

Vimal & Sons



2018094

National Stock Exchange of India limited Member code: 07726

SEBI Regn. No & Date **SEBI Regn. No. INZ000270222 Date - (03/07/2019)**

Registered & Correspondence Office Address: 6 Abhyuday Apartments, 771 Bhandarkar Road,
Next to Sane Dairy, Pune - 411004

Tel.:(+91-20) 25673566 / 25672464 ♦ Web site: www.vimalandsons.com

Compliance Officer Name : Mrs. Neelakshi Kshemkalyani

Tel.:(+91-20) 25673566

Email : neelakshik@vimalandsons.com

For any grievance/dispute please contact stock broker Vimal & Sons at the above address or

Email Id : grievances.vimalsons@gmail.com and Tel. : 91-(+91-20) 25673566 25672464

In case not satisfied with the response, Please contact the concerned exchange(s) at


NSE : Email Id : ignse@nse.co.in Tel : 022-26598190


CLIENT REGISTRATION FORM

Client Code							
Mr./ Ms. / M/s.							
PAN NUMBER							
E-mail :							
Registration Date	D	D	M	M	Y	Y	Y
Branch							

Index

S. No.	Name of the Document	Brief significance of the Document	Page No
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES			
1	Account Opening Form	A. KYC form-Documents capture the basic information about the constituent and an instruction/check list. B. Document captures the additional information about the constituent relevant to trading account and an instruction/ check list.	A-1 to A-8
2	Rights and Obligations	Document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet wireless technology based trading)	
3	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities market.	B-7
4	Guidance note	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	B-11
5	Policies and Procedures	This document contains policies and procedures to be followed by the Broker relating to the various operational issues of day to day business activities. The clients are requested to go through it carefully and keep it in mind while dealing through us. Any changes in this document shall be intimated to the client through the periodic communications. The clients may any time request for the updated copies of this document or refer to it at website.	B-20
6	Tariff sheet	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s).	A-15
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER			
7	Mutual Fund Service System Facility	Letter to be provided by the Investor to the Participant to avail the facility of MFSS	A-9 to A-11
8	Authorization letter of Running Account by Client	For the operational convenience, if a client is dealing frequently and Running Account wishes to avoid exchange of funds and securities for every exchange/segment separately and on a daily/due date basis, this document may be signed by the client authoring broker to keep the account as running account across all exchange / segment.	A-12 A-13
9	Writeup on PMLA	(For Information Only) Brief Writeup on the provisions of prevention of money laundering Act 2002 (PMLA) which client needs to know.	B-13
10	Instruction / Check List	Instructions for filling KYC form	A-19 to 21
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Instruction for Signature:  S Client Full signature (22)

 S Sub-broker's full signature

KNOW YOUR CLIENT (KYC) APPLICATION FORM


For Individuals

Please fill this form in ENGLISH and in BLOCK LETTERS

A										IDENTITY DETAILS		PHOTOGRAPH ¹ Please affix your recent passport size photograph and sign across it
1. Name of the Applicant												
2. Father's/ Spouse Name												
3. Gender			<input type="checkbox"/> Male <input type="checkbox"/> Female			3. Marital status			<input type="checkbox"/> Single <input type="checkbox"/> Married			
4. Date of birth		D	D	M	M	Y	Y	Y	Y	4. Nationality		
5. Status		<input type="checkbox"/> Resident individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National										
6. PAN										Unique Identification Number (UID)/ Aadhaar, if any		
Specify the proof of identity submitted												
B										ADDRESS DETAILS		
1. Address for correspondence												
City / Town / Village								Pin Code				
State								Country				
2. Contact Details		Tel. (Off.)						Tel.(Res.)				
		Mobile No.						Fax				
		Email id										
3. Specify the proof of Address Submitted for correspondence address												
4. Permanent Address (if different from above or overseas address, mandatory for Non-Resident Applicant),												
City / Town / Village								Pin Code				
State								Country				
5. Specify the proof of address submitted for permanent address												

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.

Name					Signature	 2
Place		Date	DD	MM	YYYY	

FOR OFFICE USE ONLY

<input type="checkbox"/> (Originals verified) True copies of documents received	Signature of the Authorised Signatory		Seal / Stamp of the intermediary
	Name		
Signature			
<input type="checkbox"/> (Self-Attested) Self Certified Document copies received	Designation		
	Date		

KNOW YOUR CLIENT (KYC) APPLICATION FORM For Non-Individuals

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**.

A										IDENTITY DETAILS									
1.	Name of the Applicant																		
2.	Date of incorporation	D	D	M	M	Y	Y	Y	Y										
	Place of incorporation																		
3.	Date of commencement of business	D	D	M	M	Y	Y	Y	Y										
4.	PAN	Registration No. (e.g. CIN)																	
5.	Status (please tick any one)	<input type="checkbox"/> Private Limited Co. <input type="checkbox"/> Trust <input type="checkbox"/> FII <input type="checkbox"/> Government Body <input type="checkbox"/> Establishment <input type="checkbox"/> Others (please specify)				<input type="checkbox"/> Public Ltd. Co. <input type="checkbox"/> Charities <input type="checkbox"/> HUF <input type="checkbox"/> Non-Government Organization <input type="checkbox"/> BOI				<input type="checkbox"/> Body Corporate <input type="checkbox"/> NGO's <input type="checkbox"/> AOP <input type="checkbox"/> Society				<input type="checkbox"/> Partnership <input type="checkbox"/> FI <input type="checkbox"/> Bank <input type="checkbox"/> Defense <input type="checkbox"/> LLP					
B										ADDRESS DETAILS									
1.	Address for correspondence																		
	City / Town / Village							Pin Code											
	State							Country											
2.	Contact Details	Tel. (Off.)								Tel. (Res.)									
		Mobile No.								Fax									
		Email id																	
3.	Specify the proof of address submitted for correspondence address																		
4.	Registered Address (if different from above)																		
	City / Town / Village							Pin Code											
	State							Country											
5.	Specify the proof of address submitted for registered address:																		

PHOTOGRAPH 1

Please affix your recent passport size photograph and sign across it

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.

Name		Signature	[2]
Place		Date	DDMMYYYY

FOR OFFICE USE ONLY

<input type="checkbox"/> (Originals verified) True copies of documents received	Signature of the Authorised Signatory		Seal / Stamp of the intermediary
	Name		
Signature			
<input type="checkbox"/> (Self-Attested) Self Certified Document copies received	Designation		
	Date		

ADDITIONAL DETAILS

INFORMATION OF PROMOTERS/PARTNERS/KARTA/TRUSTEES AND WHOLE TIME DIRECTORS/AUTHORIZED PERSON

1 FULL NAME		3	2 FULL NAME		4
		PHOTOGRAPH			PHOTOGRAPH
		Please affix your recent passport size photograph and sign across it			Please affix your recent passport size photograph and sign across it
Designation			Designation		
Qualification			Qualification		
Experience			Experience		
Tel. No.			Tel. No.		
Fax No.			Fax No.		
Res.Address			Res.Address		
City			City		
Pin Code			Pin Code		
State			State		
Country			Country		
Nationality			Nationality		
PAN No.			PAN No.		
DIN/UID			DIN/UID		
Please tick, if applicable, for any of your authorized	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)		Please tick, if applicable, for any of your authorized	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)	
Any other information			Any other information		
3 FULL NAME		5	4 FULL NAME		6
		PHOTOGRAPH			PHOTOGRAPH
		Please affix your recent passport size photograph and sign across it			Please affix your recent passport size photograph and sign across it
Designation			Designation		
Qualification			Qualification		
Experience			Experience		
Tel. No.			Tel. No.		
Fax No.			Fax No.		
Res.Address			Res.Address		
City			City		
Pin Code			Pin Code		
State			State		
Country			Country		
Nationality			Nationality		
PAN No.			PAN No.		
DIN/UID			DIN/UID		
Please tick, if applicable, for any of your authorized	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)		Please tick, if applicable, for any of your authorized	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)	
Any other information			Any other information		

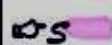
TRADING ACCOUNT RELATED DETAILS			
A BANK ACCOUNT(S) DETAILS			
Bank Name			
Branch Address & Tel. No.			
Bank Account No.			
Account Type	<input type="checkbox"/> Saving	<input type="checkbox"/> Current	<input type="checkbox"/> Other in Case of NRI/NRE/NRO
MICR Number			
IFSC Code			
B DEPOSITORY ACCOUNT(S) DETAILS*			
Particulars	(1)	(2)	(3)
DP Name			
DP Address			
DP ID			
Client ID			
2nd holder's Name			
3rd holder's Name			
Default A/c (Any One)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
C TRADING PREFERENCES			
*Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.			
Exchanges	Segment		
	Cash	Derivatives	Currency Derivatives
1. NSE	<input checked="" type="checkbox"/> S <input type="checkbox"/> [7]	<input checked="" type="checkbox"/> S <input type="checkbox"/> [10]	<input checked="" type="checkbox"/> S <input type="checkbox"/> [13]
2.	<input checked="" type="checkbox"/> S <input type="checkbox"/> [8]	<input checked="" type="checkbox"/> S <input type="checkbox"/> [11]	<input checked="" type="checkbox"/> S <input type="checkbox"/> [14]
3.	<input checked="" type="checkbox"/> S <input type="checkbox"/> [9]	<input checked="" type="checkbox"/> S <input type="checkbox"/> [12]	<input checked="" type="checkbox"/> S <input type="checkbox"/> [15]
# If, in future, the client wants to trade on any new segment/ new exchange, separate authorization / letter should be taken from the client by the stock broker.			
D 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:			
E OTHER DETAILS			
1. Gross Annual Income Details (please specify)	Below Rs 1 Lac		1-5 Lac
	Income Range per annum:	5-10 Lac	10-25 Lac
OR			
Net worth as on Date : / /		Rs. _____ (Networth shouldnot be older than 1year)	
2. Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government
	<input type="checkbox"/> Service/Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist
3. Please tick, if applicable	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student
	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related To a Politically Exposed Person (PEP)		
4. Any other information			

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 :		NSE SEBI Reg. No.	
Regd. Off. Address			
Signature ☞ Sb.	Tel. No.		
	Fax No.		
	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			
Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify):		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Specify your Email id, if applicable			
Whether you wish to avail of the facility of internet trading/ wireless technology (please specify):		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Number of years of investment/Trading Experience			
Any other information			
H INTRODUCER DETAILS			
Name of the Introducer			
	(Surname)	(Name)	(Middle Name)
Status of the Introducer	<input type="checkbox"/> Sub-broker <input type="checkbox"/> Remisier <input type="checkbox"/> Authorized Person <input type="checkbox"/> Existing Client <input type="checkbox"/> Others (please specify)		
Introducer Address			
			Phone
Signature of the Introducer		☞ S	
I NOMINEE DETAILS (for nominees only)			
I/We wish to nominate		I/We do not wish to nominate	
Name of the Nominee		Relationship with the Nominee	
PAN of Nominee		Date of Birth of Nominee D D M M Y Y Y Y	
Nominee Address			
			Phone
If Nominee is a minor, details of Guardian:			
Name of Guardian			
Guardian Address			
			Phone
Signature of Guardian		☞ S	

WITNESSES (Only applicable in case the account holder has made nomination)			
Name		Name	
Signature		Signature	
Address		Address	

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 hereby agree to be bound by such provision 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.

Name		Signature	
Place		Date	DD / MM / YYYY

DECLARATION (CONT'D)

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 nonmandatory 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.

Date : DD / MM / YYYY Signature of the Authorised Signatory Seal/Stamp of the stock broker

Non Mandatory

Annexure 3

**Mutual Fund Service System Facility
(Letter to be provided by the Investor to the Participant)**

To

Date:

Sir,

Sub: Mutual Fund Service System (MFSS) facility

I/We _____ am/are registered as your client with client Code No. _____ and have executed the Trading Member and Client Agreement for the purpose of trading in the Capital Market segment of National Stock Exchange of India Ltd. (Exchange).

I/We am/are interested in availing the MFSS facility of the Exchange for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the MFSS of Exchange.

For the purpose of availing the MFSS facility, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of MFSS and I/we further confirm that the details contained in same remain unchanged as on date.

I/We are willing to abide by the terms and conditions as mentioned in the Circular dated _____ and as may be specified by the Exchange from time to time in this regard.

I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India and Association of Mutual Funds of India (AMFI).

I/We shall read and understand the contents of the Scheme Information Document and Key information Memorandum, addenda issued regarding each Mutual Fund Schemes with respect to which I/we choose to subscribe/redeem. I/We further agree to abide by the terms and conditions, rules and regulations of the Mutual Fund Schemes.

I/We therefore request you to register me/us as your client for participating in the MFSS.

Thanking you,

Yours Faithfully,

Non Mandatory

Details of terms & conditions for the Investor / Client for using New MFSS facility

1. **Pre-requisites for becoming Investor / Client for the New MFSS facility**
 - 1.1. The client who is desirous of investing in units of mutual fund schemes through the New MFSS.
 - 1.2. The Client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the Participant of the New MFSS.
 - 1.3. The client has satisfied itself of the capacity of the Participant to deal in Mutual Fund units and wishes to execute its instruction through the Participant and the client shall from time to time continue to satisfy itself of such capability of the Participant before executing transaction through the Participant.
 - 1.4. The Client has approached the the Participant with the application for availing the New MFSS facility.
 - 1.5. The client has submitted relevant KYC (Know Your Client) details to the Participants.
2. **Terms and Conditions**
 - 2.1. The client shall be bound by circulars issued by NSEIL, Rules, Regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
 - 2.2. The client shall notify the Participant in writing if there is any change in the information in the client registration form provided by the client to the Participant at the time registering as a client for participating in the New MFSS or at any time thereafter.
 - 2.3. The client shall submit to the Participant a completed application form in the manner prescribed format for the purpose of placing a subscription order with the Participant.
 - 2.4. The client has read and understood the risks involved in investing in Mutual Fund Schemes.
 - 2.5. The client shall be wholly responsible for all his investment decisions and instruction.
 - 2.6. The client shall ensure continuous compliance with the requirements of the NSEIL, SEBI and AMFI.

Non Mandatory

- 2.7. The Client shall pay to the Participant fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant renders to the Client.
- 2.8. The client will furnish information to the Participant in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
- 2.9. In the event of non-performance of the obligation by the Participant, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL or NSCCL.
- 2.1.0. In case of any dispute between the Participants and the investors arising out of the MFSS facility, NSEIL and / or NSCCL agrees to extend the necessary support for the speedy redressal of the disputes.

To,
Vimal & Sons,
6 Abhyuday Apartments,
771 Bhandarkar Road,
Next to Sane Dairy,
Pune -411004

Dear Sirs,

Re: Letter of Authority for maintaining a Running Account for me/us in the Cash, F&O, Segments for NSE

I / We have been regularly trading and investing, or plan to do so, through you on National Stock Exchange of India Ltd. To facilitate and ease of the accounting operations I / we expressly authorize you as under:

Authority:

1. To maintain a running account for all my / our trades through NSE instead of a settlement to settlement clearance of dues and/or delivery of securities to me/ us. I agree that no interest shall be payable by you on the credit balances that may arise from time to time in my/our account.
2. To retain any/all the deliveries of shares purchased by me / us and / or the credit amounts due to me/ us, beyond the pay - out date and the time interval specified by the relevant authorities, so as to use the same towards margin deposit, inter settlement adjustment of my/our present and future obligations and also retain the funds expected to be required to meet my/our margin obligations for next 5 trading days, calculated in the manner specified by the Exchanges and or inter-Exchange adjustment of my/our obligations or up to such time that I / we ask you to transfer / release the same to my / our account.
3. To maintain a running account through NSE towards my/ our margin obligations and / or settlement obligations including those in Futures & options segment of NSE.
4. To retain/hold any/all of our funds available with you on our account, till such time that I/we request you to release the same within one working day.
5. To automatically adjust/appropriate any/all my/our deliveries of securities on inter- settlement basis on my/our instructions, either oral or written for all the instances where any/all securities purchased by me/us, are still lying with you in client Beneficiary a/c on our account. I / we agree that such inter settlement adjustment may be in the same Stock Exchange or across the Exchanges.

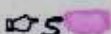
Declaration/ undertaking:

1. I/ we also state that any dispute if arising from the statement of account or statement of securities or settlement so made as herein above shall be brought to your notice preferably within 7 working days from the date of receipt of funds / securities or statement, as the case may be.
2. I/We undertake to reconcile our accounts, both financial and securities with you and carry out the actual settlement of funds & securities at least once Monthly/Every financial quarter.
3. I / we state that I / we may revoke the above authorization with written notice at any time to you.

Thanking you,

Yours truly,

Client Name

 17

Date : DD / MM / YYYY

Note : To be signed by client and not by POA

Letter of Authority by Client

Non Mandatory

To,
Vimal & Sons,
6 Abhyuday Apartments,
771 Bhandarkar Road,
Next to Sane Dairy,
Pune -411004

Dear Sirs,

Re: Letter of General Authority for Accounting Operations for me/us in the Cash, F&O, Segment of NSE

I/We will be regularly trading and investing, or plan to do so, through you on NSE. To facilitate and ease the accounting operations I/ We expressly authorize you as under.

Authority:

To accept any/all of my / our orders for purchase / sale of shares & securities which shall be given on telephone or orally during my/our visit to your office (s).

To Avoid unnecessary and cumbersome paper work, I / We authorize you not to provide me/us any order modification / cancellation slips. Also I / We authorize you not to provide me / us any order confirmation / and/or trade confirmation slips as the required details are available from contracts issued by you.

To undertake any inter-account transfers of balances available between various segments of SEBI registered Exchanges, which are NSE Capital Market segment and NSE Derivatives segment.
To deposit / pledge the securities given as collateral with the Exchange / Clearing Corporation / Clearing House towards margin as permitted from time to time.

Declaration / undertaking:

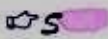
// We declare that all trades entered by me/us with you on NSE are for my/our personal.
I/We confirm that I / We do not act on behalf of any other constituent and all trades executed under my client code belong to me / us and that we do not issue any contracts / trade confirmations to any one.

Trading of all Exchange is in Electronic Mode, based on VSAT, leased line, ISDN, Modern and VPN, combination of technologies and computer systems to place and route orders. We understand that there exists a possibility of communication failure or system problems or slow or delayed response from system or trading halt, of any such other problem / glitch whereby not being able to establish access to the trading system / network, which may be beyond your control and may result in delay in processing or note processing buy or sell Orders either in part or full. // We agree I / We shall not hold you liable and responsible for any such problems / fault.

I/We undertake to abide by all the requisite Statutory Provisions and shall not violate or contravene any of the provisions of the Securities and Exchange Board of India, Act and the various Rules and Regulations framed there under. Similarly, // We undertake to abide by all the requisite Statutory Provisions and shall not violate or contravene any of the provisions of the Exchanges, their Rules, Bye laws and Regulations and any other Statutory Act that may be in force.

Thanking you,

Yours truly,

 18

Date : DD / MM / YYYY

Note : To be signed by client and not by POA

Authority to Send Digitally Signed Documents

To,
 Vimal & Sons,
 6 Abhyuday Apartments,
 771 Bhandarkar Road,
 Next to Sane Dairy,
 Pune -411004

Date : DD / MM / YYYY

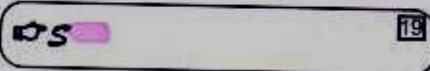
Dear Sirs,

1. I/We agree to receive contract Notes/bills/ledger accounts/Qty Statements/Margin Statement etc for my / our trasactions in any form (physical or Electronic) as deemed fit by you. I/We confirm that once you send the said documents at my / our email ID. You may treat the same as received by me/us. Non-receipt of bounced mail notification shall amount to deliver contract note at the our email-id. Incase of any query. I/We shall intimate you within reasonable time thereof at you desig email ID : vimaland sons@gmail.com

E-mail ID : 1
E-mail ID : 2

2. Incase of any changes in my/our email ID, I/We undertake to intimate the same to you in writing.
3. We understand that these digital contract notes are valid legal contracts as per stock exchange / SEBI rules and recognized under Income Tax act as well as other acts in India.

Thanking you,

Signature :  19

Client Name : _____

Client Code : _____


Disclosure


Proprietary Trading

The member discloses herewith that it undertakes Proprietary trading, Arbitrage as well as investment in addition to client based trading.

Signed for and on behalf of

Signed for and on behalf of Client

Name	Vimal & Sons
Authorised Signatory	

Name	
Authorised Signatory	 20

Date : DD / MM / YYYY

TARIFF SHEET

CASH SEGMENT

Brokerage Slab	Rate %	Minimum Paise	
Delivery Based			
Intraday Trading			One Side / Both Sides

F & O SEGMENT

Brokerage	Futures %	Options %	Rs. Per Lot	One Side / Both Sides
Delivery Square up				
Settlement Square up				

Stamp Duty, Service Tax, STT and Exchange Transaction Charges will be changed to the client as prescribed by SEBI Stock Exchange.

SHARING RATIO

Segment	Remisier - I		Remisier - II	
	Delivery	Trading	Delivery	Jobbing
Cash				
Base				

Segment	Remisier - I		Remisier - II	
	Futures	Options	Futures	Optional
F & O				
Base				

Segment	Remisier - I	Remisier - II
	Futures	Futures
Currency		
Base		



Date :

To,
Vimal & Sons,
6 Abhyuday Apartments,
771 Bhandarkar Road,
Next to Sane Dairy,
Pune -411004

Dear Sir,


I/We hereby state and declare that I have received, read and understood the below mentioned documents to my satisfaction and understood the voluntary clauses mutually agreed between us.

1. I/We have received and read the document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology. based trading).
2. I/We have received and read the Document detailing risks associated with dealing in the securities market in the Risk Disclosure document.
3. I/We have received and read the Guidance note detailing do's and don'ts for trading on exchange, for the education of the investors. .
4. I/We have received and read the Document describing significant policies and procedures of the stock broker and also the tariff structure.

I have got a clear idea about all brokerage, Stamp Duty, Service Tax STT and Exchange transaction charges the -Vimal & Sons for trading account as per the relevant provisions/ guidelines specified by SEBI/Stock exchanges.

I hereby acknowledge the same.

Name of Client

Signature : 

Place :

DOCUMENTS VERIFICATION

NON MANDATORY

Sr. No.	For Individual	Document Received	BR	HO	AU
1	Copy of PAN Card				
2	For Photo ID Proof				
3	For Address Proof				
4	For Bank Proof				
5	For DP Proof				
6	For NRI Holder				
7	For Income Proof				

NOTE

(1) Please mention the document received (2) Duly Filled registration form with signatures and witnesses wherever required (3) PAN should be checked with IT site.
 (4) Any Bill or statement should be Latest

Document Verified by	Branch (BR)	Branch (H.O.)	Auditor (A.U.)	
Name				
Sign				
Date				
Data Entered by	Name	Sign	Date	
For Office Use Only				
Client Categorizations (Based on declaration of the Financial portfolio of client)				
Tick whichever applicable				
Categories	High	Low	Medium	Special

Documents Verification

NON MANDATORY

Sr. No.	For Non Individual	Document Received	BR	HO	A
1	Copy of PAN Card of Company				
2	Copy of PAN Card of Partners/ Whole Time Directors, Individual Promoters holding 5% or more either Directly or indirectly, in the shareholding of the company and of persons authorised to deal in securities. In case of HUF, PAN card of Karta.				
3	For Photo ID Proof				
4	For Address Proof				
5	For Bank Proof				
6	For DP Proof				
7	For Income Proof				
8	Copies of balance sheets for the last two years				
9	Copy of resolution of board of Directors approving participation in Equity / Derivatives / Debt Trading and naming authorized persons for dealing in securities.				
10	Copy of the Memorandum and articles of association in case of a company / body incorporate / partnership Deed in case of a Partnership of a Partnership Firm. In case of HUF Declaration with stamp.				
11	Copies of latest share holding pattern including list of all those holding more than 5% in the share capital of the company, duly certificated by the company Secretary / Whole time Director / MD				

NOTE

- (1) Please mention the document received (2) Duly Filled registration form with signatures and witnesses wherever required (3) PAN should be checked with IT site.
 (4) Any Bill or statement should be Latest

Document Verified by	Branch (BR)	Branch (H.O.)	Auditor (A.U.)
Name			
Sign			
Date			
Data Entered by	Name	Sign	Date

For Office Use Only

Client Categorizations (Based on declaration of the Financial portfolio of client)

Tick whichever applicable

Categories	High	Low	Medium	Special

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 all 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 the 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 the 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, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI s, Mariners declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/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 a foreign country, e.g., 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 (POI): *List of documents admissible as Proof of Identity*

1. Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
2. PAN card with photograph.
3. Identity card/ document with applicants 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, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (PGA): *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/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary

public/Elected representatives to the Legislative Assembly/Parliament/Documents 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/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN

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

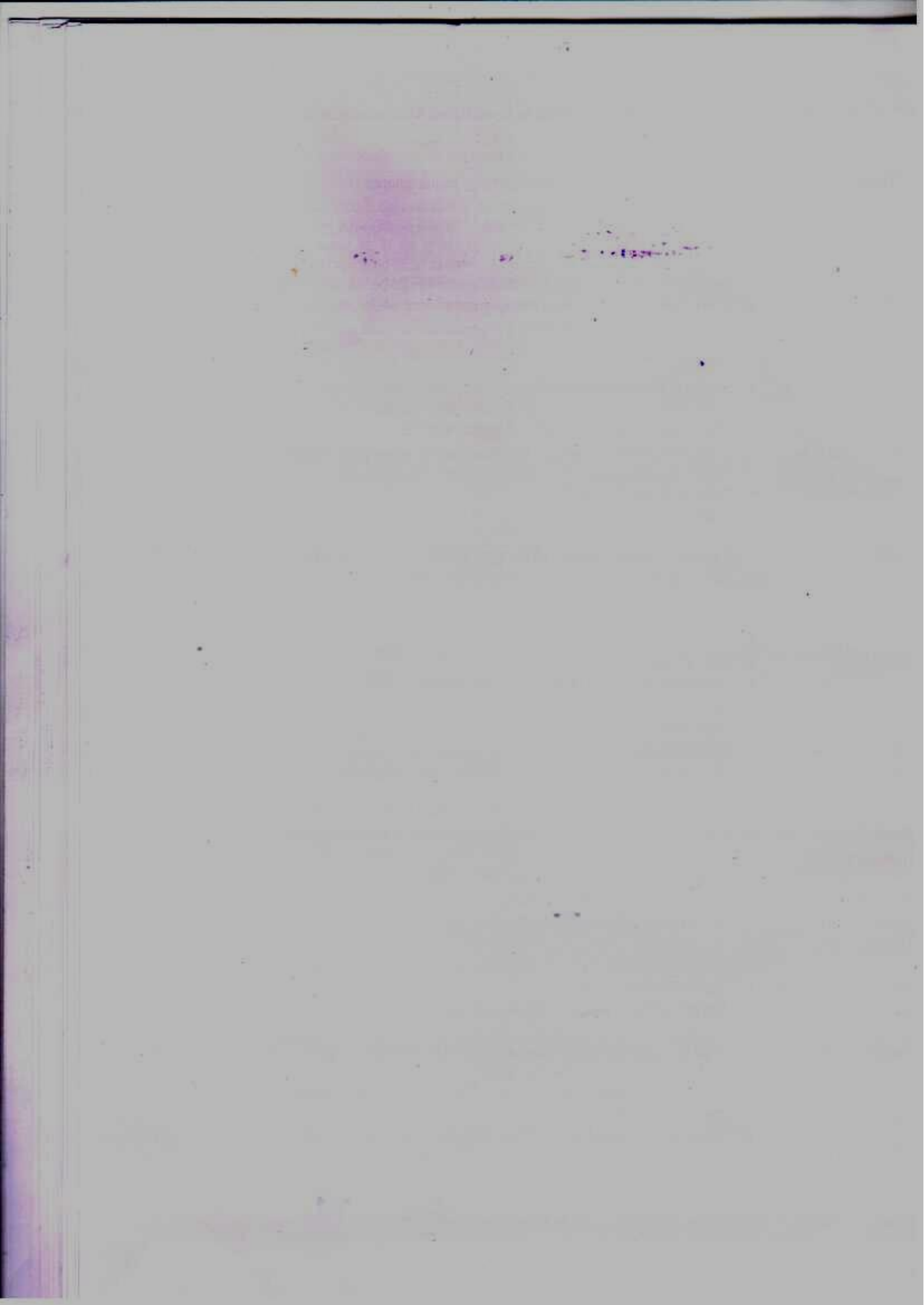
1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50, 000/- p.a.
5. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, 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 PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy /Consulate General 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-individuals, over & above the POI & POA, as mentioned below:

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



KNOW YOUR CLIENT (KYC) Application Form - For Individuals

NEW CHANGE REQUEST (Please tick ✓ the appropriate)

Acknowledgement No. _____



Please fill this form in **ENGLISH** and in **BLOCK LETTERS**

(Please tick ✓ the box on left margin of appropriate row where **CHANGE/CORRECTION** is required and provide the details in the corresponding row)

A IDENTITY DETAILS

<input type="checkbox"/>	1. Name of the Applicant												
<input type="checkbox"/>	2. Father's/Spouse Name												
<input type="checkbox"/>	3a. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	3b. Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married	3c. Date of Birth	D	D	/	M	M	/	Y	Y	Y	Y
<input type="checkbox"/>	4a. Nationality <input type="checkbox"/> Indian <input type="checkbox"/> Other (Please specify) _____												
<input type="checkbox"/>	4b. Status <input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National												
<input type="checkbox"/>	5a. PAN												
<input type="checkbox"/>	5b. Unique Identification Number (UID) / Aadhaar, if any:												
<input type="checkbox"/>	6. Specify Proof of Identity submitted <input type="checkbox"/> PAN card <input type="checkbox"/> Other (Please specify) _____												

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

B ADDRESS DETAILS

<input type="checkbox"/>	1. Residence / Correspondence Address												
	City / Town / Village									Pin Code			
	State							Country					
<input type="checkbox"/>	2. Specify the Proof of Address submitted for Residence / Correspondence Address: _____												
<input type="checkbox"/>	3. Contact Details												
	Tel. (Off.)							Fax					
	Tel. (Res.)							Mobile No					
	E-Mail Id												
<input type="checkbox"/>	4. Permanent Address (If different from above or overseas address, mandatory for Non-Resident Applicant)												
	City / Town / Village									Pin Code			
	State							Country					

C 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.

Date: / /

Signature of the Applicant

FOR OFFICE USE ONLY

In Person Verification (IPV) Details:

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of the Organization: _____

Date of IPV: / /

Signature of the person who has done the IPV

Seal/Stamp of the Intermediary

Originals Verified and Self Attested Document copies received

Date

Signature of the Authorised Signatory

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 authorised to deal in securities on behalf of company/firm/others.
2. Copies of all 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 authorised for attesting the documents, as per the 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 the 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, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/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 a foreign country, e.g., 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 (POI): - List of documents admissible as Proof of Identity:

1. Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
2. PAN card with photograph.
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, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): - 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/Unique Identification Number (UID)/ Aadhar Letter/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/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents 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/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FI/sub account, Power of Attorney given by FI/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN

(*Sufficient documentary 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, FVCIs, 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 PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorised to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorised officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy /Consulate General 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-individuals, over & above the POI & POA, as mentioned below:

Types of entity	Documentary requirements
Corporate	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). <input type="checkbox"/> Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. <input type="checkbox"/> Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly. <input type="checkbox"/> Copies of the Memorandum and Articles of Association and certificate of incorporation. <input type="checkbox"/> Copy of the Board Resolution for investment in securities market. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Partnership firm	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered partnership firms only). <input type="checkbox"/> Copy of partnership deed. <input type="checkbox"/> Authorised signatories list with specimen signatures. <input type="checkbox"/> Photograph, POI, POA, PAN of Partners.
Trust	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered trust only). <input type="checkbox"/> Copy of Trust deed. <input type="checkbox"/> List of trustees certified by managing trustees/CA. <input type="checkbox"/> Photograph, POI, POA, PAN of Trustees.
HUF	<input type="checkbox"/> PAN of HUF. <input type="checkbox"/> Deed of declaration of HUF/ List of coparceners. <input type="checkbox"/> Bank pass-book/bank statement in the name of HUF. <input type="checkbox"/> Photograph, POI, POA, PAN of Karta.
Unincorporated association or a body of individuals	<input type="checkbox"/> Proof of Existence/Constitution document. <input type="checkbox"/> Resolution of the managing body & Power of Attorney granted to transact business on its behalf. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Banks/ Institutional Investors	<input type="checkbox"/> Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Foreign Institutional Investors (FII)	<input type="checkbox"/> Copy of SEBI registration certificate. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Army/ Government Bodies	<input type="checkbox"/> Self-certification on letterhead. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Registered Society	<input type="checkbox"/> Copy of Registration Certificate under Societies Registration Act. <input type="checkbox"/> List of Managing Committee members. <input type="checkbox"/> Committee resolution for persons authorised to act as authorised signatories with specimen signatures. <input type="checkbox"/> True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.

KNOW YOUR CLIENT (KYC) Application Form - For Non Individuals

NEW CHANGE REQUEST (Please tick ✓ the appropriate)

Acknowledgement No. _____



Please fill this form in **ENGLISH** and in **BLOCK LETTERS**

(Please tick ✓ the box on left margin of appropriate row where **CHANGE/CORRECTION** is required and provide the details in the corresponding row)

A IDENTITY DETAILS

1. Name of the Applicant _____

2a. Date of Incorporation DD / MM / YY YY YY YY 2b. Place of Incorporation _____

3. Date of commencement of business DD / MM / YY YY YY YY

4a. PAN _____

4b. Registration No. (e.g. CIN) _____

5. Status (Please tick ✓ the appropriate)

<input type="checkbox"/> Private Limited Co.	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> Charities	<input type="checkbox"/> NGO's	<input type="checkbox"/> FI	<input type="checkbox"/> FII	<input type="checkbox"/> HUF
<input type="checkbox"/> AOP	<input type="checkbox"/> Bank	<input type="checkbox"/> Government Body	<input type="checkbox"/> Non-Government Organization	<input type="checkbox"/> Defense Establishment
<input type="checkbox"/> BOI	<input type="checkbox"/> Society	<input type="checkbox"/> LLP	<input type="checkbox"/> FPI - Category I	<input type="checkbox"/> FPI - Category II
<input type="checkbox"/> FPI - Category III	<input type="checkbox"/> Others (Please specify) _____			

B ADDRESS DETAILS

1. Address for Correspondence _____

City / Town / Village _____ Pin Code _____
 State _____ Country _____

2. Specify the Proof of Address submitted for Correspondence Address: _____

3. Contact Details

Tel. (Off.) _____	Fax _____
Tel. (Res.) _____	Mobile No _____
E-Mail Id. _____	

4. Registered Address (if different from above) _____

City / Town / Village _____ Pin Code _____
 State _____ Country _____

C OTHER DETAILS (If space is insufficient, enclose these details separately [Illustrative format enclosed])

1. Name, PAN, residential address and photographs of Promoters/Partners/Karta/Trustees and whole time directors: _____

2a. DIN of whole time directors : _____

2b. Aadhar number of Promoters/Partners/Karta : _____

D DECLARATION

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 therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/ we are aware that I/we may be held liable for it.

Date: DD / MM / YY YY YY YY

Name & Signature of the Authorised Signatory

FOR OFFICE USE ONLY

In Person Verification (IPV) Details:

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of the Organization: _____

Date of IPV: DD / MM / YY YY YY YY

Signature of the person who has done the IPV _____

Seal/Stamp of the Intermediary

Originals Verified and Self Attested Document copies received

Date

Signature of the Authorised Signatory

1. Name _____

2. Relationship with Applicant (i.e. promoters, whole time directors etc.) _____

3a. PAN _____ 3b. DIN _____

3c. Aadhar (UID) Number _____

4. Residential/ Registered Address _____

City / Town / Village _____
 State _____ Country _____ Pin Code _____

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

1. Name _____

2. Relationship with Applicant (i.e. promoters, whole time directors etc.) _____

3a. PAN _____ 3b. DIN _____

3c. Aadhar (UID) Number _____

4. Residential/ Registered Address _____

City / Town / Village _____
 State _____ Country _____ Pin Code _____

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

1. Name _____

2. Relationship with Applicant (i.e. promoters, whole time directors etc.) _____

3a. PAN _____ 3b. DIN _____

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City / Town / Village _____
 State _____ Country _____ Pin Code _____

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

1. Name _____

2. Relationship with Applicant (i.e. promoters, whole time directors etc.) _____

3a. PAN _____ 3b. DIN _____

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4. Residential/ Registered Address _____

City / Town / Village _____
 State _____ Country _____ Pin Code _____

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

1. Name _____

2. Relationship with Applicant (i.e. promoters, whole time directors etc.) _____

3a. PAN _____ 3b. DIN _____

3c. Aadhar (UID) Number _____

4. Residential/ Registered Address _____

City / Town / Village _____
 State _____ Country _____ Pin Code _____

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

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 authorised to deal in securities on behalf of company/firm/others.
2. Copies of all 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 authorised for attesting the documents, as per the 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 the 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, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/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 a foreign country, e.g., 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 (POI): - List of documents admissible as Proof of Identity:

1. Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
2. PAN card with photograph.
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, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): - 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/Unique Identification Number (UID)/ Aadhar Letter/Registered lease or Sale Agreement of Residence/Driving License/ Flat Maintenance bill/Insurance Copy.

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

Types of entity	Documentary requirements
Corporate	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). <input type="checkbox"/> Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. <input type="checkbox"/> Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly. <input type="checkbox"/> Copies of the Memorandum and Articles of Association and certificate of incorporation. <input type="checkbox"/> Copy of the Board Resolution for investment in securities market. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Partnership firm	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered partnership firms only). <input type="checkbox"/> Copy of partnership deed. <input type="checkbox"/> Authorised signatories list with specimen signatures. <input type="checkbox"/> Photograph, POI, POA, PAN of Partners.
Trust	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered trust only). <input type="checkbox"/> Copy of Trust deed. <input type="checkbox"/> List of trustees certified by managing trustees/CA. <input type="checkbox"/> Photograph, POI, POA, PAN of Trustees.
HUF	<input type="checkbox"/> PAN of HUF. <input type="checkbox"/> Deed of declaration of HUF/ List of coparceners. <input type="checkbox"/> Bank pass-book/bank statement in the name of HUF. <input type="checkbox"/> Photograph, POI, POA, PAN of Karta.
Unincorporated association or a body of individuals	<input type="checkbox"/> Proof of Existence/Constitution document. <input type="checkbox"/> Resolution of the managing body & Power of Attorney granted to transact business on its behalf. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Banks/ Institutional Investors	<input type="checkbox"/> Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Foreign Institutional Investors (FII)	<input type="checkbox"/> Copy of SEBI registration certificate. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Army/ Government Bodies	<input type="checkbox"/> Self-certification on letterhead. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Registered Society	<input type="checkbox"/> Copy of Registration Certificate under Societies Registration Act. <input type="checkbox"/> List of Managing Committee members. <input type="checkbox"/> Committee resolution for persons authorised to act as authorised signatories with specimen signatures. <input type="checkbox"/> True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.

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/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents 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/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

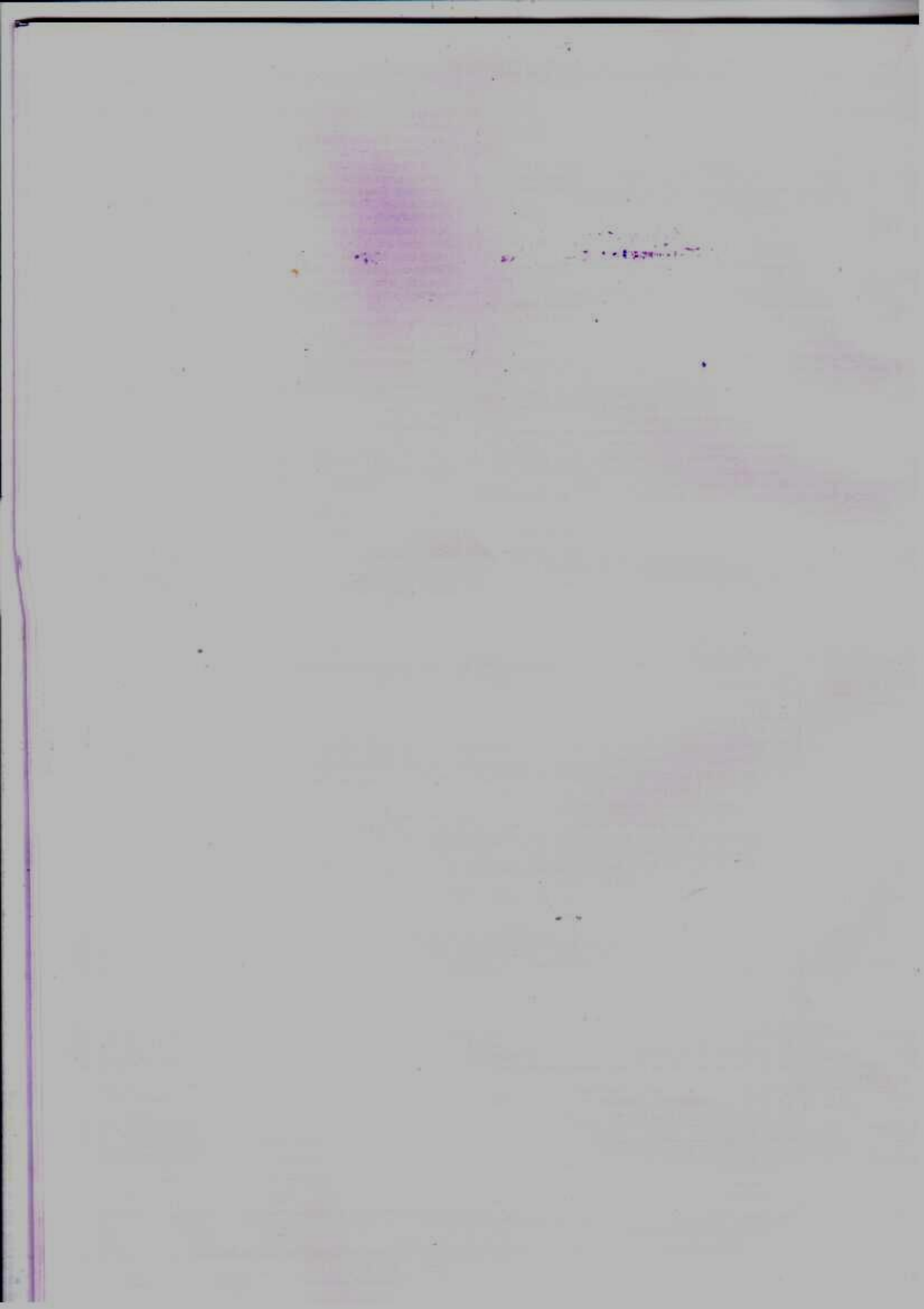
D. Exemptions/clarifications to PAN

(*Sufficient documentary 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, FIIs, MFs, VCFs, FVCIs, 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 PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorised to attest the documents:

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



FATCA/CRS Declaration

Details under FATCA and CRS (see instructions)

(Please consult your professional tax advisor for further guidance on your tax residency, if required)

Demat Client ID: Trading Code:

	First/Sole Holder	Second Holder	Third Holder
PAN			
Name of the Account holder			
City of Birth			
Country of Birth			
Nationality			
Residential Status (Resident / Non-Resident):			

Whether "Specified US Person" – Yes No

Tax Residence declaration – tick any one, as applicable

I am a Tax Resident of India and not resident of any other country

OR

I am a tax resident of country (other than India) mentioned in the below table

Country#	Tax Identification Number	Identification Type (TIN or other, please specify)*

To also include USA, where the individual is a citizen/green card holder of USA

* In case Tax Identification Number is not available, kindly provide functional equivalent

Certification:

1. I/We have understood the information requirements of this Form (read along with the FATCA-CRS Terms and Conditions as mentioned below) and hereby accept the same.
2. I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief and that I/we have not withheld any material information/document, that may affect the assessment/categorization of the account as a US Reportable account/Other Reportable account or otherwise.

3. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/we may liable for it.
4. I/We also understand that the account will be reported if any one of the aforesaid Foreign Account Tax Compliance Act (FATCA)/Common Reporting Standard (CRS) criteria for any of the account holders i.e. primary or joint (in case of demat account) are met.

Sign	Sign	Sign
First Holder	Second Holder	Third Holder

Date: _____ Place: _____

FATCA Terms and Conditions:

Details under FATCA-CRS/Foreign Tax Laws: Towards compliance with tax information sharing laws, such as FATCA and CRS, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any **change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.** Towards compliance with such laws, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and payout any sums from your account or close or suspend your account(s).

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*	<input type="checkbox"/> Residential / Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business	<input type="checkbox"/> Registered Office	<input type="checkbox"/> Unspecified
Proof of Address*	<input type="checkbox"/> Passport	<input type="checkbox"/> Driving Licence	<input type="checkbox"/> UID (Aadhaar)		
	<input type="checkbox"/> Voter Identity Card	<input type="checkbox"/> NREGA Job Card	<input type="checkbox"/> Others	<input type="text"/>	
	<input type="checkbox"/> Simplified Measures Account - Document Type code	<input type="text"/>			

Address

Line 1*

Line 2

Line 3

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

Tel. (Off) - 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

Prefix First Name Middle Name Last Name

Name*

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

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)

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

Date - -

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

(Employee Signature)

INSTITUTION DETAILS

Name

Code

(Institution Stamp)

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