

**ANNEXURE-1
INDEX OF DOCUMENTS**

S.N.	Name of the Document	Brief Significance of the Document	Pg. No.
A. Mandatory documents As prescribed by sebi & exchanges :			
1.	Account Opening Form	A. KYC form - Document captures the basic information about the constituent and art instruction/check list. B. Document captures the additional information about the constituent relevant to trading account and an instruction/ check list.	2-8 9-12
2.	Tariff sheet	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s)	13
3.	Policies and Procedures	Document describing significant policies and procedures of the stock broker	14-16
B. DP SECTION :			
4.	DP FORM	Document captures the additional information about the constituent relevant to DP account opening form, nomination form, Rights and Obligations and POA there of.	17-31
5.	Trust & SMS Alert	This contains term & conditions regarding Trust & SMS alert facility	32-34
6.	Option Form for DIS booklet	DIS booklet for PMS client.	35
7.	Schedule of Charges (CDSL)	Document detailing the charges levied on the client of various categories	36
C. VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER			
8.	Mandate for Communication of Information on Mobile	Authorization by you in our favour to declare that providing you information by us, on your mobile, through voice call or SMS shall not be considered voilation of your rights	37
9.	Debit Authorisation Letter	Debit Authorisation pertaining to the depository services shall be debited to Trading account	37
10.	Running Account Authorisation	This letter is authorisation to maintain fund, securities on running account basis & for authorisation to receive contract as well other relevant documents	38
11.	ECN letter	This mandate is to authorisation to issue contract notes is digital mode. It provides terms and conditions for the issuance of digital contract note.	39-40
		RDD on Option Trading MCX	41
12.	HUF Declaration	Declaration be provided by HUF.	42
13.	Client Profile	For the purpose of PMLA, certain details of clients are to be provided	43
14.	Application for Internet Based Trading (IBT) & Selcurities Trading through Wireless Trading (STWT)	Application form for internet Based Trading (1ST & Securities Trading through Wireless Trading (STWT) & BSDA Request Form	44
15.	Declarations(Faimly A/c., Aadhar & Fatca)	Family Declarations, Adjustment of Balance for Family A/c., Aadhar Declarations, Authorisations, Trading A/c., Fatca Declarations	45-51
16.	Declaration	Declaration for opting out of trading prefere	52
17.	Account Opening Form	A. KYC Form B. Policy & Term on Margine Trading Facility, T2 C, F & O	54-59
18.	UBO	UBO	60-61
Rights and Obligation, Risk Disclosure Document, Gtdanee Note Do's and Dont's included as a separate client copy.			

INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

A. Important Points :

1. Self attested copy of PAN card is mandatory for all clients, including Promoters/Partners/Karta/Trustees and whole time directors and persons authorized to deal in securities on behalf of company/firm/others.
2. Copies of as the documents submitted by the applicant should be self-attested and accompanied by originals for verification, In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per life below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on Us KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted. 6 Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals.JalSowed to trade subject to RBI and FEMA guidelines), copy of passpori/PIOCard/IOCICard and overseas address proof is mandatory.
8. For foreign entities, ON is optinal and in the absence of DIN no. for the directors, their passport copy should be given.
9. In casse of Merchant Navy NRfs. Mariner's declaration or certified copy of CDC (Continuous discharge Certificate) is to be submitted.
10. For opening an account with Depository participant of Mutual Fund for a minor, photocopy of the School living Certificate/Mark sheet issued by Higher Secondary lroad/ Passport of Miner/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in 3 foreign country, u. Heads of States or of Governments, senior politicians, senior Government/Judicial/Military officers, senior executives of state owned corporations, important political party officials, etc.

B. Proof of Identity (POL) : - List of documents admissible as Proof of Identity :

1. Pan card with photograph. This is mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (fisted in Section D)
2. Unique Identification Number (DO) (Aadhaar)/Passport/Voter ID card / Driving License.
3. Identity card/ document with applicant's Photo, 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, Professional Bodies such as ICAI, ICWAI, O, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (PDA) : - List of documents admissible as Proof of Address :

(*Documents having an expiry date should be valid on the date of submission)

1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of Residence/ Driving License/Flat Maintenance bill/Insurance Copy.
2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 Months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following : Bank Managers of Scheduled Commercial Banks/Schedules to-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary Public/ Elected representative to the Legislative Assembly/ Parliament/Document issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following : Central/State Government and its Departments, Statutory/Regularly Authorities. Puck 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.
7. For Fill/sub account, Power of Attorney given by Fill/Sub-account to the Custodians (which are duly notarized and/or apostied or consuiarsed) that gives the registered address should be taken.
8. The proof os address m the name of the spouse may be accepted.

D. Exempions/clarification to PAN

(*Sufficient opumentary evidence in support of such claims to be collected)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g., Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual funds upto Rs. 50,000/- p.a.
5. In case of institutional clients, namely, FIs, MFs, VCFs, FVds, Scheduled Commercial Banks Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the FAN card Details with the orranal PAN card and provide duly certified copies of such verified PAN details to trie intermediary.

E. List of people authorized to attest the documents :

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operation ame, Designation & Seal should be affixed Bank or Multinational Foreign Banks (on the copy).
2. In case of NRIs, authored officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge; Indian Embassy / Consulate Genera in the country where the client resides are permitted to attest the documents.

F. In case of Non-Individuals, additional documents to be obtained from non-itHiv/duals, over & above the POI & PQA, as mentioned below :

Type of entity	Documentary requirements
Corporate	<ul style="list-style-type: none"> ● copy or the balance sheets for life last/financial years (to of submitted every year). ● Copy of latest share holding pattern including list of all those holding control, either directly or idirectly, 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 IDIN 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 of 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 far 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 Patners.
Trust	<ul style="list-style-type: none"> ● Copy or 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 individual	<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 its with specimen signatures.
Barts/IrBtitutorial 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 (FI)	<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 Registrar 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.

First Holder

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual

Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only

Application Type* New Update
 (To be filled by financial institution) KYC Number (Mandatory for KYC update request)
 Account Type* Normal Simplified (for low risk customers) Small

1. PERSONAL DETAILS (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/>)		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian		
	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin		
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector)	
	<input type="checkbox"/> O-Others (<input type="checkbox"/> Professional	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student)	
	<input type="checkbox"/> B-Business			
	<input type="checkbox"/> X- Not Categorized			

PHOTO

Signature / Thumb Impression

2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)
 ISO 3166 Country Code of Jurisdiction of Residence*
 Tax Identification Number or equivalent (If issued by jurisdiction)*
 Place / City of Birth* ISO 3166 Country Code of Birth*

3. PROOF OF IDENTITY (PoI)* (Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

<input type="checkbox"/> A- Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>
<input type="checkbox"/> B- Voter ID Card	<input type="text"/>		
<input type="checkbox"/> C- PAN Card	<input type="text"/>		
<input type="checkbox"/> D- Driving Licence	<input type="text"/>	Driving Licence Expiry Date	<input type="text"/>
<input type="checkbox"/> E- UID (Aadhaar)	<input type="text"/>		
<input type="checkbox"/> F- NREGA Job Card	<input type="text"/>		
<input type="checkbox"/> Z- Others (any document notified by the central government)	<input type="text"/>	Identification Number	<input type="text"/>
<input type="checkbox"/> S- Simplified Measures Account - Document Type code	<input type="text"/>	Identification Number	<input type="text"/>

4. PROOF OF ADDRESS (PoA)*

4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction D at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Passport Driving Licence UID (Aadhaar)
 Voter Identity Card NREGA Job Card Others
 Simplified Measures Account - Document Type code

Address

Line 1*
 Line 2
 Line 3 City / Town / Village*
 District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Line 1*

Line 2

Line 3 City / Town / Village*

State* ZIP / Post Code* ISO 3166 Country Code*

5. CONTACT DETAILS (All communications will be sent on provided)

Tel. (Res) Mobile

FAX Email ID

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

Name* Prefix First Name Middle Name Last Name

(If KYC number and name are provided, below details of section 6 are optional) el. (Off)

PROOF OF IDENTITY [PoI] OF RELATED PERSON* (Please see instruction (H) at the end)

A- Passport Number Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date

E- UID (Aadhaar)

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

S- Simplified Measures Account - Document Type code Identification Number

7. REMARKS (If any) Mobile no. / Email-ID) (Please refer instruction F at the end)

8. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my 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 aware that I may be held liable for it.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : Place :

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date <input type="text"/>	Name <input type="text"/>
Emp. Name <input type="text"/>	Code <input type="text"/>
Emp. Code <input type="text"/>	
Emp. Designation <input type="text"/>	
Emp. Branch <input type="text"/>	
<input type="text"/>	[Institution Stamp]

Second Holder

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual

Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.


For office use only

Application Type* New Update
 (To be filled by financial institution) KYC Number (Mandatory for KYC update request)
 Account Type* Normal Simplified (for low risk customers) Small

1. PERSONAL DETAILS (Please refer instruction **A** at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male <input type="checkbox"/> F- Female <input type="checkbox"/> T-Transgender			
Marital Status*	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Others			
Citizenship*	<input type="checkbox"/> IN- Indian <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> <input type="text"/>)			
Residential Status*	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin			
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector) <input type="checkbox"/> O-Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student) <input type="checkbox"/> B-Business <input type="checkbox"/> X- Not Categorized			

PHOTO



Signature / Thumb Impression

2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction **B** at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent (If issued by jurisdiction)*

Place / City of Birth* ISO 3166 Country Code of Birth*

3. PROOF OF IDENTITY (PoI)* (Please refer instruction **C** at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

<input type="checkbox"/> A- Passport Number <input type="text"/>	Passport Expiry Date <input type="text"/>
<input type="checkbox"/> B- Voter ID Card <input type="text"/>	
<input type="checkbox"/> C- PAN Card <input type="text"/>	
<input type="checkbox"/> D- Driving Licence <input type="text"/>	Driving Licence Expiry Date <input type="text"/>
<input type="checkbox"/> E- UID (Aadhaar) <input type="text"/>	
<input type="checkbox"/> F- NREGA Job Card <input type="text"/>	
<input type="checkbox"/> Z- Others (any document notified by the central government) <input type="text"/>	Identification Number <input type="text"/>
<input type="checkbox"/> S- Simplified Measures Account - Document Type code <input type="text"/>	Identification Number <input type="text"/>

4. PROOF OF ADDRESS (PoA)*

4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction **D** at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Passport Driving Licence UID (Aadhaar)
 Voter Identity Card NREGA Job Card Others
 Simplified Measures Account - Document Type code

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Line 1*

Line 2

Line 3 City / Town / Village*

State* ZIP / Post Code* ISO 3166 Country Code*

5. CONTACT DETAILS (All communications will be sent on provided)

Tel. (Res) Mobile

FAX Email ID

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

Name* Prefix First Name Middle Name Last Name

(If KYC number and name are provided, below details of section 6 are optional) el. (Off)

PROOF OF IDENTITY [PoI] OF RELATED PERSON* (Please see instruction (H) at the end)

A- Passport Number Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date

E- UID (Aadhaar)

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

S- Simplified Measures Account - Document Type code Identification Number

7. REMARKS (If any) Mobile no. / Email-ID) (Please refer instruction F at the end)

8. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my 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 aware that I may be held liable for it.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : Place :

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date <input type="text"/>	Name <input type="text"/>
Emp. Name <input type="text"/>	Code <input type="text"/>
Emp. Code <input type="text"/>	
Emp. Designation <input type="text"/>	
Emp. Branch <input type="text"/>	

[Institution Stamp]



Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Tick "✓" wherever applicable.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please fill the form in English and in BLOCK letters.
- E) KYC number of applicant is mandatory for update application
- F) List of State / U.T code as per Indian Motor Vehicle Act,1988 is available at the end.
- G) List of two character ISO 3166 country codes is available at the end.
- H) Please read section wise detailed guidelines / instructions at the end.
- I) For particular section update, please tick (?) in the box available before the section number and strike off the sections not required to be updated.

For office use only Application Type* New Update
 (To be filled by financial institution) KYC Number (Mandatory for KYC update request)

1. ENTITY DETAILS* (Please refer instruction A at the end)

Name

Entity Constitution Type* Others (Specify) (Please refer instruction B at the end)

Date of Incorporation / Formation* DD - MM - YY YY Date of Commencement of Business DD - MM - YY YY

Place of Incorporation / Formation* Country of Incorporation / Formation* TIN or Equivalent Issuing Country

PAN * Form 60 furnished

TIN / GST Registration Number

2. PROOF OF IDENTITY (Pol)* (Please refer instruction B at the end)

Officially valid document(s) in respect of person authorised to transact

Certificate of Incorporation / Formation Registration Certificate Regn Certificate No.

Memorandum and Articles of Association Partnership Deed Trust Deed

Resolution of Board / Managing Committee Power of attorney granted to its manager, officers or employees to transact on its behalf

Activity Proof - 1 (For Sole Proprietorship Only) Activity Proof - 2 (For Sole Proprietorship Only)

3. ADDRESS* (Please see instruction C at the end)

3.1 Registered Office Address / Place of Business*

Proof of Address* Certificate of Incorporation / Formation Registration Certificate Other Document

Line 1*

Line 2

Line 3 City / Town / Village

District" PIN / Post Code* State / U. T Code* ISO 3166 Country Code*

3.2 Local Address in India (If different from Above)*

Line 1*

Line 2

Line 3 City / Town / Village

District" PIN / Post Code* State / U. T Code* ISO 3166 Country Code*

4. CONTACT DETAILS (All communications will be sent to Mobile number/ Email-ID provided" may be used) (Please refer instruction D at the end)

Tel. (Off) - FAX

Mobile - Email ID

Mobile - Email ID

5. NUMBER OF RELATED PERSONS (Please refer instruction E at the end)

6. REMARKS (If any)

7. APPLICANT DECLARATION (Please refer Instruction G at the end)

- I hereby declare that the details furnished above are true and correct to the best of my 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 aware that I may be held liable for it.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : DD - MM - YY YY Place :

Signature / Thumb Impression of Applicant

8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies Equivalent e-document

KYC VERIFICATION CARRIED OUT BY

INSTITUTION DETAILS

Identity Verification Done Date --
 Emp. Name
 Emp. Code
 Emp. Designation
 Emp. Branch

(Employee Signature)

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Legal Entity / Other than Individuals KYC Application Form

- A Clarification / Guidelines for filing Entity Details section**
- Entity Constitution Type

A - Sole Proprietorship	H - Trust	O - Artificial Juridical Person
B - Partnership Firm	I - Liquidator	P - International Organisation or Agency / Foreign Embassy or Consular Office etc.
C - HUF	J - Limited Liability Partnership	Q - Not Categorized
D - Private Limited Company	K - Artificial Liability Partnership	R - Others
E - Public Limited Company	L - Public Sector Banks	S - Foreign Portfolio Investors
F - Society	M - Central/State Government Department or Agency	
G - Association of Persons (AOP) / Body of Individuals (BOI)N - Section 8 Companies (Companies Act, 2013)		
 - In case of companies and partnerships, PAN of the entity is mandatory. In case of other entities, FORM 60 may be obtained if PAN is not available.
- B Clarification / Guidelines for filing 'Proof of Identity[Pol]' section**
- Activity Proof - 1 and Activity Proof - 2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
 - Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
 - Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
 - 'Equivalent e-document' means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
 - 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
 - KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.
- C Clarification / Guidelines for filing 'Proof of Address [PoA]' section**
- State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
 - Certified copy of document or equivalent e-document to be submitted.
- D Clarification / Guidelines for filing 'Contact Details' section**
- Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
 - Do not add '0' in the beginning of Mobile number.
- E Clarification / Guidelines for filing 'Related Person Details' section**
- Personal Details
 - The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
 - Proof of Address [PoA]
 - PoA to be submitted only if the submitted Pol does not have an address or address as per Pot is invalid or not in force.
 - State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
 - In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
 - REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.
 - If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.
 - Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- F Provision for capturing signature of multiple authorised persons is to be made by the RE.**

Detail of Promoters / Partners / Karta / Trustee / Authorised Signatory and Whole Time Directors forming part of KYC Application form for Non-Individual.

Related Person Type:- Director Promoter Karta Partner Trustee Authorised Signatory Other _____

Name:- _____

Father / Spouse Name: _____

Mother Name: _____ Marital Status: _____

Date of Birth: _____ Gender : _____ Nationality: _____

PAN: _____ DIN/UID: _____

Mobile: _____ Email: _____

Address: _____

PHOTOGRAPH
Please affix your recent passport size photograph and sign across it.

City: _____ Pin Code _____ State: _____ Country: _____

Related Person Type:- Director Promoter Karta Partner Trustee Authorised Signatory Other _____

Name:- _____

Father / Spouse Name: _____

Mother Name: _____ Marital Status: _____

Date of Birth: _____ Gender : _____ Nationality: _____

PAN: _____ DIN/UID: _____

Mobile: _____ Email: _____

Address: _____

PHOTOGRAPH
Please affix your recent passport size photograph and sign across it.

City: _____ Pin Code _____ State: _____ Country: _____

Related Person Type:- Director Promoter Karta Partner Trustee Authorised Signatory Other _____

Name:- _____

Father / Spouse Name: _____

Mother Name: _____ Marital Status: _____

Date of Birth: _____ Gender : _____ Nationality: _____

PAN: _____ DIN/UID: _____

Mobile: _____ Email: _____

Address: _____

PHOTOGRAPH
Please affix your recent passport size photograph and sign across it.

City: _____ Pin Code _____ State: _____ Country: _____

 Name & Signature of the Authorized Signatory(ies)

Date / /

For Individuals & Non-individuals
TRADING ACCOUNT RELATED DETAILS
MANDATORY
A. BANK ACCOUNT(S) DETAILS

Bank Name:														
Branch Address:														
Bank A/c. No.:										Account Type: SB/CA/Others-In case of NRI/NRE/NRO				
MICR Number:					IFSC Code:									

B. DEPOSITORY ACCOUNT(S) DETAILS

Depository Participant Name														
Depository Name										Depository Type <input type="checkbox"/> NSDL <input type="checkbox"/> CDSL				
Beneficiary Name														
DP ID					Beneficiary ID (BO ID)									

C. TRADING PREFERENCES

(Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you.)

Exchanges	NSE & BSE				MCX
	Cash	F&O	Currency	Debt	Commodity Derivatives
☞	☞	☞	☞	XXXXXXXXXX	☞

Note : From the above format, delete Segment / Exchange which is not applicable from the Format.

D. OTHER DETAILS

1. Gross Annual Income details (please specify) : Income Range per annum

rUpto Rs. 1,00,000/- rRs. 1,00,001/- to Rs. 5,00,000/- rRs. 5,00,001/- to Rs. 10,00,000/-

rRs. 10,00,001/- to Rs. 25,00,000/- r25,00,001/- to Rs. 100,00,000/- rAbove Rs. 100,00,001/-

Net worth as on Date : _____ Rs. _____ (Net worth should not be older than 1 year)

2. Occupation (please tick any one and give brief details) 3. Please tick, if applicable	rPrivate Sector rPublic Sector rGovernment Service rBusiness rStudent rProfessional rAgriculturist rRetired rHousewife rOthers	For Ind. only
	rPolitically Exposed Person (PEP) rRelated to a Politically Exposed Person (PEP)	

4. Is the entity involved/providing any of the following services rYES NO

- For Foreign Exchange / Money Changer Services rYES rNO - Gaming / Gambling / Lottery Services

(e.g. casinos, betting syndicates rYES rNO

- Money Lending / Pawning rYES rNO

For NI only

5. Any other information
E. PAST ACTIONS

- Details of any action/proceedings initiated/pending/ taken by SEBI / Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years : _____

F. DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS

- If Client is dealing through the sub-broker, provide the following details :

Sub-broker's Name: _____ SEBI Registration number: _____

Registered office address : _____

Ph: _____ Fax: _____ Website : _____

- Whether dealing with any other stock broker/sub-broker (in case dealing with multiple stock brokers/sub-brokers, provide details of all)
 Name of stock broker : _____
 Name of sub broker, if any : _____
 Client Code : _____ Exchange : _____
 Details of disputes/dues pending from/to such stock broker/sub-broker _____

G. ADDITIONAL DETAILS

- Mode of Receiving Contract Notes and other documents Physical Electronic
 Specify your E-mail ID if applicable : _____
- Internet Trading/Wireless Trading Facility Yes No
- Number of years of Investment/Trading Experience: _____
- In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorized to deal in securities on behalf of company/firm/others: _____
- Any other information: _____

H. INTRODUCER DETAILS (optional)

Name of the Introducer: _____
(Surname) (Name) (Middle Name)

Status of the Introducer: Sub-broker/Remisier/Authorized Person/Existing Client/Others, please specify _____

Address and Phone no. of the Introducer: _____

Signature of the Introducer: _____

DECLARATION

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes there in, 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.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do here by agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for information on stock broker's designated website, if any.

Place 
Date (_____)
Signature of Client/ (all) Authorized Signatory (lies)

FOR OFFICE USE ONLY

UCC Code allotted to the Client : _____

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Employee			
Employee Code			
Designation of the employee			
Date			
Signature			

I/We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/we have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.



Signature of the Authorised Signatory

Date _____

Seal/Stamp of the stock broker

INSTRUCTIONS/CHECK LIST

1. Additional documents in case of trading in derivatives segments - illustrative list :

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income - Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement.	Bank account statement for last 6 months
Any other relevant documents substantiating ownership of assets.	Self declaration with relevant supporting documents.

*In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.

2. Self-certified copy of cancelled cheque leaf/pass book/bank statement specifying name of the constituent, MICB. Code or/and IFSC Code of the bank should be submitted. (Not more than 4 months old)
3. Demat master or recent holding statement issued by DP bearing name of the client.
4. For individuals :
 - a. Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office.
 - b. In case of non-resident clients, employees at the stock broker's local office, overseas can do in-person' verification, Further, considering the infeasibility of carrying out 'In person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
5. For non-individuals :
 - a. Form need to be initialized by all the authorized signatories.
 - b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.

Brokerage and Schedules of Charges For Equity Derivative
MANDATORY

Further, I agree to the following terms of doing business:

Particulars	Cash Segment		Type of Future/ option Contract	Futures			Options		
	Min (`/Paise)	Max %		Min (`/Paise)	Min Per Lot `	Max %	Min (`/Paise)	Min Per Lot `	Max %
Single side			Nifty/						
			Bank Nifty						
			Currency						
			Others						
Both Sides			Nifty/						
			Bank Nifty						
			Currency						
			Others						
Delivery			Nifty/						
			Bank Nifty						
			Currency						
			Others						

Brokerage Slab for Commodities Derivative

	Futures		Options		Minimum per Lot Value	
	First Leg	Second Leg	First Leg	Second Leg	First Leg	Second Leg
Daily Square off						
Settlement Square off						
Physical Delivery						

- Note:
- Inter settlement arising out of purchase and sale transactions affected by constituent shall be debited to constituent account.
 - Statutory and Exchange Chargeds :
 - Securities Transaction Charges, SEBI Turnover Fees, Transaction Charges shall be levied as per the prevailing rate;
 - Statutory levies including but not limited to Service Tax, Stamp duty, Education Cess and shall be levied as per the prevailing rate;
 - The above rates are subject to change by the Regulatory Authorities and Government Agencies
 - Charges for issue of Duplicate Contract, Bills, statements etc. Rs. 50/- per document type.
 - Cheque Bounce/ Stop Payment charges Rs. 250/- per cheque.
 - Brokerage shall not exceed maximum permissible limit as per rules & regulations of Exchange / SEBI.
 - In case discounted* Brokerage Plan if order is placed over a phone call, an additional charge of Rs. 30 + GST is levied for an executed call and trade order.
 - SMS for communication of Order placement : SMS charges Rs. 75/- per month

Signature of the Client _____

POLICIES AND PROCEDURES OF MANDOT SECURITIES PVT. LTD.

A. Refusal of orders for ``Penny Stocks``

Although, the term ``Penny Stock`` has not been defined by BSE/NSE or any other stock exchange or by SEBI, a ``Penny Stock`` generally refers to a stock which has following characteristics :

- Has small market capitalization :
- Trades at a price less than its face value;
- Has unsound fundamentals;
- Is illiquid

(A list of illiquid securities is jointly released by BSE/NSE from time to time.)

MANDOT SECURITIES PVT. LTD. (recognizes that it is the client's privilege to choose shares in which he/she would like to trade. However, **MANDOT SECURITIES PVT. LTD.** would like to pay special attention to dealing in ``Penny Stocks``. To this end :

- **MANDOT SECURITIES PVT. LTD.** may refuse to execute any client's order in ``Penny Stocks`` without assigning any reason for the same.
- Any large order for purchase or sale of a ``Penny Stock`` should be referred to Head - Dealing before such orders can be put in the market for execution.
- Clients must ensure that trading in ``Penny Stock`` does not result in creation of artificial volume or false or misleading appearance of trading. Further, clients should ensure that trading in ``Penny Stock`` does not operate as a device to inflate or depress or cause fluctuations in the price of such stock.
- Clients are expected not to place orders in ``Penny Stocks`` at prices which are substantially different from the prevailing market prices. Any such order is liable to be rejected at the sole discretion of **MANDOT SECURITIES PVT. LTD.**
- Notwithstanding the above, in case of sale of ``Penny Stocks``, clients should ensure the delivery of shares to **MANDOT SECURITIES PVT. LTD.** before the pay-in date.

B. Setting up client's exposure limit

- Exposure limit for each client is determined by the Risk Management Department based on client's networth information, financial capacity, prevailing market conditions and margin deposited by client in the form of funds / securities with **MANDOT SECURITIES PVT. LTD.** These limits may be set exchange-wise, and scrip-wise.
- The limits are determined by Risk Management Department based on the above criteria and the payment history of the client in consultation with Sales/Sales traders.
- **MANDOT SECURITIES PVT. LTD.** retains the discretion to set and modify, from time to time, any client's exposure limit decided as above.
- Whenever any client has taken or wants to take exposure in any security **MANDOT SECURITIES PVT. LTD.** may call for appropriate margins in the form of early pay-in of shares or funds before or after execution of trades in the Cash segment. In case of any margin shortfall, the clients will be told to reduce the position immediately or they will be requested to deposit extra margin to meet the shortfall. Otherwise, **MANDOT SECURITIES PVT. LTD.** may refuse to trade on behalf of such client at its own discretion.

C. Applicable brokerage rate

- Brokerage Rate is mutually decided between the **MANDOT SECURITIES PVT. LTD.** and each client based on client's networth, expected trading volume, etc. The maximum brokerage chargeable will not exceed the rates prescribed by SEBI and the exchanges.
- The applicable brokerage rate is mentioned in the Client registration form and any change in the brokerage rate in future will be communicated to the client in writing.

D. Imposition of penalty / delayed payment charges by either party, specifying the rate and the period

- Penalty and other charges levied by Exchanges pertaining to trading of the client shall be recovered from the respective client.
- If there is delay on the part of the client in satisfying his / her margin obligation or settlement obligation then **MANDOT SECURITIES PVT. LTD.** shall levy delayed payment charges at the rate of 18% p.a. + GST on such shortfall for the period of delay on such client **MANDOT SECURITIES PVT. LTD.** shall recover such delayed payment charges from the client by debiting the client's account.
- No interest or charges will be paid by **MANDOT SECURITIES PVT. LTD.** to any client in respect of retention of funds or securities towards meeting future settlement obligations and in respect of running account authorizations.

E. Right to sell clients securities or close clients' positions, without giving notice to the client, on account of non-payment of client's dues.

- **MANDOT SECURITIES PVT. LTD.** has the right to close out/liquidate or square off any open position of the client (limited to the extent of settlement / margin obligation), without giving any prior notice, all or any of the client's positions as well as securities / collaterals placed as margins for non-payment of margin or other amounts due from such client in respect of settlement or any other lawful dues that are recoverable from the client by **MANDOT SECURITIES PVT. LTD.** The proceeds of the same shall be adjusted against the client's trade liabilities / obligations. Any loss or financial charges on account of such close-out / liquidation shall be debited to the client's account.

F. Shortages in obligations arising out of internal netting of trades.

- To determine the net obligation of a broker / trading cum clearing member (for securities and funds) in a settlement, clearing house does the netting of trades at the broker level. Due to default by one or more clients in fulfilling their obligations towards the broker, the broker internally might have shortages to fulfill its obligations towards the other client(s). In such situation **MANDOT SECURITIES PVT. LTD.** shall endeavor to collect the securities from the selling client and deliver it to the purchasing client within 48 hours of the settlement date. In case the selling client is not able to deliver the securities within 48 hours, their **MANDOT SECURITIES PVT. LTD.** shall attempt to purchase the security from the market and deliver it to the purchasing client. The purchase cost as well as all the incidental charges shall be debited to the account of the defaulting client. If **MANDOT SECURITIES PVT. LTD.** is not able to procure the securities from the market, then the transaction will be closed out as per the auction rate prescribed by the Exchange for that scrip and the closing amount will be credited to the purchasing client and debited to the selling client.

G. Conditions under which a client may not be allowed to take further position or the broker may close the existing position of the client.

MANDOT SECURITIES PVT. LTD. shall have absolute discretion and authority to limit client's volume of business or to close any existing position of a client without giving any prior notice to the client under following conditions :

- Extreme volatility in the market or in particular scrip or in the F & O segment.
- There is shortfall in the margin deposited by client with **MANDOT SECURITIES PVT. LTD.**
- If there are insider trading restrictions on the client.
- If there are any unforeseen adverse market conditions or any natural calamity affecting the operations of the market.
- If there are restrictions imposed by the Exchange or the Regulator on the volume of trading outstanding positions of contracts.
- If the client is undertaking any illegal trading practice or the client is suspected to be indulging in money laundering activities.
- If **MANDOT SECURITIES PVT. LTD.** has reached its limit in that particular scrip.
- If the client has breached the client-wise limit.
- If the client has taken or intends to take new position in a security which is in the banned period.
- If due to abnormal rise or fall in the market, the markets are closed.

H. Temporarily suspending or closing a client's account based on the client's request.

- Any client desirous of temporarily suspending his or her trading account has to give such request in writing to the management. After management's approval, further dealing in such client's account will be blocked. Whenever trade has to be resumed in any suspended client's account, a request in writing should be made by the client to the management and the management may ask for updated financial information and other details for reactivating such account. After receiving necessary documents, details, etc. and approval from the management, the client account will be reactivated and transaction will be carried out.
- Similarly, any client desirous of closing his / her account permanently is required to inform in writing and the decision in this regard will be taken by the management. After necessary approval from the management, the client code will be deactivated. Only after scrutinizing the compliance requirements and a "no pending queries" confirmation is taken, securities and funds accounts will be settled.

I. Deregistering a Client

MANDOT SECURITIES PVT. LTD. may, at its absolute discretion, decide to deregister a particular client. The illustrative circumstances under which **MANDOT SECURITIES PVT. LTD.** may deregister a client are given below:

- SEBI or any other regulatory body has passed an order against such client, prohibiting or suspending such client from participating in the securities market.
- Such client has been indicted by a regulatory body or any government enforcement agency in case of market manipulation or insider trading or any other case involving violation of any law, rule, regulation, guideline or circular governing securities market.
- Such client is suspected of indulging in illegal or criminal activities including fraud or money laundering.
- Such client's name appears in the UN list of prohibited entities or in the SEBI debarred list.
- Such client's account has been lying dormant for a long time or the client is not traceable.
- Such client has been declared insolvent or any legal proceedings to declare him / her as insolvent have been initiated.
- Such client has been irregular in fulfilling obligations towards margin or settlement dues.
- Such client has a tainted reputation and any business relationship with such clients is likely to tarnish the reputation of **MANDOT SECURITIES PVT. LTD.** or may act as deterrent to **MANDOT SECURITIES PVT. LTD.**

J. Inactive Client Account

Client account will be considered as inactive if the client does not execute a single trade during the period of 12 months from the last trade. In such cases, the client has to make a written request for reactivation of his trading account. with recent proofs and any upgradation in the KYC form.

A list of inactive clients shall be generated from the back office software and forwarded to concerned management for approval. On approval the list shall be forwarded to other departments for further action.

Such clients shall be marked as "inactive" in front office and back office.

After inactive marking, if any orders are received, then dealer shall take reasonable steps to be ensure that the orders are received from respective clients only. The dealers shall use various techniques like call back, asking personal questions etc. to confirm the identityof the person.

Return of client assets : When a client is declared as inactive all the securities of the client are transferred to the demat account of the client. The funds belonging to the client shall be returned to the client. If for any reason the funds and securities of the client cannot be transferred to the client's bank account or demat account then the same shall be transferred into a separate account of the organization. The funds and securities shall be held in the separate account until the time the organization hears from the client or their representatives.

Any outstanding lawful dues in the client's account will be communicated and collected from the client and the client will be liable to pay such dues immediately on receiving such communication.

I/We have fully understood the above and do here by sign the same. These policies and procedures may be amended unilaterally by the broker, Return of client's funds & securities aspect. provided the amendment is informed to me / us as per applicable laws, rules & regulation of Exchange/SEBI by any approved mode of communication and also uploading the revised policy on the website of the member. These policies and procedures shall always be read the compulsorily referred to while deciding any dispute or claim between me/us and broker any regulator or arbitrator or court of law.



(Signature of the constituent)

INSTRUCTIONS FOR THE APPLICANTS FOR ACCOUNT OPENING

Applicant shall fill up the KYC Application form as specified by the KYC Registration Agency for individuals w for Non Individuals as the case may be and additional KYG Form for unponio. a Denial Account for Individuals (Annexura 2 1) or for Non Individual,-, (Ajnixture ? ?) and submit the same to the DP The applicant should submit any one of the documents as valid Proof of Identity and Proof of address as specified by SEBI from time to time If the investor is already KRA compliant, the investor should disclose such details of KRA with whom he / she is registered Such investor need not submit KYC documents and KYC application form again A Power nt Attorney holder cannot open a demat account on behalf of the BO DP must collect separate KYC application forms from sate / first holder, second holder and third holder in case of Joint Accounts In case, if sole holder is a minor. KYC application form should be collected from the guanfian also Separate KYC application (orrn lu be collected (torn the HIJF entity. Karta. Trust and Trustees in case of unregistered Trust and Partnership Firms In order to open an account, the investor needs to fiH up KYC Application form (if not KRA compliant) and Additional KYC form for opening a demat account As per the format provided by CDSL (Annexures 2 1 or 2 2) The investor shall complete the standard form in all respects and submit the same to the DP along with the relevant documents as prescribed by SEBI vide circular no MIRSO/SE/CIR 21/2011 dated October 5. 2011 and circular no MIRSO/CIH 2&2011 dated December 23. 2011 However the DPs can obtain a single form from the CM for opening the multiple accounts of same exchange, e y CM Puna pai and CM USA accounts for BSE arid CM Clearing Member for exchanges other than B3E Instructions to the applicants / BOs for account opening as given in Annexure 2 3 may also be phnted on the account opening forms or given to the BOs as a separate sheet along with the accounting form Those section of the application form, which are not relevant to any particular type of BO, shall be marked "Not Applicable" BO must provide photocopies of documents submitted on regulai paper and not on thermal facsimile paper

Obtaining PAN Card details of all holders is compulsory for all categories of demat account holder (s) & updation of the same in CDSL system. In some cases, the PAN is not required to be entered. Such cases are lo be handled by entering appropriate exemption code. The exemption codes provided are as follows:

Exemption Code	D	O	P	S	U	H
Exemption Description for the account holder	Custodian	Governor	President of India	Sikkim Resident	UN entities/ Multilateral Agencies	Holder Deceased

CHECK-LIST - (All the documents must be self attested by applicant)

(A) Correspondence Address

- This is applicable to all type of investors • If correspondence address of the BO is not the same as permanent address, then the DP shall obtain proof of rjurespnadence address and enter the same in the system in case the BO is not registered with KRA
- If the BO 15 (egistered with KRA and wants to use the same correspondence address mentioned in the KRA system the BO will inform the DP accordingly ● if the BO is registered with KRA and does not want to use the correspondence address mentioned in the KRA system, the BO will inform the DP and submit Sf BI specified proof of address document for the address to be entered on CDSL system
- As per SEBI Circular No CIR/MRO/DP/37/2010 dated December 14, 2010, address of a third party as a correspondence address, may be captured in a BO account priivKfed thal the Depository Participant (DP) ensures lial all prescnbed Know Your Client' norms are fuHiled for the third party also The DP shall obtain proof trt identity and proof of address for the third party The DP shall also ensure thal customer due diligence norms as specified in Rule 9 of Prevention of Money Laundering Rules 2005 are complied with in respect of the third party
- Where third party address is accepted as correspondence address the DP shall ensure thal proof of permanent address for the BO has been obtained and the same has been entered in the system DPs should ensure thal the statement nt transactions and holdings are sent lo the BO's permanent address atleast once in a year • In case of PMS accounts, portfolio manager s address cannot be captured as correspondence address

(B) Minor Details

The minor shall be the first and sole holder in the account i e there shall not be any joint accounts where a minor is a First / Second / Third joint holder PAN card details of minor have to be entered in CDSL system

In case of death of Guardian of existing Minor account holder

In the case of death of the guardian of an existing minor account holder, the following procedure shall be followed

- i Original Death Certificate of the deceased Guardian or a copy of the same, duly notarized or attested by a Gazetted Officer
- ii The minor's account shall be frozen under the appropriate reason code tilf the new guardian has completed all formalities
- iii Original or copy of the Court Order (dury notarized or attested by a Gazetted Officer), if the new guardian has been appointed by the Court
- iv The new guardian shall submit a new account opening form duly complete in all respects along with KYC application form or details of KRA registered with
- v DP has id provide a copy of Rights and Obligations document to t)» new guardian and keep an acknowledgement of the same on record
- vi The new guardian shall submit a fresh Nomination Form for the minor's account
- vii After verification of the AOF and documentation, delate of the Guardian of the Minor account holder shaH be suitably modified in the CDSL system
- viii The signature of the deceased guardian shall be deleted and the signature of the new guardian shall be recorded in the CDSL system
- ix POA documents/details, if any, recorded with the signature of the deceased guardian shall be deleted

After the minor has attained majority, DP must collect new KYC application form after the minor has attained majority The following procedure is to be adopted ● The account holder shall submit KYC application form or details of KRA registered with ● The account holder shall submit a new account opening form duly complete in all respects the DP shall provide a copy of the Fbghts and Obligations document to the account holder and shall keep an acknowledgment of the same on record ● The guardian's details shall be deleted and guardian's signature shaH be replaced by account holder's signature

The above procedure can be followed only if the word 'minor' is not present in the "Account Holder's name" when the account was opened If "minor" word is present, then the existing account has to be closed and a new account shall be opened

(C) HUF The documents to be obtained are

- a) The PAN details of the HUF entity would have lo be entered m the CDSL system
- b) Declaration by Karta giving details of the family members of the HUF with their names, sex (male/ female), date of birtti and relationship with the Karta
- c) DPs shall note the following white opening a HUF account
 - HUF accounts cannot be opened with join) holder(s) ● HUF accounts cannot appoint a nominee ● in the account opening form, the Karta shall sign under the HUF stamp
 - Account can be opened in the name of Existing Karta / HUF entity ● The name shall be as it appears in the PAN card e.g. A H Doshi & Sons. Bal Govrnd Zangle (HUF)
 - in case POA is to be given by the karta to some other entity to operate the HUF Account, the POA shall be signed by all the members of the HUF account in additnn to the ltarta

Procedure to be adopted in the event of death of Karta is as follows

- HUF being a Hindu Undivided Family the property of the family is managed by the Karta ● HUF does not come to an enrff in the event of death of the Karta In such a case the members of the HUF will appoint the new Karta ● The new karta shall submit the new list of members and a no objection from the surviving membeis of the HUF tor him to act as Karta of the HUF ● The new Karta will submit to the DP the account! modification form and record change in signature of the new Karta to operate the account ● The previous account need not be closed and the same account can continue

Procedure to be followed in case of partition of HUF

In case of partial partition of the HUF if or"l or two members of the HUF have left, the others can still continue the HUF in the existing name In case of tuH partition the entire 1-HUF is dissolved in both the above cases, the Karta can transfer shares to the members who seek partition it the issue of transfer cannot be amicably settled the family members can go to court and transfer of shares can then be based on the Court directions

Procedure to be followed in case of POA being given for the HUF

The Power of Attorney (.POA) document shall be signed by the Karta of the HUF and all the co-parceners

(D) NRI

- a) In case of foreign address, if address with P O Box No has been submitted as Permanent and/or Corre&pondence address Additionally the DPs snail obtain the complete residential address of the NRI BO, under declaration at the time of opening of the account Such BO shal give an undertaking that whenever there is a change in the residential address, the BO shall inform the DP
- b) A declaration duly signed by the NRI thal he/she has complied with and wiH continue to comply with, FEMA regulations and other applicable laws Change of status from NRI to Resident and vice versa:

It is the responsibility of the individual id inform the change of status to the DP with whom he/she has opened the demat account Subsequently, a new denial account in the new status will have to be opened, securities shall be transferred from the old demat account to the new demat account and then the old demat account shall be dosed

(F) Foreign Nationals

- a) Document same as NHI • b) If the foreign address with P O Box No is given as Permanent and/or Correspondence address. additionJry, the DPs should obtain the complete residential address of the Foreign National BO, under declaration at the time of opening of the account Such BO shaH give an undertaking that whenever there is a change in the residential address, the BO shall inform the DP

(F) Association of Persons (AOP)

- a) Object of the association h) Powers of the Managing Committee c) Copy of the Bye Laws

(G) Proprietary/Partnership Firms

BO accounts in the name of the Proprietor/Concern or Partnership Firm cannot be opened in COSL system KYC application form / KFTA details are to be obtained for proprietor / partners and partnership firm For Partnership firm. Partnership deed is also to be obtained The pan card details of the partnership firm / proprietor is to be updated in the COSL system

BO'S Account can have a maximum of three names associated with it the Sole/ First Account holder, the First Joint holder and the Second Joint holder One passport-size photograph of each applicant shall be pasted on the form along with their signatures across the photograph and Account Opening Form

(H) Foreign Corporate

A duly signed declaration that the corporate has complied with, and will continue to comply with, FEMA Regulations and other applicable laws.

I Clearing Member

- a) If CM is a corporate body True copy of certificate of registration with SEBI, certified by Managing Director/Company Secretary / notarized
 b) If CM is a not a corporate body • The CM account (CM Pool / CM Principal / 1 / Early Pay-m) may be opened in the COSL system
 i)- either in the name of the partnership firm/entity as mentioned on the Certificate of Registration with SEBI. or ii)- in the name of the proprietor or partner. (up to three partners) • Photocopy of Certificate of Registration with SEBI, duly notarized
 c) Asset Management Company (AMC) Pool Account • This account is linked with a stock exchange
 Following document is to be submitted by the AMC for opening the pool account with any DP of COSL for the purpose of settlement of mutual fund units
 • Letter / circular / instructions issued by the concerned Stock Exchange indicating the CM ID

(J) OCBs

- a) Certified true copy of Board Resolution, certified by Managing Director/Company Secretary for persons authorized by the Board to act as authorized signatory (s).
 b) Names of the authorized signatory (s), designation, photographs and their specimen signatures, certified by Managing Director/Company Secretary.
 c) Memorandum and Articles of Association of the Company.
 d) RBI Registration Certificate.
 e) Declaration from the OCB that it meets with the guidelines issued by RBI / Ministry of Finance.
 f) Certificate from overseas auditors in Form OAC or OAC - 1, as may be applicable.
 g) Statement of account from the Bank.

(K) Society

Registered Society The account shall be opened in the name of the society

Unregistered Society a) The account shall be opened in the names of the members under "Individual" category (maximum three accountholders)

b) All the documents as applicable for account opening under individual category, shall be obtained

(L) Trust

Public Trust/ Charitable Trust and Trust capable of holding property in its name (Registered Trust /Public Trust)

- a) Account shall be opened in the name of the Trust
 b) Certificate of Registration of Trust under the respective Registration Act/Public Trust Act. 1860 / Bombay Public Trust Act. 1950/Public Trust Act. of relevant State
 c) Certified true copy of Board Resolution to open the demat account and specifying the persons authorized by the Board to act as Authorized signatory(ies) to operate the demat account
 d) Names of the authorized signatories, designation, and their specimen signatures duly verified by the Managing Trustee Private Trust
 a) The Board of Trustees shall specify the names of the trustee/s who shall hold/ operate the demat account
 b) The account shall be opened in the names of the trustees under "Individual" category of the first named trustee (maximum three account holders)

Recognized" Funds / Trusts/ Other similar entities

The Funds/ Trusts/ Entities presently included under this category are as follows

- a) Employees Provident Fund, which have been recognized by the Provident Fund Commissioner under Employee's Provident Funds & Miscellaneous Provisions Act. 1952
 b) Employees Gratuity Fund, which are formed under Payment of Gratuity Act, 1972
 c) Superannuation Fund which are formed under the guidelines issued by Income Tax Department
 d) Venture Capital Funds which are registered by SEBI
 e) ESOP Trust formed pursuant to the guidelines issued by SEBI

Accounts of the above Funds/ Trusts/ Entities shall be opened in the name of above Funds/ Trusts/ Entities as they are recognized either under the Income Tax Act or Securities & Exchange Board of India Act, etc

Documents to be furnished by the above Funds/ Trusts/ Entities and other Funds/ Trusts/ Entities, which are similarly placed, are :

- Certificate of Registration if any issued by the authority recognizing the Fund / Trust / Entity as such, • Trust Deed and Rules and/or any document or charter defining their constitution and providing for management thereof, • List of Members on the Board of Trustees/Governing Body, • Certified true copy of the Resolution passed by the Board of Trustees/Governing Body to open the demat account and specifying the persons authorized by the Board to act as Authorized signatory (ies) to operate the demat account • Names of the authorized signatories, designation and their specimen signature duly verified by the Managing Trustee.

(M) Banks

- a) Certified true copy of Board Resolution, or b) Letter on the letterhead of the bank, signed by the Chairman/MD authorizing opening of account and authority given to authorized signatories to open and operate the demat account

(N) Mutual Funds

SEBI Registration Certificate clearly indicating the name of the Mutual Fund

(O) Escrow Account

KYC form /KRA details of entity that is opening the account (RTA / Clearing Member / Manager to the Issue) • The photographs of the authorized signatory (ies) who would be operating the account • PAN card of both parties i.e Corporate entity & Escrow Agent The PAN details of the Corporate entity would have to be captured in the COSL system Procedure for opening Escrow account.

• The escrow account shall be opened in the name and form of < Issuer name> - <Reason for opening the escrow account> operated by <Clearing Member Name> for eg Infosys Technologies Ltd - Buyback Account Operated by - Kary Consultants Ltd • The photographs of authorized signatories who will be opening the account as well as who will be operating the account along with name, designation shall also be obtained • The escrow account shall be active for the limited period of the activity for which it has been opened Such period shall be as specified by SEBI / COSL or any such regulating authority from time to time After the specified period is over the account shall be closed by the DP irrespective of whether the closure instruction is received from the account holder or not

(P) Limited Liability Partnership Firm

Demat Account for Limited Liability Partnership Firm [which is registered under the Limited Liability Partnership Act (2008)]

Such an account shall be opened as < "Company Name" Limited Liability Partnership> or < "Company Name" LLP> For example, if the company name is "ABC" then the demat account shall be opened in the name of < ABC Limited Liability Partnership or <ABC LLP> The following documents shall be obtained

- (i) Regulation (Certificate granted by the Registrar to the LLP under the LLP Act 2008) (ii) Declaration on the letterhead of the LLP signed by all the designated partner/s clearly stating that the within named persons, who are designated partners of the LLP have been nominated as authorized signatories to open and operate the said demat account on behalf of the LLP (iii) The declaration shall specify the manner in which the account will be operated that is jointly or severally and shall give details of the names, addresses and DPIN (Designated Partner Identification Number allotted by the Registrar for each designated partner)/DIN (Directors Identification Number) along with their signatures and photographs (iv) PAN Card details of the LLP are to be entered in the CDSL system (v) The bank details in the name of the LLP, as sole / first holder in the bank account (vi) PAN card of the authorized signatories to be kept on record (vii) In case of change in registered office address of the LLP, the DP should take on record the notice of change of address filed by the LLP with the Registrar
 • Joint holders in the demat account may be allowed • Nomination in such demat accounts shall not be allowed • Such demat accounts shall be opened under "Corporate" status in the CDSL system with the sub-status "Limited Liability Partnership"

Additional KYC Form for Opening a Demat Account

For Individuals

(To be filled by the Depository Participant)

Application No.											Date									
DP Internal Reference No.																				
DP ID	1	2	0	8	2	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 the following details: -

Holders Details

Sole / First Holder's Name																																							
PAN																					UID																		
Second Holder's Name																																							
PAN																					UID																		
Third Holder's Name																																							
PAN																					UID																		

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																		
<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"/> Individual Margin Trading A/C (MANTRA)																
	<input type="checkbox"/> Minor	<input type="checkbox"/> Others (Specify)	<input type="checkbox"/>																
<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)																

Details of Guardian	(in case the account holder is minor)																				
Guardian's Name											PAN										
Relationship with the applicant																					

I / We instruct the DP to receive each and every credit in my / our account (AUtomatic Credit) (If not marked, the default option would be 'yes')	<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	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily 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 / We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	

I / We wish to receive dividend / interest directly in to my 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
--	--

Bank Details (Dividend Bank Details)

MICR code starting with 000 will not be eligible for ECS.

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"/> Cash Credit <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 book 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 options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document and it shall be self-certified by the BO.

OTHERS DETAILS

1. Gross Annual Income details (please specify): Income Range per annum

- Upto Rs. 1,00,000/- Rs. 1,00,00/- Rs. 5,00,000/- Rs. 5,00,001/- to Rs. 10,00,000/-
 Rs. 10,00,001/- to Rs. 25,00,000/- Above Rs. 25,00,001/-

Net worth as on Date : _____ Rs. _____ (Net worth should not be older than 1 year)

2. Occupation (please tick any one and give brief details)

- Private Sector Public Sector Government Service Business Student
 Professional Agriculturist Retired Housewife Others (Specify)

3. Please tick, if applicable

- Politically Exposed Person (PEP) Related to a Politically Exposed Person (RPEP)

4. Any other information

SMS Alert Facility	MOBILE No. +91 _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Refer to Terms & Conditions given as Annexure-2.4	[(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).		

Transactions Using Secured Texting Facility (TRUST).

Refer to Terms and Conditions Annexure - 2.6

I/We wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I/We have read and understood the Terms and Conditions prescribed by CDSL for the same.

- Yes
 No

I/We 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.

 Yes No

I / We have received and read the Rights and 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	Second Holder	Third Holder
Name			
Signature			

(Signatures should be preferably in black ink).

In case of more authorised signatories, please add annexure)

Annexure 3.2

Nomination Form

To,
Mandot Securities Private Limited
217, Silver Sanchora Castle
7, R.N.T. Marg, Indore (M.P.) - 452001

Dear Sir/ Madam,

I/We hereby confirm that I/We **do not wish to appoint any nominee in my demat account** and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the demat account.

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

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

Note:

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination / opt out nomination.

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

BO Account Details														
DP ID										Client ID				
Name of the Sole / First Holder														
Name of Second Holder														
Name of Third Holder														

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name :			
*First Name:
Middle Name:
*Last Name
*Percentage of allocation of securities:			
<input type="checkbox"/> Equally [If not equally, please specify percentage]	%	%	%
Or			
<input type="checkbox"/> Share of each Nominee			

Any odd lot after division shall be transferred to the first nominee mentioned in the form

Nomination Identification Details – [Please tick any one of following and provide details of same]	Nominee 1	Nominee 2	Nominee 3
<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID [Optional Fields]			
*Address:			
*City:			
*State:			
*Pin:			
*Country:			
Mobile no. / Telephone No: [Optional Fields]			
Email ID: [Optional Fields]			
Fax No: [Optional Fields]			
*Relationship with the BO:			
To be filled only if nominee(s) is a minor:			
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:			
*Country:			
*Pin:			
Age			
Mobile /Telephone no.: [Optional Fields]			
Email ID: [Optional Fields]			
Fax No: [Optional Fields]			
*Relationship of the Guardian with the Nominee:			
Guardian Identification details {Please tick any one of following and provide details of same} <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar Saving Bank account no. Proof of Identity <input type="checkbox"/> Demat Account ID [Optional Fields]			

Note : Residual securities: incase of multiple nominees, remaining after distribution of securities as per percentage of allocation. shall be transferred to the first nominee.

*** Marked is Mandatory field**

Note:

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination / opt out nomination.

Details of the Witness	
	Witness Details
Names of Witness	
Address of Witness	
Signature of Witness	

This nomination shall supersede any prior nomination made by the account holder(s), if any.

Place: _____ Date: _____

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

The Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

(To be filled by DP)

Nomination Form accepted and registered wide Registration No. _____ dated _____.

For Depository Participant
(Authorised Signatory)

======(Please Tear here)=====

Acknowledgement Receipt

Received nomination from :

DP ID										Client ID								
Name																		
Address																		
Nomination in favor of First - Nominee																		
Second - Nominee																		
Third - Nominee																		
No Nomination	<input type="checkbox"/> Would like to opt out nomination.																	
Registration No.										Registered on	D	D	M	M	Y	Y	Y	Y

Depository Participant Seal and Signature

Declaration Form for opting out of nomination

To MANDOT SECURITIES PVT. LTD. 217, Silver Sanchora Castle, 7, R.N.T. Marg, Indore (M.P.) - 452 001	Date	D	D	M	M	Y	Y	Y	Y
Trading Code									
UCC/DP ID									
Client ID (only for Demat account)									
Sole/First Holder Name									
Second Holder Name									
Third Holder Name									
I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.									
Name and Signature of Holder(s)*									
1. First Holder Name : _____ Signature _____									
2. Second Holder Name : _____ Signature _____									
3. Third Holder Name : _____ Signature _____									

* Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature

Additional KYC Form for Opening a Demat Account

Application No.											Date									
DP Internal Reference No.																				
DP ID	1	2	0	8	2	3	0	0	Client ID											

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

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.																			

Holders Details (applicable in case of Partnership Firms and Association of Persons (AOP))

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

Sole / First Holder's Name																																						
PAN																				Search Name																		
Second Holder's Name																																						
PAN																				UID																		
Third Holder's Name																																						
PAN																				UID																		

Type of Account (Please tick whichever is applicable)

Status										Sub - Status																			
<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						To be filled by the DP																		
<input type="checkbox"/> CM	<input type="checkbox"/> FI	<input type="checkbox"/> Clearing House	<input type="checkbox"/> Other (Specify)																										
Date of Incorporation																													
SEBI Registration No. (If Applicable)									SEBI Registration Date																				
RBI REGistration No. (If Applicable)									RBI Approval Date																				
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 [Automatic Credit] (If not marked, the default option would be 'yes')	<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	<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 / We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	

Clearing Member Details (To be filled by CMs only)

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

I / We wish to receive dividend / Interest directly in to my 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
--	--

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"/> Cash Credit <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 book 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 options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document and it shall be self-certified by the BO.
MICR code starting with 000 will not be eligible for ECS.

OTHER DETAILS	
Gross Annual Income details (please specify): Income Range per annum	
<input type="checkbox"/> Upto Rs. 1,00,000/- <input type="checkbox"/> Rs. 1,00,001/- to Rs. 5,00,000/- <input type="checkbox"/> Rs. 5,00,001/- to Rs. 10,00,000/- <input type="checkbox"/> Rs. 10,00,001/- to Rs. 25,00,000/- <input type="checkbox"/> Rs. 25,00,001/- to Rs. 100,00,000/- <input type="checkbox"/> More Than Rs. 100,00,000/-	
Net worth as on Date : _____ Rs. _____ (Net worth should not be older than 1 year)	
Please tick if any of the authorized signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors is either Politically Exposed Person (PEP) or Related to Politically Exposed Person (RPEP) <input type="checkbox"/> Please provide details as per Annexure 2.2 A.	
Any other information	

SMS Alert Facility	<input type="checkbox"/> Yes MOBILE NO. + 91 _____	<input type="checkbox"/> No									
Refer to Terms & Conditions given as Annexure-2.4	[(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).										
Transactions Using Secured Texting Facility (TRUST). Refer to Terms and Conditions Annexure - 2.6	I/We wish to avail the TRUST facility using the Mobile number registered for SMA Alert Facility. I/We have read and understood the Terms and Conditions prescribed by CDSL for the same. <input type="checkbox"/> Yes <input type="checkbox"/> No I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST										
	<table border="1"> <thead> <tr> <th>Stock Exchange Name/ID</th> <th>Clearing Member Name</th> <th>Clearing Member ID (Optional)</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)							
Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)									
easi	<input type="checkbox"/> Yes. 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.										

I/We have received and read the document of 'Rights and Obligation of BO-DP' (DP-CM agreement for BSE Clearing Member Accounts) including the schedules there to and the 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 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 Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Designation			
Signature			

(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 AND DEPOSITORIES

MANDATORY

General Clause

1. The Beneficial Owner and the Depository participant (DP) shall be bound by the provisions of the Depositories Act, 1996, EBI (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.

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 there to 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 here in shall unless the context otherwise requires, have the same meanings as assigned there to 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 here to 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.



Sole / First Holder
Signatory



Second Holder
Signatory



Third Holder
Signatory

Demat Debit and Pledge Instruction







Date: __/__/____







Unique Client Code																	
BO ID	:	1	2	0	8	2	3	0	0	0	0						
Name of First Holder	:																
Name of Second Holder	:																
Name of Third Holder	:																

To,
Mandot Securities Private Limited
217, Silver Sanchora Castle
7, R.N.T. Marg, Indore (M.P.) - 452001

Sub: Execution of 'Demat Debit and Pledge Instruction' (DDPI) for transfer of securities towards deliveries / Settlement obligations and pledging / re-pledging of securities as per SEBI circular SEBI/ HO/ MIRSD/ DoP/ P/ CIR/ 2022/ 44 dated April 4, 2022 and SEBI/HO/MIRSD/MIRSD-PoD-1/P/IR/2022/137 dated October 6, 2022 on Execution of Demat Debit and Pledge Instruction' (DDPI).

1. I/ We hereby execute Demat Debit and Pledge Instruction' (DDPI) in the favour of **MANDOT SECURITIES PRIVATE LIMITED** and agree to authorize them to access my/ our BO Account specified above for the limited purpose of settlement / margin obligation as specified below:

Sr. No	Purpose/ Nature of Instruction	Client Signature		
1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same Stock Broker (TM).	First Holder	:	
		Second Holder	:	
		Third Holder	:	
2	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	First Holder	:	
		Second Holder	:	
		Third Holder	:	




3	Mutual Fund transactions being executed on Stock Exchange order entry platforms.	First Holder	:	
		Second Holder	:	
		Third Holder	:	
4	Tendering shares in open offers through Stock Exchange platforms.	First Holder	:	
		Second Holder	:	
		Third Holder	:	

2. List of Beneficial Owner Accounts that the Member is entitled to operate with DDPI are as follows:

Sr. No	Name of the Account Holder	Account Type	Demat Account Number															
			1	2	0	8	2	3	0	0	0	0	0	0	0	2	6	1
1	Mandot Securities Pvt. Ltd.	CDSL Pool	1	2	0	8	2	3	0	0	0	0	0	0	2	6	1	
2	Mandot Securities Pvt. Ltd.	NSDL Pool	I	N	3	0	1	9	8	3	1	0	8	6	4	8	9	8
3	Mandot Securities Pvt. Ltd.	BSE Principal	1	2	0	8	2	3	0	0	0	0	0	0	1	7	9	
4	Mandot Securities Pvt. Ltd.	Early Pay-in	1	1	0	0	0	0	1	1	0	0	0	2	0	0	8	8
5	Mandot Securities Pvt. Ltd.	Client Securities Margin Pledge	1	2	0	8	2	3	0	0	0	0	0	2	6	8	7	5
6	Mandot Securities Pvt. Ltd.	Margin Trading Funding	1	2	0	8	2	3	0	0	0	0	1	0	4	8	2	2

*Any modification, deletion or addition in the above account shall be intimated to me/ us separately.

3. The authorization provided by DDPI shall be applicable for all transactions specified herein from the date of applicability as specified by SEBI/ Exchange.

First/ Sole Holder	Second Holder	Third Holder
		

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 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 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 is solely 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.

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 with out proper authorization, the BO should immediately inform the DP in writing.



First
Signatory



Second
Signatory



Third
Signatory

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 prvider. 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 bythe 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 intereference with or misuse, improper or fraudulent use of the s ervice 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:

Provoding 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 r egistration form subject to the terms and conditions mentioned below. I / We consent to CDSL provoding 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 agre to abide by them and any amendments there to made by the depository from time to time. I / We further undertake to pay free/ CHarges asa 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 / MODIRCATION** (Please cancel out what is not applicable).

BOID

1	2	0	8	2	3	0	0							
---	---	---	---	---	---	---	---	--	--	--	--	--	--	--

(Please w rite 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 messages are to be sent

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

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

The mobile number is registered in the name of : _____

E-mail ID: _____

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

Signatures



Sole / First Holder
Signatory



Second Holder
Signatory



Third Holder
Signatory

Place : _____

Date : _____

VOLUNTARY

OPTION FORM FOR ISSUE OF DIS BOOKLET

DP ID	1	2	0	8	2	3	0	0	Client ID	0	0						
SOI / First Holder																	
Second Holder																	
Third Holder																	

To,
MANDOT SECURITIES PVT. LTD.
 217, Silver Sanchora Castle,
 7, R.N.T. Marg, INDORE (M.P.) - 452 001




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 immediately on opening my / our CDSL account though I / we have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing deliver instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Members / by PMS manager.

Yours faithfully

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

OPTION 2:

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA / execute PMS agreement in favour of / with _____ (name of the 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 date.

	First/Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

MANDOT SECURITIES PVT. LTD.

217 Silver Sanchora Castle,
7, RN.T. Marg, Indore (M.P.) R
DP ID : 12082300

MANDATORY
TARIFF STRUCTURE




Statutory charges at the time of account opening	Nil
Account Maintenance*	<input type="checkbox"/> For Individual & Huf - Rs. 300/- for first quarter of BO or financial year whichever is earlier. Balance quarter of financial year free. <input type="checkbox"/> For others Rs. 1000/- for first quarter of BO or financial year whichever is earlier. Balance quarter of financial year free.
Demat	Rs. 150/- Per certificate (Minimum Rs. 150/-) Plus postal charges.
Remat	15/- per 100 shares or part thereof, OR, 50/- per certificate +CDSL charges
Transaction (Debit)	Within Mandot Group 0.03% of MV (Min. Rs. 20/-) - Outside Mandot Group 0.04% of MV (Min. Rs. 30/-)
Pledge Creation	.03% subject to Minimum Rs. 50/-
Pledge Creation confirmation	Nil
Pledge Closure	.03% subject to Minimum Rs. 50/-
Pledge Closure confirmation	Nil
Pledge Invocation	.03% subject to Minimum Rs. 50/-
Failed instruction charges	Rs. 20/- per instruction
Other charges, if any	(A) Account De-Freezing Rs. 100/- (B) Delay pay-in Instruction Charges Rs. 10/- per transaction. (C) Poa Charges, 150/- Rs.
Remarks	Above Charges are applicable subject to changes from time to time & excluding GST *Conditions apply

Note : GST and other statutory levies would be charged as applicable.

*Rs. 2100 (Individual and HUF)/ Rs. 6500 (Corporates) if BO opt for Deposit Scheme.

*One Time deposit Rs. 750/- (NON-Refundable) For Individual & HUF Rs. 3500/- (Non-Refundable)

Entitites other then above.

	Sole / First Holder / Authorised Signatory	Second Holder / Authorised Signatory	Third Holder / Authorised Signatory
Signatures			

VOLUNTARY

Date : _____

MANDOT SECURITIES PVT. LTD.

 217, Silver Sanchora Castle,
 7, R.N.T. Marg, Indore (M.P.) - 452 001

Sub. : Mobile Phone Communication / SMS Alerts.

This is to confirm that my registered mobile number is as under and is registered in my name / in the name of _____ who is related to me as _____

+	9	1	-																
---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

I hereby request and authorize you to provide any information relating to my account (Bill Summary / Receipts & Payments / Available margin & Market News) with you by way of telephonic calls or SMS alerts.

Sending of the above information to me in the manner as above shall not be construed as violation of any "Do Not Disturb Registry (DND)" made by me.

Delivery of any information made to me in the above manner shall be considered as valid delivery of the information so provided.

Thanking you

Yours faithfully,



Client Name & Signature

VOLUNTARY

AUTHORITY TO DEBIT THE DEMAT ACCOUNT OPERATING CHARGES

Date: _____

MANDOT SECURITIES PVT. LTD.

 217, Silver Sanchora Castle,
 7, R.N.T. Marg, Indore (M.P.) - 452 001

This has reference to my Trading & Beneficiary accounts opened with Mandot Securities Pvt Ltd., the particulars of which are as under

Beneficiary Client Id :

Trading Account Code: _____

With regard to these accounts, and for the sake of my operating convenience, I request and authorize you to debit the bills raised by you, pertaining to the depository services, provided to me to my trading account only. Any such sum debited to my / our Trading account shall be binding on me/us.

Kindly do the needful as requested.

Client Name: _____

 Client Signature:  _____

Date: _____

RUNNING ACCOUNT AUTHORIZATION

VOLUNTARY

To: MANDOT SECURITIES PVT. LTD.
 Mandot Securities Private Limited
 217, Silver Sanchora Castle
 7, RNT Marg Indore - 452001

Dear Sir,

Re: Running Account Authorisation

In order to facilitate operations of my/our trading account opened, I/We would like to authorise Mandot Securities Pvt Ltd to maintain running account, instead of settlement to settlement clearance of funds due to me/us.

1. I/We hereby give my/our consent to maintain a running balance in my account and retain credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) of any segment(s) of any or all the Exchange(s)/ Clearing Corporation unless/ I/ We instruct/ revoke you otherwise.

2. I/We request you to settle my fund account as below: (Tick on appropriate option)

Monthly Quarterly

3. As per the SEBI and Exchanges circulars, the settlement of running account of funds of the client shall be done by the trading member after considering the End of the day (EOD) obligation of funds as on the date of settlement across all the exchange on first Friday of the Quarter/Month. If first Friday is a trading holiday, then such settlement shall be done on the previous trading day. For clients, who have opted for Monthly settlement, running account shall be settled on first Friday of the Quarter/Month. If first Friday is a trading holiday, then such settlement shall be done on the previous trading day.

4. I/We availing margin trading facility as per SEBI circulars, by mar or suppression of any material information

5. I/We having credit balance and have not done any transaction within the 30-calender day since the last transaction, the credit balance shall be returned to me/us within next three working days or prescribed time limits irrespective of the date when running account was previously settled.

6. In case where I/We and I have traded within 30 Calender days and there is outstanding trade position at the end of First Friday (or previous day in case of a holiday) of the Month/Quarter on which settlement of running account of funds is scheduled, a Mandot Securities Pvt Ltd may retain funds in the manner specified below:

i) Entire pay-in obligation of funds outstanding at the end of day (EOD) on date of settlement, across all segments. 50% of end of the day (EOD) margin requirement as cash margin, excluding the margin on consolidated crystallized obligation/MTM.


ii) Apart from above, 225% of EOD margin (which include additional 125% margin) reduced by 50% cash margin and the value of securities (after applying appropriate haircut) accepted as collateral from the client by way of 'Margin Pledge' created in the Depository system for the purpose of margin (after applying appropriate haircut). The Margin on consolidated crystallized obligation/MTM. The margin liability may also include the margin collected as per the risk management policy.

iii) Apart from 50% cash margin in point ii above, member may also retain 225% of EOD margin (which includes additional 125% margin) reduced by 50% cash margin and the value of securities (after applying appropriate haircut) accepted as collateral from the clients by way of 'Margin Pledge' created in the Depository system for the purpose of margin and value of commodities (after applying appropriate haircut). The margin liability shall include the end of the day margin requirement in all the segments across exchanges excluding the margin on consolidated crystallized obligatory/MTM. The margin liability may also include the margin collected by the Member from their clients as per the risk management policy and informed to the clients.

7. Client accounts which are due for settlement in the last month or quarter shall be settled on the date of settlement.

8. I/We confirm you that I/We shall to your notice, any dispute arising from the statement of account or settlement so made, in writing preferably within 7 working days from the date of receipt of funds/securities or statement of account or statement related to it, as the case maybe at registered office.

9. I/We confirm that the above- mentioned authorization shall continue until it is revoked by me/us. I/We confirm having read the above circular and this running account authorization.

Name	
Signature	

AUTHORISATION FOR COMMUNICATION IN DIGITAL FORMAT

VOLUNTARY

From: _____

Date: _____

To,
Dear Sir / Madam,

Sub: Mandate to issue contract notes in digital format & other communications (such as Daily Margin Statement, Statement of Funds & Securities, Account Confirmations, bills, Notice etc.) through an E-Mail

I / We hereby agree and consent to accept the contract notes for transactions carried on by us/me on BSE, NSE & CDSL with you, in terms of the mandatory and voluntary client registration document entered into between us/me, in digital form. Digital contracts issued by you as per the terms and conditions specified herein shall be binding on me/us. The mandate is subject to terms and conditions mentioned herein below.

Terms and conditions for issuance of contract notes in digital form between us :-

1. Digital Contract Notes in the format as may be prescribed by the Exchange from time to time will be mailed to me/us on the E-mail address provided to you.
You can also send me/us my/our margin statement in digital form with contract notes.
2. I / we undertake to check the contract notes and bring the discrepancies to your notice within reasonable time of such issuance of contract notes. My / our non-verification or not accessing the contract notes on regular basis shall not be a reason for disputing the contract note at any time.
3. In case of any failure in system or errors in digital contract notes, or bouncing of email contract notes will be issued in physical form, which shall be binding on the client.
4. Discrepancies, if any, should be sent on E-mail : compliance@mandotsecurities.com
5. Clients can view the digital contract notes using the username & password through the web-site apart from the contract notes sent to the client through mail.
6. The Digital contract notes will be archived at an interval of 1 year. If the client intends to view the digital contract notes for a period prior to 1 year client may request for the same in writing.
7. The contract notes will be issued in digital form in compliance with the guidelines issued by SEBI / Exchanges from time to time.
8. It will be client's responsibility to regularly check the mailbox and keeping the storage space for new email messages.
9. Any changes in the terms and conditions shall be intimated from time to time in writing.
10. Non-receipt of bounced mail notification by the trading member shall amount to delivery of contract note at the e-mail ID of the client.
11. Digital Contract Notes will also be available at our WEB-site: www.mandotsecurities.com
12. Any change in the E-mail ID shall be communicated by us / me through a physical letter.

Other Communications (such as Daily Margin Statement, Statement of Funds & Securities, Account Confirmations, bills, Notice etc.)

You can send me various documents like Daily margin statement, Statement of funds & securities, Account confirmations, bills, notices etc. through an E-mail ID mentioned in this letter.

This instruction to issue digital contract notes & other communications are applicable with immediate effect. This instruction is severable to all parties mentioned above.

My/Our E-mail ID _____

My/Our Alternative E-mail ID _____

I understand that any change in the above email ID can be made by you only against a physical letter personally signed by me, or alternatively if the request is made through the password protected secured access as provided on your website. I undertake to check the electronic contract notes regularly and bring the discrepancies, if any to Mandot Securities Pvt. Ltd. notice within reasonable time of issuance of such digital contract notes.

I also understand that Non-Bouncing of the Electronic Contract Notes (ECN) shall be construed as a valid deemed delivery of the digital contract notes and other electronic documents sent to me, and you shall send physical contract notes to me only in case of any ECN's bounced back to you from my email id.

Failure on my part to check/verify the contract notes on regular basis shall not be a reason for disputing the digital contract note at any time and the payment obligations and transactions and trades shall be adhered to and cleared by me.

	First Holder/Authorised Signatory	Second Holder/Authorised Signatory	Third Holder/Authorised Signatory
Name			
Signature	☞	☞	☞

Electronic Contract Note [ECN]- Declaration**VOLUNTARY**

To ,
Mandot Securities Private Limited

Dear sir,

I _____ a client with Member

M/s . **Mandot Securities Private Limited** of _____

Exchange undertake as follows:

- I am aware that the Member has to provide physical contract note in respect of all the trades placed by me unless i myself want the same in the electronic form.
- I am aware that the member has to provide electronic contract note for my convenience on my request only.
- Through the member is required to deliver physical contract note , find that is / inconvenient for me to receive physical contract Notes. Therefore I, am voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out/ordered by me.
- I have access to a computer and am a regular internet user, having sufficient knowledge of handling the email operations.
- My email id is * _____ .This has been created by me and not by someone else.
- I am aware that this declaration form should be in english or in any other language known to me.
- I am aware that non receipt of bounced mail notification by the member shall amount to delivery of the contract note at the above e-mail ID.
-
- The above declaration of the guidelines on ECN Given in the annexure have been read and understood by me. I am aware of the risk involved in dispensing with the physical contract note, and do here by take full responsibility for the same.

*(The email id must be written in own handwriting of the client.

Client Name _____

Unique Client Code: _____

PAN : _____

Address: _____

Signature: _____

Date:

Place:

Verification of the client signature done by
Name of the designated officer of the Member

Name :

Signature :

Additional Risk Disclose documents for options trading

Risk of option holders :

1. An option holder the nature of an losing the entire amount paid for the option in a relatively . Short period of time this risk the nature of an option as a wasting asset which worthless when it expires . An option holder who neither sells his option in the secondary market nor exercises it prior to its expiration will necessarily lose his entire investment in the option . If the price of the underlying does not change in the anticipated direction before the option expires to an extent sufficient to cover the cost of the option , the investor may lose all or a significant part of his investment in the option.
2. The exchanges may impose exercise restrictions and have absolute authority to restrict the exercise of options at certain times in speciꝒed circumstances .

Risks of Option Writers :

1. If the price movement of the underlying is not in the anticipated direction, the option writer runs the risks of losing substantial amount.
2. The risk of being an option writer may be reduced by the purchase of other options on the same underlying interest and thereby assuming a spread position or by acquiring other types of hedging positions in the options markets or other markets. However, even where the writer has assumed a spread or other hedging positing. the risks may still be significant. A spread position is not necessarily less risky than a simple 'long' or 'short' position.
3. Transactions that involves and writing multiple options in combination , or buying or writing options in combination with buying or selling short the underlying interests , Present additional risks to investors . Combination transactions , such as option spreads are more complex than buying or writing a single option And it should be further noted that as in any area of investing , a complexity not well understood is in itself, a risk factor . While this investment in options , to consult with someone who is experienced and knowledgeable , with respect to the risks and potential rewards of combination transactions under various market circumstances.

Signature of client _____

Date : _____

Consent letter for option Trading in MCX

I/ we _____ want to start in MCX Commodity options and I we fully aware about option trading Risk and obligations.

Name of client/ Authorised person : _____

Client Code : _____

PAN Card No : _____

Signature of Client : _____

Date : _____

Date: _____

HUF DECLARATION
MANDOT SECURITIES PVT. LTD.

 217, Silver Sanchora Castle,
 7, R.N.T. Marg, Indore (M.P.) - 452 001

Dear Sir,

I hereby request you to open our Trading account with you, for our HUF, Being Karta of my family, I hereby declare that following is the list of family members in our HUF, as on Date of Application i.e. _____.

SR. NO.	NAME OF FAMILY MEMBERS	PAN	SEX	RELATIONSHIP	DATE OF BIRTH

I hereby also declare that the particulars given by me as stated above are true to the best of my knowledge as on date for making this Application to open Account.

I agree that any false/misleading information given by me or suppression of any material information will render my said account liable for termination and further action. Further, I agree that I will immediately intimate any death/ s or birth/s in the family as it changes the constitution of the HUF.

Thanking you,
 Yours faithfully,

 Karta
 (Affix stamp of HUF)

**INFORMATION FOR PREVENTION OF MONEY LAUNDERING ACT, 2002
(APPLICABLE TO INDIVIDUAL CLIENTS - FIRST HOLDER)**

CLIENTS DETAILS

Experience	Number of years of Investment / Trading Experience <input type="checkbox"/> <input type="checkbox"/> Any other Information
Education	<input type="checkbox"/> Non-Metric <input type="checkbox"/> SSC/HSC <input type="checkbox"/> Graduate <input type="checkbox"/> Lawyer <input type="checkbox"/> Other Specify
Residential Details	<input type="checkbox"/> Owned <input type="checkbox"/> Rented
Source of Income (Fund Details)	Do you intend to invest in stock market with: <input type="checkbox"/> Own Funds <input type="checkbox"/> Borrowed Funds a) Primary Source <input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Other Specify _____ b) Secondary Source <input type="checkbox"/> Royalties <input type="checkbox"/> Rental <input type="checkbox"/> Dividend <input type="checkbox"/> Other Specify _____

DETAILS OF RELATIVES, HAVING ACCOUNT WITH MANDOT SECURITIES PVT. LTD.

(use Additional Sheet if more than 1 relatives having MANDOT SECURITIES PVT. LTD. A/c.)

Name	
Relationship	
UCC	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Risk Assessment of Client in terms of PMLA 2002

Type of Client	High Risk	Low Risk	Medium Risk	CSC (Client Special Category)	PEP (Politically Exposed Person)
----------------	-----------	----------	-------------	-------------------------------------	--

at the time of account opening

Categorisation of client would be changed only if there is change based on risk assessment of the client during his dealings with Mandot Securites Pvt. Ltd.

For MANDOT SECURITIES PVT. LTD.

Authorised Signatory

APPLICATION FOR INTERNET BASED TRADING (IBT) & SECURITIES TRADING THROUGH WIRELESS TRADING (STWT)

Date: _____




Branch/ AP Code :

Branch/ AP Name:

User Name _____		
(First Name)	(Middle Name)	(Last Name)
Unique Client Code: _____		
Login ID required: _____		
Login ID required <input type="checkbox"/> Symphony	<input type="checkbox"/> Fast Trade	<input type="checkbox"/> ODIN Diet
(✓ Tick as appropriate)		
Type of Service <input type="checkbox"/> IBT	<input type="checkbox"/> STWT	<input type="checkbox"/> Both
(✓ Tick as appropriate)		

Declaration:

- 1) I/ We agree with the terms and conditions specified in Rights and Obligations in respect of IBT and STWT.
- 2) I agree to take all necessary measures for security of User ID and Password, Further, I agree to indemnify for all transactions done through my user ID.
- 3) I/ We have read the Risk Disclosure Document (RDD), Guidance Note, Policies and Procedures. Further, I/We have read and understood the standard set of documents displayed for the information on stock broker's designated website.
- 4) We agree to pay the Usage and Administration charges for usage of IBT and STWT as applicable. Kindly quantify the charges in tariff.

	First Holder/Authorised Signatory	Second Holder/Authorised Signatory	Third Holder/Authorised Signatory
Name			
Signature			

Date:

To,

Mandot securities Pvt Ltd.

Dear Sir

Sub: Option to continue to avail facility of a regular demat account.

This is with reference to SEBI circular CIR/MRD/DP/20/2015 dated December-11-2015 regarding Facility for Basic Service Demat Account (BSDA) and other CDSL Communiqué issued time to time. I am having a Beneficiary account no _____ with you which is a regular demat account.

I hereby declare that I do not wish to convert the said account to BSDA and want to continue as a Regular Demat account.

Thanking you

Client Code :

Client Name :

Signature :

Family Declaration - Updation of common mobile no. /Email ID
(For Individuals only)

Date: _____

To,
MANDOT SECURITIES PVT. LTD.

1. We are relatives belonging to same family and are having our trading or / and demat account (S) with you . Email ID (s) and mobile number (s).....,updated in your records for the purpose of communication is common for all of us.
2. In respect of common mobile number and email id, we state and declare that:
 - a) Any communication related to trading and demat account like trade confirmation , order confirmation , contract notes , Bills ,Margin statements , Transaction and Holding statement , Statements of funds and securities , user ID's Passwords etc shall be sent to the above indicated common email id / mobile numbers only.
 - b) The communication made to common mobile number / email id shall be valid in the same manner as it is made to us in individually capacity .
 - c) We understand that as per relevant SEBI Guidelines , **"Family"** means self , spouse , children and parents.
 - d) Any Subsequent additions or deletions in the family accounts shall be informed by us to you.
3. Details Like Name , BO ID , Client code and relationship is given below:

Sr. No	Client Name	Client Code	DP ID	Relationship*	Signature
1				Self	
2				Spouse	
3				Father	
4				Mother	
5				Daughter/Son	
6				Doughter/Son	
7					
8					

Adjustment of Balances in Family Accounts (for Individuals only)

Date: _____

To,
MANDOT SECURITIES PVT. LTD.

1. We are relatives belonging to same family and are having our trading or / and demat accounts (s) with you.
2. We hereby declare and authorize you for the purpose of margin obligation , Quarterly Settlement of funds and securities , allowing further exposure beyond T+2+5 days to :
 - a) Set off ,consider , retain and adjust credit balance in our ledger accounts against pay in margin obligation of any other relatives.
 - b) to set off , consider retain and adjust securities lying in client beneficiary / Margin account with you or out POA linked beneficiary account.
3. The above declaration shall remain valid for pay-in / Margin or any other obligation arising in any of our other relatives account.
4. We undertake to inform you on any subsequent additions or deletions of members and withdrawal of above authorization . We also confirm and agree that any such withdrawal or deletion shall take effect only of settlement and adjustment of balance in all the accounts of the client belonging to the family.
5. We understand that as per relevant SEBI guidelines , **"Family"** means self spouse , children and parents Details like Name, BO ID , client code relationship is given below.

Sr. No	Client Name	Client Code	DP ID	Relationship*	Signature
1				Self	
2				Spouse	
3				Father	
4				Mother	
5				Daughter/Son	
6				Doughter/Son	
7					
8					

Aadhar Declaration (for Individual only)

Date: _____

Name of the Client / BO
Unique Client Code
BO ID

To ,
MANDOT SECURITIES PVT. LTD.

I am having a trading or / and demat account with you . In accordance with the PMLA , Aadhar Act, 2016 and the related regulations there of , I hereby authorize and provide my consent in respect of my Aadhar number _____ for:

1. Obtaining fingerprint / iris for authentication with UIDAI
2. Collecting , storing and usage
3. Validating / authenticating
4. update with account where required
5. Share details obtained using OTP / Biometric / Demographic information on my behalf to group companies , AMC , PMS Mutual funds , RTA or any other institution in case of purchase or sale of investment or purchase of any product or services through you.
6. I further declare that i have no objection using my identity and biometric information for validation with Aadhar (CIDR) database only for the purpose of authentication

I agree (Put appropriate tick) Yes NO

(_____)
Signature & stamp

*** Sole first holder or authorised Signatories in case of HUF / partnership firm/ Trust / AOP**

Authorization for trading Account (For Individuals only)

Date: _____

To,
Mandot Securites Pvt. Ltd.

1. We are relatives belonging to same family and are having our Trading or / demat account (s) with you. We hereby authorize Mr. / Ms. / Mrs. _____ for executing following activities in our trading in our trading account on our behalf:

- a) To place, Modify and delete Orders.
- b) To accept trade order confirmations
- c) TO accept contract notes, Bills statement of funds and securities ,DIS cheque and other documents on our behalf .

2. WE are fully aware of the risk associated with his appointment for trading related activities and we also agree entire responsibility for any acts omissions of such Authorised persons .

3. The details of authorised person are as follows : (tick as applicable and fill up details)

<input type="checkbox"/> Having trading / Demat Account	<input type="checkbox"/> Not having trading / Demat Account
Client Code	ID Proof
BO ID	Address Proof

*mention the nature of proof and attach self certified copies.

4. we understand that as per relevant SEBI Guidelines , "Family" means self , spouse , children and Parents . Details like Name, BO ID client code and relationship is given below:

Sr. No	Client Name	UCC	BO ID, if any	Relationship*	Signature
1				Self	
2				Spouse	
3				Father	
4				Mother	
5				Daughter/Son	
6				Doughter/Son	

5. WE also undertake to inform you on any subsequent additions , deletions , with drawal of the given authorization.

Acceptance by authorised Person

I _____ undertake to act as authorised person for performing various activities related to trading Account as mentioned above for Aforementioned Signatories.

(_____)
I Accept

(_____)
Date of Acceptance

FATCA / CRS DECLARATION / SELF CERTIFICATION FOR INDIVIDUAL

Client Name				
		First / Sole Holder	Second Holder (if any)	Third Holder (if any)
1.	Are you U.S. Person ? (Refer KYC Handout - Customer Copy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Specify country of residence for tax purpose (Tax Residency)	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other
3.	Specify Country of Citizenship	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other

Note : If you are a U.S. person and /or if your tax residency / nationality / citizenship is other than India, then please provide declaration / self certification under FATCA/CRS.

FATCA & CRS Declaration - Individual

PAN Trading DP Code

Name

Place of Birth Country of Birth

Nationality

Annual Income Below Rs. 1 Lac Rs. 1 Lac to 5 Lac Rs. 5 Lac to 10 Lac
 Rs. 10 Lac to 25 Lac Rs. 25 Lac to 1 Crore > 1 Crore

Net Worth **Amount Rs**..... Net Worth as on

(Net worth should not be older than 1 year)

Occupational Business Private Sector Professional Government Service Public Sector
 Detail Agriculturist Housewife Student Retired Forex Dealer Others Pl. Specify

Politically Exposed Person (PEP) Related to Politically Exposed Person (RPEP)

Are you a tax resident of any country other than India Yes No


If yes please indicates the all countries in which you are resident for tax purpose and the associated Tax ID number below.

Sr. No.	Country	Tax Identification Number	Identification Type (TIN or Other, please specify)
1.			
2.			
3.			

DECLARATION

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Mandot securities pvt.ltd 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 & CRS on Automatic Exchange of Information (AEOI).

Sign here : (I)  (01)

Date :

Place :

FATCA & CRS Declaration - Non Individual

PAN Trading DP Code
 Name

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India Yes No
 (If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

Sr. No.	Country	Tax Identification Number%	Identification Type (TIN or Other, please specify)
1.			
2.			

In case Tax Identification Number is not available, kindly provide its functional equivalent.
 In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.
 In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here

PART A (to be filled by Financial Institutions or Direct Reporting NFEs)

1.	We are a, Financial institution (Refer 1 of Part C) or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate) <input type="checkbox"/>	GIIN <input type="text"/> Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below Name of sponsoring entity <input type="text"/>	
	GIIN not available (please tick as applicable) <input type="checkbox"/>	<input type="checkbox"/> Applied for <input type="checkbox"/> Not obtained – Non-participating FI <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <input type="text"/> (Refer 1 A of Part C)	

PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")

1.	Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)	Yes <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange <input type="text"/>
2.	Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)	Yes <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company <input type="text"/> Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company Name of stock exchange <input type="text"/>
3.	Is the Entity an active NFE (Refer 2c of Part C)	Yes <input type="checkbox"/> Nature of Business <input type="text"/> Please specify the sub-category of Active NFE <input type="text"/> (Mention code – refer 2c of Part C)
4.	Is the Entity a passive NFE (Refer 3(ii) of Part C)	Yes <input type="checkbox"/> Nature of Business <input type="text"/>

UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)

Category (Please tick applicable category): Unlisted Company Partnership Firm Limited Liability Partnership Company
 Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust
 Others (please specify)

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). (Please attach additional sheets if necessary)
 Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)

Details	UBO	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3(iv) (A) of Part C)			
Country of Tax residency*			
PAN #			
Address	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____
Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office
Tax ID %			
Tax ID Type			
City of Birth			
Country of birth			
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____
Nationality			
Father's Name			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Holding (%) [§]			

* To include US, where controlling person is a US citizen or green card holder
[†] If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.
[‡] In case Tax Identification Number is not available, kindly provide functional equivalent
[§] Attach valid documentary proof like Share holding pattern duly self attested by Authorized Signatory/ Company Secretary

DECLARATION

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Mandot Securities Pvt Ltd 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 & CRS on Automatic Exchange of Information (AEOI).

Name	
Designation	

Sign here : (1) Date :
 Place :

For Investor convenience, Mandot Securities Pvt Ltd collecting this mandatory information for updating across all Group Companies whether you are already an investor or would become an investor in future.
 Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest Mandot securities pvt ltd branch or you can dispatch the hard copy to-
Mandot Securities Pvt Ltd
217, Silver Sanchora Castle
7, RNT Marg, Indore (M.P.) -452001

For Detail Terms & Conditions please visit www.mandotsecurities.com • mandotsecurities.com

Non-Mandatory

Declaration for Opting out for Trading Preferences

Date: _____


To,
 <<Member Name: **MANDOT SECURITIES PVT.LTD.**

Sub: Request for change in Trading Preferences / Opting-out of segment/ Exchange

I/we would not like to trade/ deal in the following segments/ Exchanges:

Please tick below against the segments / Mutual Fund if you do not wish to trade in any of them:

<input type="checkbox"/> NSE Cash	<input type="checkbox"/> NSE F&O	<input type="checkbox"/> NSE Currency
<input type="checkbox"/> BSE Cash	<input type="checkbox"/> BSE F&O	<input type="checkbox"/> BSE Currency
<input type="checkbox"/> MCX	<input type="checkbox"/>	<input type="checkbox"/>

Client Code:	
Name:	
Signature	

Confirmation of Receipt of executed mandatory and voluntary client registration documents

Client Code: _____

Dear Sir,

I/We hereby acknowledge the receipt of duly executed copy of Know your Client Form (KYC), Rights and Obligations, Risk Disclosure Documents (RDD), Policies and Procedures, Guide Note, Do's and Dont's, Rights and Obligations (Cds), Tariff Sheet and all other mandatory and voluntary client registration documents as executed by me/us.

I/We have received and read the copy of right and obligation document in case of DP.



Signature of Client : _____

..... (Please Tear here)

Acknowledgment Receipt

Received nomination form:

DP ID										Client ID							
Name																	
Address																	
Nomination in favour of																	
First - Nominee																	
Second - Nominee																	
Third - Nominee																	
No Nomination		<input type="checkbox"/> Does not wish to nominate															
Registration No.								Registered on.	D	D	M	M	Y	Y	Y	Y	

Depository Participant Seal and Signature

..... (Please Tear here)

DP ID	1	2	0	8	2	3	0	0	Client ID	0	0						
Name of the Sole / First Holder																	
Name of Second Holder																	
Name of Third Holder																	

Date:

For MANDOT SECURITIES PVT. LTD.

(Authorised Signatory)

..... (Please Tear here)

ACKNOWLEDGEMENT RECEIPT

Application No.:

We hereby acknowledge the receipt of the Account Opening Application Form:

Date:

Name of the Sole / First Holder																	
Name of Second Holder																	
Name of Third Holder																	

For MANDOT SECURITIES PVT. LTD.

(Authorised Signatory)

APPLICATION FOR MARGIN TRADING FACILITY (MTF)

Client Code No. _____

To,
MANDOT SECURITIES PVT LTD.
217, SILVER
SANCHORA CASTLE,
7 RNT MARG,
Indore-452001.

Date: _____

Dear Sir,

Sub: Request for availing Margin Trading facility (MTF)

I/We am/are having trading code _____ opened on the basis of duly filled Know Your Customer form and on submission of all other related documents for the purpose of trading in securities market on the recognized Stock Exchange(s) (herein after referred as "Exchange").

I/We am/are interested in availing the Margin Trading facility (MTF) of the company for the purpose of Margin Trading Facility permitted to be dealt with on Stock Exchange: (NSE).

For the purpose of availing MTF, I/we state that Know Your Client details as submitted by me/us for the trading account, may be considered for the purpose of MTF FACILITY and I/We further confirm that the details provided in KYC are same.

I/We have read and understood the contents of the Information Document (Policy), Rights & Obligations according to SEBI Circular no. CIR/MRD/DP/86/2017 dated August 2, 2017 & SEBI/HO/MIRSD/DOP/CIR/P/2020/28 dated February 25, 2020. I/We agree to abide by the terms and conditions, rules and regulations of the MTF and further agree to abide by any terms and conditions as may be specified by Mandot Securities Pvt Ltd., the Exchanges or SEBI from time to time in this regard.

I further agree that the POA executed for specific purpose of operating Demat account with CDSL having DP ID and Demat account no. _____ will also be applicable for pledge of collateral stock to your CLIENT SECURITIES MARGIN PLEDGE ACCOUNT (Demat A/c) having account no. 1208230000026875 in CDSL and funded stock to your CLIENTS SECURITIES UNDER MARGIN FUNDED ACCOUNT (Demat A/c) having account no. 1208230000104822 in CDSL.

As read in policy, MTF on Auto funding basis would be provided to me In default, if no preference has been made by me. However, I further agree to avail MTF on:

- b Auto funding basis
- b Manual basis

I further agree that in case initial margin is provided in form of cash then my trading account shall be debited against your MTF Bank account no. in pursuance to which the funding would be provided.

I/We am/are aware that I can avail this facility from any one broker and undertake that I have not availed MTF FACILITY with any other broker.

I hereby indemnify Mandot Securities Pvt Ltd. For any breach or any loss arising from any of the information provided in this application.

I/we therefore request you to register me/us as your client for participating in MTF FACILITY.

Client Signature: _____

Date: _____ Place: _____

Mandot Securities Pvt Ltd (MANDOT)

Approved by Board

POLICY & TERMS ON MARGIN TRADING FACILITY

Policies and Procedures for Margin Trading Facility:

1. Equity Shares that are approved by the Mandot Securities Pvt Ltd. classified in 'Group I security' shall be eligible for margin trading facility.
2. The initial margin payable by the client to Mandot shall be in the form of cash or Group I equity shares approved by Mandot with appropriate VaR as specified by exchange or hair cut decided by Mandot.
3. In order to avail margin trading facility, initial margin required shall be VaR + 3 Times Of ELM (Extreme loss Margin) on the securities lying in Group-I and available for trading in F&O Segment. Otherwise, initial margin required shall be VaR+ 5 Times of ELM (Extreme loss Margin).

*VaR and ELM rate as per NSE Exchange and if any scrip is not listed at NSE than as per BSE.

4. In order to avail margin trading facility clients would deposit the required collateral to MANDOT by pledging their stocks (after appropriate haircuts) to CLIENT SECURITIES MARGIN PLEDGE ACCOUNT (Demat) account of Mandot.
5. In case Initial Margin is provided in form of cash, clients funds shall be transferred in MTF (bank) account to provide further exposure.
6. In case of increase in the value of Collaterals, Mandot reserves the option of granting further exposure to their clients subject to applicable haircuts. However, no such exposure shall be permitted on the increased value of funded stocks.
7. In case of debit balance outstanding, Mandot will charge interest on this balance at the rate of up to 36% per annum.
8. Mandot shall ensure maintenance of the aforesaid margin at all times during the period that the margin trading facility is being availed by the client. In case, value of collateral stocks declines by 15%, MANDOT Shall make necessary margin calls.
9. In case, value of collateral stocks of client declines by 30% Mandot shall liquidate the securities without any prior intimation for disposal, if the client fails to meet the margin call to comply with the conditions as mentioned in the circular or specified in the "Rights and Obligations Document" specified by exchange.
10. While providing the margin trading facility, maximum allowed exposure to any single client at any point of time shall be as per the discretion of Mandot, Stock exchanges, and SEBI.
11. Client reserves an option to avail MTF either on Auto funding basis or on Manual Basis. However, if no preferences have been made by client, MTF on Auto- funding basis will be provided to the client. Auto- Funding basis is when all the eligible securities purchased by the client on any day of pay-in shortage in client's account would be automatically funded, while Manual basis would require the client to inform Mandot Securities Pvt Ltd. about the eligible securities on which the client wish to avail MTF.
12. Any disputes arising between the client and the Mandot in connection with the margin trading facility shall have the same treatment as normal trades and should be covered under the investor grievance redressal mechanism, arbitration mechanism of the stock exchange.

In case of any query, Clients are requested to obtain clarification from the Compliance Department of the company.

Client Signature: _____

Other Terms & Conditions

- x Mandot Securities Pvt Ltd. (Mandot), at all times, shall have its sole discretion to determine the extent to which the MTF will be offered to the Client.
- x Mandot has sole discretion to grant or reject MTF to a client without giving any reason thereof. Mandot shall not be liable for any damages (whether direct or indirectly or whether financial or non-financial) to the Client by reason of its refusal to provide MTF to the Client.
- x MTF will be available only in cash segment for the list of shares permitted by Mandot, This list will be available on our website as MTF approved securities & it can be changed by Mandot at any point of time without any prior intimation.
- x Mandot can retain the securities and its corporate benefits, if any, till clearance of all debits including the outstanding balances, interest, statutory taxes, duties, charges, penalties in respect of MTF and Trading Account.
- x Mandot can hold any credit balance lying in the client trading accounts, securities lying in CLIENT SECURITIES MARGIN PLEDGE ACCOUNT and hold by clients in their respective demat account (s) maintained with Mandot, towards repayment of the outstanding dues under MTF.
- x MTF may be withdrawn by Mandot at any time on any breach or non-adherence to the terms and conditions as enumerated in the policies is committed by the client.
- x The client agrees that Mandot may ask the client to provide additional margin in form of cash or collateral depending on the security and market volatility to minimize the risk without any prior notice, this can be an additional margin as specified by the SEBI/Stock exchanges.
- x Maximum MTF limit for the client will be as specified Mandot from time to time. Further Mandot reserves the right to revise the maximum MTF limit without intimating or assigning any reason thereof.
- x Mandot has the right to transfer any clear credit balance from the Normal trading account to the MTF account if any in case of margin call in MTF account without any intimation to client.
- x Mandot can square off clients' securities both funded and collateral to clear all the debits under MTF after 30 days of MTF funding and any direct or indirect loss incurred due to this square off than client shall be solely responsible for the same. If square off can't be done by Mandot than it will not be liable for any direct or indirect losses to client.
- x If no transaction taken place in MTF account for 6 months than it will become dormant and client has to reactivate it before making further transactions

Client Signature: _____

RIGHTS & OBLIGATIONS OF MANDOT SECURITIES PVT LTD. & CLIENTS FOR MARGIN TRADING FACILITY (NSE)

CLIENT RIGHTS

1. Client shall receive all communications in a mode mutually agreed between the Mandot and the client regarding confirmation of orders/trades, margin calls, decision to liquidate the position /security.
2. Client shall be free to take the delivery of the securities at any time by repaying the amounts that was paid by the Mandot to the Exchange towards securities after paying all dues.
3. Client has a right to change the securities collateral offered for Margin Trading Facility at any time so long as the securities so offered are approved for margin trading facility.
4. Client may close / terminate the Margin Trading Account at any time after paying the dues.

CLIENT OBLIGATIONS

1. Client shall, in writing in his own hand or in any irrefutable electronic method, agree to avail of Margin Trading Facility in accordance with the terms and conditions of Margin Trading Facility offered by the Mandot, method of communication for confirmation of orders/trades, margin calls and calls for liquidation of collateral/security/position.
2. Client shall inform the Mandot of its intent to shift the identified transaction under Margin Trading Facility within the time lines specified by the Mandot failing which the transaction will be treated under the normal trading facility
3. Client shall place the margin amounts as the Mandot may specify to the client from time to time.
4. On receipt of 'margin call', the client shall make good such deficiency in the amount of margin placed with the MANDOT within such time as the Mandot may specify.
5. By agreeing to avail Margin Trading Facility with the Mandot, client is deemed to have authorized the MANDOT to retain and/or pledge the securities provided as collateral or purchased under the Margin Trading Facility till the amount due in respect of the said transaction including the dues to the Mandot is paid in full by the client.
6. Client shall lodge protest or disagreement with any transaction done under the margin trading facility within the timelines as may be agreed between the client and Mandot.

MANDOT SECURITIES PVT LTD.'S RIGHTS

1. Mandot and client may agree between themselves the terms and condition including commercial terms if any before commencement of MTF.
2. Mandot may set up its own risk management policy that will be applicable to the transactions done under the Margin Trading Facility. Mandot may make amendments there to at any time but give effect to such policy after the amendments are duly communicated to the clients registered under the Margin Trading Facility.
3. Mandot has a right to retain and/or pledge the securities provided as collateral or the securities bought by the client under the Margin Trading Facility.
4. The Mandot may liquidate the securities if the client fails to meet the margin call made by the Mandot as mutually agreed terms but not exceeding 5 working days from the day of margin call.

MANDOT SECURITIES PVT LTD.'S OBLIGATIONS

1. Mandot shall agree with the client the terms and condition before extending Margin Trading Facility to such client. However, for clients who already have existing trading relationship and want to avail of Margin Trading Facility, Mandot may take consent in writing in his own hand or in any irrefutable electronic method after

Mandot has communicated the terms and conditions of Margin Trading Facility to such existing clients.

2. The terms and conditions of Margin Trading Facility shall be identified separately, in a distinct section if given as a part of account opening agreement.
3. The mode of communication of order confirmation, margin calls or liquidation of position/security shall be as agreed between the Mandot and the client and shall be in writing in his own hand or in any irrefutable electronic method. Mandot shall prescribe and communicate its margin policies on haircuts/ VAR margins subject to minimum requirements specified by SEBI and exchanges from time to time.
4. The Mandot shall monitor and review on a continuous basis the client's positions with regard to MTF. It is desirable that appropriate alert mechanism is set up through which clients are alerted on possible breach of margin requirements.
5. Any transaction to be considered for exposure to MTF shall be determined as per the policy of the MANDOT provided that such determination shall happen not later than T + 1day.
6. If the transaction is entered under margin trading account, there will not be any further confirmation that it is margin trading transaction other than contract note.
7. In case the determination happens after the issuance of contract, the Mandot shall issue appropriate records to communicate to Client the change in status of transaction from Normal to Margin trading and should include information like the original contract number and the margin statement and the changed data.
8. The Mandot shall make a 'margin call' requiring the client to place such margin- any such call shall clearly indicate the additional/deficient margin to be made good.
9. Time period for liquidation of position/security shall be in accordance declared policy of the MANDOT as applicable to all MTF clients consistently. However, the same should not be later than 5 working (trading) days from the day of 'margin call'. If securities are liquidated, the contract note issued for such margin call related transactions shall carry an asterisk or identifier that the transaction has arisen out of margin call.
10. The daily margin statements sent by Mandot to the client shall identify the margin/collateral for MarginTrading separately.
11. Margin Trading Accounts where there was no transaction for 90 days shall be settled immediately.
12. The stocks deposited as collateral for availing margin trading facility (Collaterals) shall be maintained in CLIENT SECURITIES MARGIN PLEDGE ACCOUNT (Demat A/c) having account no. 1208230000026875 in CDSL.
13. The stocks purchased under the margin trading facility (Funded stocks) shall be maintained in CLIENTS SECURITIES UNDER MARGIN FUNDED ACCOUNT Demat having account no. 1208230000104822 in CDSL.
14. Mandot shall close/terminate the account of the client forthwith upon receipt of such request from the client subject to the condition that the client has paid dues under Margin Trading Facility.

TERMINATION OF RELATIONSHIP

1. The margin trading arrangement between the Mandot and the client shall be terminated; if the Stock Exchange, for any reason, withdraws the margin trading facility provided to the Mandot or the Mandot surrenders the facility or the Mandot ceases to be a member of the stock exchange.
2. The MTF facility may be withdrawn by the Mandot, in the event of client committing any breach of any terms or conditions therein or at any time after due intimation to client allowing such time to liquidate the MTF position as per the agreed liquidation terms without assigning any reason. Similarly, client may opt to terminate the margin trading facility in the event of Mandot committing any breach of any terms or conditions therein or for any other reason.
3. In the event of termination of this arrangement, the client shall forthwith settle the dues of the Mandot. The Mandot shall be entitled to immediately adjust the Margin Amount against the dues of the client, and the client hereby authorizes the Mandot to make such adjustment.

4. After such adjustment, if any further amount is due from the client to the Mandot, the client shall settle the same forthwith. Upon full settlement of all the dues of the client to the Mandot, it will release the balance amount to the client.
5. If the client opts to terminate the margin trading facility, Mandot shall forthwith return to the client all the collaterals provided and funded securities retained on payment of all the dues by clients.

Client Signature: _____

Date: _____ **Place:** _____

Note: Client wish to avail Margin Trading Facility has to sign all the pages given under MTF form and send it to the undersigned.

Mandot Securities Pvt Ltd
217, Silver Sanchora Castle
7, RNT Marg
Indore – 452001
e-mail – info@mandotsecurities.com

For more details please contact 0731-6620000 / 09 / 15

* Declaration for Ultimate Beneficial Ownership (UBO)

(Mandatory for Non-Individual Applicants/Investors)

This declaration is not needed for Companies that are listed on any recognized stock exchange or is a Subsidiary of such Listed Company or is Controlled by such Listed Company

A: Applicant Details:-

PAN	<input type="text"/>	CRF No.	<input type="text" value="please specify"/>
Applicant Name	<input type="text"/>		

B: Category (please tick applicable category):-

<input type="checkbox"/> Unlisted Company	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Unincorporated Association/Body of Individuals	<input type="checkbox"/> Religious Trust
<input type="checkbox"/> Public Charitable Trust	<input type="checkbox"/> Private Trust / Trust created by a Will	<input type="checkbox"/> Others	<input type="text" value="please specify"/>	

C: Details of Ultimate Beneficial Owners:- (Please list below each controlling person, confirming ALL countries of Tax Residency / permanent address / citizenship and ALL

Tax Identification Numbers for EACH controlling person. Please submit photocopy[#] of the PAN with photo or any other valid photo identity proof for each of the UBO specified)

If any of the UBO is resident / citizen of a Country other than India or citizen / tax resident / green card holder of United States of America (USA), please provide TaxPayer Identification Number / US Social Security Number (SSN) *

S.No	Name of Ultimate Beneficiary Owner PAN (for Residents/NRIs) ID Proof (Foreign / PAN Exempt Individuals)	Permanent Address	Country of: Birth (COB), Citizenship (COC), Nationality (CON)	Country of Tax Residency	Tax Identification Number (TIN)	UBO Code @
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	

* - If the given rows are not sufficient, investor can submit multiple declarations covering all Beneficial Owners.

- Attached document should be self certified by the UBO and certified by the Applicant / Investor's Authorized signatory.

@ - UBO Codes

UBO Code	Description	UBO Code	Description
UBO-1	Controlling ownership interest of more than 25% of shares or capital or profits of the juridical person [Investor], where the juridical person is a company	UBO-2	Controlling ownership interest of more than 15% of the capital or profits of the juridical person [Investor], where the juridical person is a partnership
UBO-3	Controlling ownership interest of more than 15% of the property or capital or profits of the juridical person [Investor], where the juridical person is an unincorporated association or body of individuals	UBO-4	Natural person exercising control over the juridical person through other means exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under clause 4 (a) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests]
UBO-5	Natural person who holds the position of senior managing official [In case no natural person cannot be identified as above]	UBO-6	The settlor(s) of the trust
UBO-7	Trustee(s) of the Trust	UBO-8	The Protector(s) of the Trust [if applicable].
UBO-9	The beneficiaries with 15% or more interest in the trust if they are natural person(s)	UBO-10	Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership

Declaration

I/We acknowledge and confirm that the information provided above is/are true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We aware that I/We may liable for it. I/We hereby authorize sharing of the information furnished in this form with all SEBI Registered Intermediaries and they can rely on the same. In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit. In such case, the concerned SEBI registered intermediary reserves the right to reject the application or reverse the allotment of units, if subsequently it is found that applicant has concealed the facts of beneficial ownership. I/We also undertake to keep you informed in writing about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required at your end.

Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]

Date : ____/____/____

Place : _____

Ultimate Beneficial Ownership (UBO)

BACKGROUND

Pursuant to SEBI master circular vide ref. no. CIR/ISD/AML/3/2010 dated December 31, 2010 on anti money laundering standards and guidelines on identification of Beneficial Ownership issued by SEBI vide its circular ref. no. CIR/MIRSD/2/2013 dated January 24, 2013, investors (other than Individuals) are required to provide details of Ultimate Beneficial Owner(s) ("UBO(s)") and submit proof of identity (viz. PAN with photograph or any other acceptable proof of identity prescribed in common KYC form) of UBO(s).

The Ultimate Beneficial Owner means:

● **For Investor other than Trust:**

A 'Natural Person', who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of / entitlements to:

- i. more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
- ii. more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership; or
- iii. more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.

In cases where there exists doubt as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity details should be provided of the natural person who is exercising control over the juridical person through other means (i.e. control exercised through voting rights, agreement, arrangements or in any other manner). However, where no natural person is identified, the identity of the relevant natural person who holds the position of senior managing official should be provided.

● **For Trust:**

The settler of the trust, the trustees, the protector, the beneficiaries with 15% or more of interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

Exemption in case of listed companies:

The provisions w.r.t. Identification of UBO are not applicable to the investor or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company.

Applicability for foreign investors:

The identification of beneficial ownership in case of Foreign Institutional Investors (FIIs), their sub-accounts and Multilateral Funding Agencies / Bodies Corporate incorporated outside India with the permission of Government of India / Reserve Bank of India may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012.

ACCOUNT OPENING REPORT

INWARD DETAIL FORM NO.: _____

Receipt Date: / /2016	Receipt Mode:- Courier <input type="checkbox"/> Hand Delivery <input type="checkbox"/>
Couries Name: _____	Inward Time: _____
Received From: Branch <input type="checkbox"/> AP <input type="checkbox"/>	Name: _____
A/C Type: Broking <input type="checkbox"/> Demat <input type="checkbox"/>	BO Name: _____
Received By: _____	Signature : _____

DOCUMENT CHECK & VERIFICATION

Address Proof: <input type="checkbox"/>	Identity Proof: <input type="checkbox"/>	Bank Detail: <input type="checkbox"/>
Nominee Detail: <input type="checkbox"/>	KRA Done: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Checked By: _____	Verified By: _____	

DATA ENTRY IN BACK OFFICE

Date: / /2018	Data Entry By: _____	Signature: _____
Verified By: _____	Signature: _____	

VERIFICATION

Verification Done: / / 2018	Verified By: _____
Solved Date: / /2018	Solved By: _____
Comments: _____	

ACCOUNT OPENING

A/c Opening Date: - / /2018	BO Id 12082300 _____
Client Code: _____	DIS Book No: _____
Dispatch Date: - / /2018	
Dispatch Detail: _____	
Dispatch By: _____	Checked By: _____