Holder/ Joint Holder / Guardian (in case of minor) hereby declare that :

I/We **do not wish to nominate any one for this demat account.**

[Strike out what is not applicable] [Signatures of all account holders should be obtained on this form]

I/We **nominate** the following persons who is entitled to receive security balances lying in my/our account, particulars whereof are given below, in the event of the death of Sole holder or the death of all the Joint Holders.

Nomination Regn. No.								
Date	D	D	M	M	Y	Y	Y	Y

BO ACCOUNT DETAILS																		
DP ID	1	2	0	7	3	3	0	0	Client ID									
Name of the Sole / First Holder																		
Name of the Second Holder																		
Name of the Third Holder																		

NOMINATION DETAILS	NOMINEE 1	NOMINEE 2	NOMINEE 3
Nominee Name			
First Name*	_____	_____	_____
Middle Name	_____	_____	_____
Last Name*	_____	_____	_____
Address*			
City*			
State*			
PIN*			
Country*			
Telephone No.			
Fax No.			
PAN No.			
UID			
Email ID			
Relationship with the BO*			
Date of Birth* (Mandatory if Nominee is a Minor)			
Name of the Guardian of Nominee (if the nominee is minor)			
First Name*	_____	_____	_____
Middle Name	_____	_____	_____
Last Name*	_____	_____	_____
Address of the Guardian of nominee*			
City*			
State*			
PIN*			
Country*			

Age			
Telephone No.			
Fax No.			
E-mail Id			
Relationship of the Guardian with the Nominee			
Percentage of allocation of securities*			
Residual Securities [please tick any one nominee.* If tick not marked default will be first nominee]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note : Residual securities: in case of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.




***Marked is Mandatory field**

This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.

Note : One Witness shall attest signature(s) / Thumb Impression(s).

Details of the Witness	
Name of Witness	
Address of Witness	
Signature of Witness	

I/We confirm that I/We have received and read the copy of Rights & Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First / Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures	(4) 		

(Signatures should be preferably in black ink)



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ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT - FOR NON-INDIVIDUAL

(To be filled by the Depository Participant)

Application No.								Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.																
DP ID	1	2	0	7	3	3	0	0	Client ID							

(To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/our name as per following details :

HOLDERS DETAILS

Sole/First Holder's Name								PAN								
Second Holder's Name								PAN								
Third Holder's Name								PAN								
Search Name																
Date of Incorporation																

Name*

* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.

TYPE OF ACCOUNT (Please tick whichever is applicable)

Status		Sub-Status (To be filled by the DP)	
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Others (Specify) _____			
SEBI Registration No. (if applicable)		SEBI Registration Date	D D M M Y Y Y Y
RBI Registration No. (if applicable)		RBI Approval Date	D D M M Y Y Y Y
ROC Registration No. (if applicable)		ROC Registration Date	D D M M Y Y Y Y
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify) _____		

I/We instruct the DP to receive each and every credit in my/our account (if not marked, the default option would be 'Yes')

[Automatic Credit]
 Yes No

I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end. (If not marked, the default option would be 'No')

Yes No

Account Statement Requirement (If not marked, the default option would be as per SEBI Regulation)

As per SEBI Regulation Daily Weekly Fortnightly Monthly

I/We request you to send Electronic Transaction-cum-Holding Statement at the email Id _____

Yes No

I would like to share the email ID with the RTA

Yes No

I would like to receive the Annual Report (Tick the applicable box. If not marked the default option would be in Physical)

Physical Electronic Both Physical & Electronic

I/We wish to receive dividend/interest directly in to my/our bank account as given below through ECS. (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]

Yes No

CLEARING MEMBER DETAILS (To be filled by CMs only)

Name of Stock Exchange			
Name of CC / CH			
Clearing Member ID		Trading Member ID	

BANK DETAILS (Dividend Bank Details)

Bank Code (9 digit MICR Code)																				
IFS Code (11 Character)																				
Account Number																				
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify) _____																			
Bank Name																				
Branch Name																				
Bank Branch Address																				
City																				
		State																		
				Country																
										PIN										

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque books is issued, (or)
(ii) Photocopy of the Bank Statement having name and address of the BO.
(iii) Photocopy of the Passbook having name and address of the BO, (or)
(iv) Letter from the Bank.
➤ In case of option (ii), (iii) and (iv) above, MICR Code of the branch should be present/mentioned on the document.




OTHER DETAILS (Mandatory)

Gross Annual Income Details	Please tick (✓) <input type="checkbox"/> Below Rs. 1 Lac <input type="checkbox"/> Rs. 1-5 Lac <input type="checkbox"/> Rs. 5-10 Lac <input type="checkbox"/> Rs. 10-25 Lac <input type="checkbox"/> Rs. 25 Lacs-1 Crore <input type="checkbox"/> >Rs. 1 Crore																			
Net Worth	Rs.										as on (Date)									
(Net Worth should not be older than 1 year)																				
Name, PAN, DIN/UID, residential address and photographs of Promoters/Partners/Karta/Trustees/whole time directors (Please use the Annexure to fill in the details)																				
Is the entity involved/providing any of the following services <input type="checkbox"/> YES <input type="checkbox"/> NO - For Foreign Exchange/Money Changer Services <input type="checkbox"/> YES <input type="checkbox"/> NO - Gaming/Gambling/Lottery Serviced <input type="checkbox"/> YES <input type="checkbox"/> NO - Money Lending / Pawning <input type="checkbox"/> YES <input type="checkbox"/> NO (eg. casinos, betting syndicates)																				
Any other information																				

SMS Alert Facility Refer to Terms & Conditions given as Annexure 2.4	MOBILE No.: +91-..... [Mandatory, if you are giving Power of Attorney (POA)] (if POA is not granted & you do not wish to avail of this facility, cancel this option).	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Transactions Using Secured Texting Facility (TRUST) Refer to Terms and Conditions Annexure B	I wish to avail the TRUST facility using the Mobile Number registered for SMS Alert Facility, I have read and understood the Terms and Conditions prescribed by CDSL for the same.		<input type="checkbox"/> Yes <input type="checkbox"/> No
	I wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST.		
	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)
Easi	To register for <i>easi</i> , please visit our website www.cdslindia.com . <i>Easi</i> allows a BO to view his ISIN balances, transactions and value of the portfolio online.		<input type="checkbox"/> Yes <input type="checkbox"/> No

I/We have received and read the "Rights and Obligations documents" and terms and condition agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	Sole / First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Designation			
Signatures	(5) 		

(Signatures should be preferably in black ink)

(In case of more authorised signatories, please add annexure)

**RIGHTS AND OBLIGATIONS OF BENEFICIAL OWNER AND DEPOSITORY PARTICIPANT
AS PRESCRIBED BY SEBI & DEPOSITORIES**

General Clause

1. The Beneficial Owner and the Depository participant (DP) shall be bound by the provisions of the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996, Rules and Regulations of Securities and Exchange Board of India (SEBI), Circulars/Notifications/Guidelines issued there under, Bye Laws and Business Rules/Operating Instructions issued by the Depositories and relevant notifications of Government Authorities as may be in force from time to time.
2. The DP shall open/activate demat account of a beneficial owner in the depository system only after receipt of complete Account opening form, KYC and supporting documents as specified by SEBI from time to time.

Beneficial Owner information

3. The DP shall maintain all the details of the beneficial owner(s) as mentioned in the account opening form, supporting documents submitted by them and/or any other information pertaining to the beneficial owner confidentially and shall not disclose the same to any person except as required by any statutory, legal or regulatory authority in this regard.
4. The Beneficial Owner shall immediately notify the DP in writing, if there is any change in details provided in the account opening form as submitted to the DP at the time of opening the demat account or furnished to the DP from time to time.

Fees/Charges/Tariff

5. The Beneficial Owner shall pay such charges to the DP for the purpose of holding and transfer of securities in dematerialized form and for availing depository services as may be agreed to from time to time between the DP and the Beneficial Owner as set out in the Tariff Sheet provided by the DP. It may be informed to the Beneficial Owner that "no charges are payable for opening of demat accounts"
6. In case of Basic Services Demat Accounts, the DP shall adhere to the charge structure as laid down under the relevant SEBI and/or Depository circulars/directions /notifications issued from time to time.
7. The DP shall not increase any charges/tariff agreed upon unless it has given a notice in writing of not less than thirty days to the Beneficial Owner regarding the same.

Dematerialization

8. The Beneficial Owner shall have the right to get the securities, which have been admitted on the Depositories, dematerialized in the form and manner laid down under the Bye Laws, Business Rules and Operating Instructions of the depositories.

Separate Accounts

9. The DP shall open separate accounts in the name of each of the beneficial owners and securities of each beneficial owner shall be segregated and shall not be mixed up with the securities of other beneficial owners and/or DP's own securities held in dematerialized form.
10. The DP shall not facilitate the Beneficial Owner to create or permit any pledge and /or hypothecation or any other interest or encumbrance over all or any of such securities submitted for dematerialization and/or held in demat account except in the form and manner prescribed in the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996 and Bye-Laws/Operating Instructions/Business Rules of the Depositories.

Transfer of Securities

11. The DP shall effect transfer to and from the demat accounts of the Beneficial Owner only on the basis of an order, instruction, direction or mandate duly authorized by the Beneficial Owner and the DP shall maintain the original documents and the audit trail of such authorizations.
12. The Beneficial Owner reserves the right to give standing instructions with regard to the crediting of securities in his demat account and the DP shall act according to such instructions.

Statement of account

13. The DP shall provide statements of accounts to the beneficial owner in such form and manner and at such time as agreed with the Beneficial Owner and as specified by SEBI/depository in this regard.
14. However, if there is no transaction in the demat account, or if the balance has become Nil during the year, the DP shall send one physical statement of holding annually to such BOs and shall resume sending the transaction statement as and when there is a transaction in the account.
15. The DP may provide the services of issuing the statement of demat accounts in an electronic mode if the Beneficial Owner so desires. The DP will furnish to the Beneficial Owner the statement of demat accounts under its digital signature, as governed under the Information Technology Act, 2000. However if the DP does not have the facility of providing the statement of demat account in the electronic mode, then the Participant shall be obliged to forward the statement of demat accounts in physical form.
16. In case of Basic Services Demat Accounts, the DP shall send the transaction statements as mandated by SEBI and/or Depository from time to time.

(6) 

Sole/First Holder Signature



Second Holder Signature



Third Holder Signature

Manner of Closure of Demat account

17. The DP shall have the right to close the demat account of the Beneficial Owner, for any reasons whatsoever, provided the DP has given a notice in writing of not less than thirty days to the Beneficial Owner as well as to the Depository. Similarly, the Beneficial Owner shall have the right to close his/her demat account held with the DP provided no charges are payable by him/her to the DP. In such an event, the Beneficial Owner shall specify whether the balances in their demat account should be transferred to another demat account of the Beneficial Owner held with another DP or to rematerialize the security balances held.
18. Based on the instructions of the Beneficial Owner, the DP shall initiate the procedure for transferring such security balances or rematerialize such security balances within a period of thirty days as per procedure specified from time to time by the depository. Provided further, closure of demat account shall not affect the rights, liabilities and obligations of either the Beneficial Owner or the DP and shall continue to bind the parties to their satisfactory completion.

Default in payment of charges

19. In event of Beneficial Owner committing a default in the payment of any amount provided in Clause 5 & 6 within a period of thirty days from the date of demand, without prejudice to the right of the DP to close the demat account of the Beneficial Owner, the DP may charge interest at a rate as specified by the Depository from time to time for the period of such default.
20. In case the Beneficial Owner has failed to make the payment of any of the amounts as provided in Clause 5&6 specified above, the DP after giving two days notice to the Beneficial Owner shall have the right to stop processing of instructions of the Beneficial Owner till such time he makes the payment along with interest, if any.

Liability of the Depository

21. As per Section 16 of Depositories Act, 1996,
 1. Without prejudice to the provisions of any other law for the time being in force, any loss caused to the beneficial owner due to the negligence of the depository or the participant, the depository shall indemnify such beneficial owner.
 2. Where the loss due to the negligence of the participant under Clause (1) above, is indemnified by the depository, the depository shall have the right to recover the same from such participant.

Freezing/ Defreezing of accounts

22. The Beneficial Owner may exercise the right to freeze/defreeze his/her demat account maintained with the DP in accordance with the procedure and subject to the restrictions laid down under the Bye Laws and Business Rules/Operating Instructions.

23. The DP or the Depository shall have the right to freeze/defreeze the accounts of the Beneficial Owners on receipt of instructions received from any regulator or court or any statutory authority.

Redressal of Investor grievance

24. The DP shall redress all grievances of the Beneficial Owner against the DP within a period of thirty days from the date of receipt of the complaint.

Authorized representative

25. If the Beneficial Owner is a body corporate or a legal entity, it shall, along with the account opening form, furnish to the DP, a list of officials authorized by it, who shall represent and interact on its behalf with the Participant. Any change in such list including additions, deletions or alterations thereto shall be forthwith communicated to the Participant.

Law and Jurisdiction

26. In addition to the specific rights set out in this document, the DP and the Beneficial owner shall be entitled to exercise any other rights which the DP or the Beneficial Owner may have under the Rules, Bye Laws and Regulations of the respective Depository in which the demat account is opened and circulars/notices issued there under or Rules and Regulations of SEBI.
27. The provisions of this document shall always be subject to Government notification, any rules, regulations, guidelines and circulars/ notices issued by SEBI and Rules, Regulations and Bye-laws of the relevant Depository, where the Beneficial Owner maintains his/ her account, that may be in force from time to time.
28. The Beneficial Owner and the DP shall abide by the arbitration and conciliation procedure prescribed under the Bye-laws of the depository and that such procedure shall be applicable to any disputes between the DP and the Beneficial Owner.
29. Words and expressions which are used in this document but which are not defined herein shall unless the context otherwise requires, have the same meanings as assigned thereto in the Rules, Bye-laws and Regulations and circulars/notices issued there under by the depository and /or SEBI
30. Any changes in the rights and obligations which are specified by SEBI/Depositories shall also be brought to the notice of the clients at once.
31. If the rights and obligations of the parties hereto are altered by virtue of change in Rules and regulations of SEBI or Bye-laws, Rules and Regulations of the relevant Depository, where the Beneficial Owner maintains his/her account, such changes shall be deemed to have been incorporated herein in modification of the rights and obligations of the parties mentioned in this document.

(7) 

Sole/First Holder Signature



Second Holder Signature



Third Holder Signature

ANNEXURE - A

Terms And Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL

Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
2. "DP" means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. "BO" means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.

5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.

6. The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.

7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.

8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.

9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.

Fees:

Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository gives no warranty with respect to the quality of the service provided by the service provider. The Depository will not be liable for any unauthorized use or access to the information and/ or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by any third person.

Liability and Indemnity:

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

Amendments:

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

Governing Law and Jurisdiction:

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in Mumbai.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. **I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.**

I/We have read and understood the terms and conditions mentioned above and agree to abide by them and any amendments thereto made by the depository from time to time. I/ we further undertake to pay fee/ charges as may be levied by the depository from time to time.

I / We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the BOs would be required to take up the matter with their DP.

I/We am/ are aware that mere acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service.

I/We provide the following information for the purpose of **Registration / modification** (Please cancel out what is not applicable).

BOID

1	2	0	7	3	3	0	0												
---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--

(Please write your 8 digit DPID)

(Please write your 8 digit Client ID)

Sole / First Holder's Name : _____ Second Holder's Name _____ Third Holder's Name _____

Mobile Number on which message are to be sent

+91																			
-----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

The mobile number is registered in the name of : _____

Email ID : _____

(Please write only ONE valid email ID on which communications; if any, is to be sent)

Signatures



Sole/First Holder Signature



Second Holder Signature



Third Holder Signature

Place : _____

Date : ____/____/20____

ANNEXURE - B

Terms And Conditions for availing Transaction Using Secured Texting (TRUST) service offered by CDSL

1. **Definitions:**
In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:
 - i. "Depository" means Central Depository Services (India) Limited (CDSL)
 - ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.
 - iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
 - iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
 - v. "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time. Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository
3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depository shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure of the service provider or network.
4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
6. The BO shall be responsible for submitting response to the 'Responsive SMS' within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for deregistration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.
9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP .
10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.
11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP.
13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.
17. **Indemnity:**
In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.
18. **Disclaimer:**
Depository shall be absolved of any liability in case :-
 - a. There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
 - b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such service provider.
 - c. There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.

Dear Sir/Madam,

I/We wish to avail the following facility/ies provided by the depository on my/our mobile number as provided below subject to the terms and conditions as specified by CDSL.

- a. SMART - SMS alert facility
- b. TRUST - Transaction using Secured Texting facility.

(please note that SMS alert facility is mandatory if TRUST facility is opted for)

BOID	1	2	0	7	3	3	0	0											
	(Please write your 8 digit DPID)								(Please write your 8 digit Client ID)										

Sole / First Holder's Name : _____ Second Holder's Name _____ Third Holder's Name _____

Mobile Number on which message are to be sent

+91																		
------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Please write only the mobile number without prefixing country code or zero)

(Existing users registered for SMS alerts : Please note that if the mobile number for TRUST is different than the registered mobile number for SMS alert, the new mobile number will be updated for SMS alert also.)

The mobile number is registered in the name of : _____

Email ID : _____
(Please write only ONE valid email ID on which communications; if any, is to be sent)

I/We consent to CDSL providing to the service provider such information pertaining to account / transactions in my/our account as is necessary for the purpose of availing the said facility.

I/We have read and understood the terms and conditions prescribed by CDSL for the said facility/ies and agree to abide by them and any amendments thereto made by the depository from time to time. I/We further undertake to pay fee / charges as may be levied by the depository from time to time.

Signatures (9)

Sole/First Holder Signature Second Holder Signature Third Holder Signature

Place : _____ Date : ____/____/20____

FATCA DECLARATION

Declaration by customer Not having Non-Indian Country(ies) as their place of Birth/ Citizenship/ Nationality and Tax Residency

Dear Sir,

I have read and understood the information requirements and the terms and conditions mentioned in FATCA and CRS guidelines issued by CBDT and hereby confirm that I do not have any Non-Indian Country(ies) as my place of Birth/ Citizenship/ Nationality and Tax Residency. The information provided by me is true, Correct and complete. I hereby agree and confirm to inform ISF Securities Limited for any modification to this information promptly.

I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA and CRS on Automatic Exchange of Information(AEOI).

Note*:- To check the FATCA and CRS guidelines issued by CBDT Please check our website: www.isfsecurities.com

Thanks and Regards,

Client Name : _____

Client PAN : _____

Client ID: _____

OPTION FORM FOR ISSUE OF DIS BOOKLET

Date	D	D	M	M	Y	Y	Y	Y
------	---	---	---	---	---	---	---	---

DP ID	1	2	0	7	3	3	0	0	Client ID								
First Holder Name																	
Second Holder Name																	
Third Holder Name																	

To,

ISF Securities Ltd.

Rege. & Corp. Office : 5A/4B, Ansari Road,
Darya Ganj, New Delhi-110002

Dear Sir / Madam,

I / We hereby state that : [Select one of the options given below]

OPTION 1 :

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us on opening my / our CDSL account through I / We have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager.

Yours faithfully

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures	(10)		

OR

OPTION 2 :

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later day.

Yours faithfully

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures	(11)		

----- (Please Tear Here) -----

Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

DP ID	1	2	0	7	3	3	0	0	Client ID								
Name of the First/Sole Holder																	
Name of the Second Joint Holder																	
Name of the Third Joint Holder																	

Depository Participant Seal and Signature

AUTHORISATION FOR RECEIVING THE STATEMENT OF ACCOUNT IN ELECTRONIC MODE

To,
ISF SECURITIES LIMITED
5A/4B, Ansari Road,
Darya Ganj, New Delhi-110002

Date _____

Re : Beneficial Owner (BO) Account No. 12073300




I/We _____
[name(s) of the BO(s)] had entered into DP BO agreement with you. I/We confirm having opted to receive the statement of accounts pertaining to our BO account in electronic mode in lieu of physical copy of the statement of account.

I/We confirm that the dispatch of statement of account to me/us at the following email address shall constitute full and absolute discharge of your obligation under the above agreement to provide me/us with statement of my/our BO account. But, I/we reserve my/our right to receive the physical copy of statement of accounts despite receiving the same in electronic mode, if such a demand is made in writing on you.

[Email address : _____]

I/We confirm that any change in the aforesaid email address or any other instructions with regard to dispatch/service of my/our statement of account on me/us shall not be binding upon you unless you are intimated in writing by me/us by acknowledged delivery.

Yours faithfully,

Signatures ⁽¹²⁾  _____  _____  _____
First Holder Signature Second Holder Signature Third Holder Signature

Name/s of the Beneficial owner/s Signature/s (all joint holders)

CERTIFIED TRUE COPY OF THE RESOLUTION PASSED BY THE BOARD OF DIRECTORS OF _____ AT THEIR MEETING ON _____ AT THEIR REGD. OFFICE _____

- Resolved that a Corporate Beneficiary/Clearing Member Account be opened for depository purpose with **ISF Securities Limited**, 5A/4B, Ansari Road, Darya Ganj, New Delhi-110002.
- Further Resolved that **Mr.** _____ **DIRECTORS** of the company whose specimen signatures are attested below be jointly / severally authorised to sign on behalf of the company all documents and forms relating to such account (in relation to debit or credit or otherwise) in such forms as may be required by the **ISF Securities Limited** and further any instructions, indemnities and counter indemnities which may be required by **ISF Securities Limited**, from the company in connection with the above mentioned account.
- That this resolution be communicated to the **ISF Securities Limited** and remain in force until notice in writing is given to the **ISF Securities Limited**

For _____
Director
Specimen Signature of
Mr. _____
Mr. _____

Attested by
Director

NOTE : This is required to be submitted on the Company's Letterhead.



ISF SECURITIES LTD.

SEBI REGN. NO. : IN-DP-320-2017 • DP ID 12073300

Regd. & Corp. Office : 5A/4B, Ansari Road, Darya Ganj, New Delhi-110002

Phone No.: 011-43500300 • Fax : 011-43500314

E-mail : contactus@isfsecurities.com • Web : www.isfsecurities.com

SCHEDULE OF CHARGES FOR DEPOSITORY SERVICES W.E.F. NOVEMBER 1st 2018

Beneficiary Account - CDSL

PARTICULARS	SCHEDULE "A" (Plus GST)	SCHEDULE "B" (For Non-Individual/NRI/ Foreign National/ Others) (Plus GST)
Account Opening Charges	NIL	NIL
Annual Membership Fee (Upfront)*	₹ 400/- + GST	₹ 1500/- per annum + GST
Lifetime Membership Fee	₹ 2000/- (Non-Refundable)	
Transaction Charges	(Receipt) Buy	NIL
	(Delivery) Sale	₹ 15/-
Dematerialisation Fee	₹ 25/- per certificate	₹ 25/- per certificate
Rematerialisation Fee	₹ 20/- per Certificate	₹ 20/- per certificate
Postage per Demat / Remat Request	₹ 50/-	₹ 50/-
Pledge (Initiate)	₹ 50/- per ISIN	₹ 50/- per ISIN
Pledge (Closure)	₹ 25/- per ISIN	₹ 25/- per ISIN
Easiest	₹ 50/- per quarter	₹ 50/- per quarter
Advice Book Charge (20 leaves)	₹ 40/-	₹ 40/-
Additional Statement	₹ 10/- per page	₹ 10/- per page
	₹ 25/- postage charges	₹ 25/- postage charges
Documentation Charges	As per Actuals	As per Actuals
A/c Detail Modification	₹ 50/- per request	₹ 50/- per request

Terms & conditions

- Clients will be required to pay ₹ 500/- upfront for each demat account which will be adjusted towards depository service charges. Client will be required to replenish the balance immediately when it falls below ₹ 200/-.
- DP Charges of Broking Clients will be debited to their Trading accounts.
- Any other service, which is not mentioned above, will be charged separately as per the rates applicable from time to time. Out of pocket expenses including overseas consignment will be charged extra on actual basis.
- All charges are subject to revision at the discretion of ISF Securities Ltd. after giving a notice of 30 days.
- All charges are payable on monthly basis and delayed payment will be liable for interest @ 2% PM.
- ISF Securities Ltd. may suspend/freeze the depository services of the account holder on non-payment of outstanding bills.

* Annual Charges will be charged in case of account closure within one year from the date of opening.

As per SEBI Circular No. CIR/MRD.DP/22/2012 dated August 27, 2012:

- 1) No Annual Maintenance Charges (AMC) shall be levied, if the value of holding is upto Rs. 50,000/-.
- 2) For the value of holding from Rs. 50,000/- to Rs.2,00,000/-, Rs.100/- will be charged towards AMC.

HOLDER'S SIGNATURES :

(13)

Signature 1. _____ 2. _____ 3. _____

Sole/First Holder Signature Second Holder Signature Third Holder Signature

FOR ISF SECURITIES LIMITED

⊗
(Authorised Signatory)



ISF SECURITIES LTD.

Member : NSE (Capital, F&O and Currency Derivative Segment)
Member : BSE (Capital and F&O Segment)
SEBI REGN. NO.: INZ000211738
Depository Participant : CDSL
SEBI REGN. NO.: IN-DP-320-2017 • DP ID : 12073300

Regd. & Corp. Office : 5A/4B, Ansari Road, Darya Ganj, New Delhi-110002
Phone No.: 011-43500300 • Fax : 011-43500314
E-mail : contactus@isfsecurities.com
Web : www.isfsecurities.com

In case of any grievances please write to grievances@isfsecurities.com