

ADDITIONAL KYC RELATED DETAILS FOR TRADING & DEMAT A/C (For Individuals)

Demat Account Preference (Please tick in relevant boxes)

DP National Securities Depository Limited (NSDL) Central Depository Services Limited (CDSL)

I/We request you to open a Depository Account in my/our name as per the following details: Date

D	D	M	M	Y	Y	Y	Y
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DETAILS OF ACCOUNT HOLDER(S):

	Sole / First Holder	Second Holder	Third Holder
Name			
PAN			
UID			
UCC			
Exchange Name			
Exchange ID			

Consent for Communication to be received by first account holder/ all Account holder:
(Tick the applicable box. If not marked the default option would be **first holder**)

First Holder Second Holder All Joint Account Holders

Type of DEMAT Account

Please Tick As Applicable				For NRI / FOREIGN NATIONAL Accounts	
<input type="checkbox"/> Minor	<input type="checkbox"/> Director	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> FI	<input type="checkbox"/> Repatriable	<input type="checkbox"/> F.N. Depository Receipts
<input type="checkbox"/> Ordinary Resident	<input type="checkbox"/> Director's Relative	<input type="checkbox"/> Clearing Member	<input type="checkbox"/> QFI	<input type="checkbox"/> Non-Repatriable	<input type="checkbox"/> Foreign National
<input type="checkbox"/> HUF/AOP	<input type="checkbox"/> Margin Trading (MANTRA)	<input type="checkbox"/> Bank	<input type="checkbox"/> HUF	<input type="checkbox"/> Repatriable-Promoter	<input type="checkbox"/> Depo. Receipts
<input type="checkbox"/> Margin	<input type="checkbox"/> QFI	<input type="checkbox"/> Mutual Fund	<input type="checkbox"/> OCB	<input type="checkbox"/> Non Repatriable-Promoter	<input type="checkbox"/> Others (Plz. specify) _____
<input type="checkbox"/> Promoter	<input type="checkbox"/> Others (pl. specify) _____	<input type="checkbox"/> Trust	<input type="checkbox"/> Others, plz specify _____		
		<input type="checkbox"/> FI			

In case of NRI / Foreign Nationals / FI / Others (as may be applicable)

RBI Approval Reference No. _____	RBI Approval Date	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	SEBI Regn. No. (for FIs only) _____	SEBI Regn. Date	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y														
D	D	M	M	Y	Y	Y	Y														

Standing Instructions

1	I/We authorise you to receive credits automatically into my/our Demat account	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No								
2	Account to be operated through Demat Debit and Pledge Instruction (DDPI) only	<input type="checkbox"/> Yes	<input type="checkbox"/> No								
SMS Alert Facility (Mandatory if you are giving DDPI). (Ensure that the mobile number is provided in the KYC Application Form also.)											
3	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">Sole / First Holder</th> <th style="width: 33%;">Second Holder</th> <th style="width: 33%;">Third Holder</th> </tr> <tr> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>0</td> <td>0</td> <td>0</td> </tr> </table>	Sole / First Holder	Second Holder	Third Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	0	0	0	
Sole / First Holder	Second Holder	Third Holder									
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No									
0	0	0									
4	Mobile No. belongs to <input type="checkbox"/> Self <input type="checkbox"/> Family Member	Mobile No. belongs to <input type="checkbox"/> Self <input type="checkbox"/> Family Member	Mobile No. belongs to <input type="checkbox"/> Self <input type="checkbox"/> Family Member								
5	Email ID belongs to <input type="checkbox"/> Self <input type="checkbox"/> Family Member	Email ID belongs to <input type="checkbox"/> Self <input type="checkbox"/> Family Member	Email ID belongs to <input type="checkbox"/> Self <input type="checkbox"/> Family Member								
6	Account Statement Requirement <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> As per SEBI Regulations										
7	I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID provided in the KYC form <input type="checkbox"/> Yes <input type="checkbox"/> No										
8	Do you wish to receive dividend / interest directly in to your bank account 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										
9	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										
10	I/We would like to share the email ID with the RTA <input type="checkbox"/> Yes <input type="checkbox"/> No										
11	I/We would like to receive the Annual Report (Tick the applicable box. If not marked the default would be Electronic) <input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both										

FOR DEMAT ACCOUNT ONLY

Clearing Member Details (to be filled up by Clearing Members only) - Non-Individual DEMAT Account

FOR DEMAT ACCOUNT ONLY

1	Name of Stock Exchange	2	Name of Clg. Corpn./Clg. House
3	Clearing Member ID	4	SEBI Regn. No.
5	Trade Name		
6	CM-BP ID (to be filled up by DP)	7	TM ID (to be filled up by DP)

GUARDIAN'S DETAILS (same in line with KYC Form - must be filled up where Sole holder is MINOR)

1	Guardian Name													
2	Guardian Address													
		City/Town/Village				PIN Code								
		State				Country								
3	Relationship with Minor				4	Guardian's PAN								
5	Contact Details of Guardian	Telephone (Office)				Telephone (Res.)								
		Fax No.				Mobile No.								
		Email ID												
6A	Gross Annual Income (Income Range per Annum (Plz tick))	<input type="checkbox"/> Below ₹ 1 Lac	<input type="checkbox"/> ₹ 1-5 Lac	<input type="checkbox"/> ₹ 5-10 Lac	<input type="checkbox"/> ₹ 10-25 Lac	<input type="checkbox"/> Above ₹ 25 Lac								
OR														
6B	Networth (should not be older than 1 year)	Amount (₹)				As on (Date)	D	D	M	M	Y	Y	Y	Y
7	a. Gender	b. Marital Status		c. Date of Birth			d. Nationality							
	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Single <input type="checkbox"/> Married	D D M M Y Y Y Y			<input type="checkbox"/> Indian <input type="checkbox"/> Other Pls specify (if other) _____								
	e. Status	f. Occupation												
		<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National	<input type="checkbox"/> Pvt. Sector <input type="checkbox"/> Pub. Sector <input type="checkbox"/> Govt. Service	<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist	<input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Others, specify _____	<input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer								
8	Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP)			<input type="checkbox"/> Related to Politically Exposed Person (RPEP)									

Affix recent
passport size
Photograph of the
guardian
and
Sign across it

OTHER DETAILS

FOR BOTH	1st Holder	1	Gross Annual Income (Income Range per Annum, Plz tick)	<input type="checkbox"/> Below ₹ 1 Lac	<input type="checkbox"/> ₹ 1-5 Lac	<input type="checkbox"/> ₹ 5-10 Lac	<input type="checkbox"/> ₹ 10-25 Lac	<input type="checkbox"/> Above ₹ 25 Lac						
		OR / AND (For Non-Individual)												
		Net worth (Not older than 1 year)	Amount (₹)				As on (Date)	D	D	M	M	Y	Y	Y
	2	Occupation (Pls. tick any one give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector <input type="checkbox"/> Housewife	<input type="checkbox"/> Govt. Service <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Professional <input type="checkbox"/> Others (plz. specify) _____	<input type="checkbox"/> Agriculturist						
	3	Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP)			<input type="checkbox"/> Related to politically exposed person (RPEP)								
	2nd Holder	1	Gross Annual Income (Income Range per Annum, Plz tick)	<input type="checkbox"/> Below ₹ 1 Lac	<input type="checkbox"/> ₹ 1-5 Lac	<input type="checkbox"/> ₹ 5-10 Lac	<input type="checkbox"/> ₹ 10-25 Lac	<input type="checkbox"/> Above ₹ 25 Lac						
		OR / AND (For Non-Individual)												
		Net worth (Not older than 1 year)	Amount (₹)				As on (Date)	D	D	M	M	Y	Y	Y
	2	Occupation (Pls. tick any one give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector <input type="checkbox"/> Housewife	<input type="checkbox"/> Govt. Service <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Professional <input type="checkbox"/> Others (plz. specify) _____	<input type="checkbox"/> Agriculturist						
3	Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP)			<input type="checkbox"/> Related to politically exposed person (RPEP)									
3rd Holder	1	Gross Annual Income (Income Range per Annum, Plz tick)	<input type="checkbox"/> Below ₹ 1 Lac	<input type="checkbox"/> ₹ 1-5 Lac	<input type="checkbox"/> ₹ 5-10 Lac	<input type="checkbox"/> ₹ 10-25 Lac	<input type="checkbox"/> Above ₹ 25 Lac							
	OR / AND (For Non-Individual)													
	Net worth (Not older than 1 year)	Amount (₹)				As on (Date)	D	D	M	M	Y	Y	Y	Y
2	Occupation (Pls. tick any one give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector <input type="checkbox"/> Housewife	<input type="checkbox"/> Govt. Service <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Professional <input type="checkbox"/> Others (plz. specify) _____	<input type="checkbox"/> Agriculturist							
3	Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP)			<input type="checkbox"/> Related to politically exposed person (RPEP)									
Any Other Information														

BANK DETAILS (Mandatory)

FOR BOTH

	Primary	Secondary, if any
Bank Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Others, <small>in case of NRI, NRE/NRO (Plz specify)</small>	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Others, <small>in case of NRI, NRE/NRO (Plz specify)</small>
Bank Account No.		
Bank Name		
Branch Address		
MICR Code		
IFSC Code		
Proof Provided	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

PAST ACTIONS

Details of any actions/proceedings initiated / pending/taken by SEBI/Exchange/any other authority against the applicant/constituent or its Partners / Promoter s/Wholetime Directors / Authorised Persons in-charge of dealing in securities/ commodities during the last 3 years (In case of any details, please provide a separate sheet)

TRADING PREFERENCE FOR UCC.....

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

FOR TRADING ACCOUNT

EXCHANGE	NSE & BSE		MCX
SEGMENTS	CASH / MUTUAL FUND	F & O	COMMODITY DERIVATIVES

In case you do not wish to trade in any segments/ Mutual Funds, please mention here

- I/We are interested to trade into commodity options and hereby accord my/our consent to trading in commodity options.
 - I/We have gone through the additional risk disclosure document and have appraised myself/ourselves with the risk of trading in commodity options.
 - This consent is valid till I/we revoke the same. I/We understand that I/we have right to withdraw the same at any point of time.
- # 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.

DP DETAILS

Sr.#	Particulars	Primary DP Details	Secondary DP Details
1	DP	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL
2	DP Name		
3	DP ID	Provide Proof	Provide Proof
4	Beneficiary Name		
5	BO/Client ID		

MODE OF OPERATION FOR EXECUTION OF TRANSACTIONS (Transfer, Pledge & Freeze)

<input type="checkbox"/> Jointly	<input type="checkbox"/> Anyone of the Holder
<p>* If Mode of Operation for Joint Account is chosen as anyone of the holder or survivor(s) only specified operation such as transfer of securities including Inter-Depository Transfer, Pledge/Hypothecation/Margin Pledge/Margin re-pledge (creation, closure and invocation and confirmation thereof as applicable) of securities and freeze/unfreeze of account and/or securities and /or specific number of securities will be permitted.</p>	

WHETHER DEALING WITH ANY OTHER STOCK BROKER / AP OF OTHER BROKERS (IN CASE DEALING WITH MULTIPLE STOCK BROKER / AP OF OTHER BROKER, PROVIDE DETAILS OF ALL)

Stock Broker's Name			
AP's Name, if any			
Client Code		Exchange	
Details of disputes/dues pending from/to such stock broker/AP of other Brokers			

ADDITIONAL DETAILS

FOR BOTH DEMAT AND TRADING ACCOUNT	Whether you wish to receive physical contract notes/Documents or electronic contract notes (ECN)/Documents, please select		<input type="checkbox"/> Physical	<input type="checkbox"/> Electronic
	If Electronic, please specify your E-mail ID			
	Whether you wish to avail of the facility of Internet Trading / wireless technology, please tick		<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Number of years of Investment / Trading Experience			
	In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorised to deal in securities on behalf of company / firm / others : Fill in Annexure A			

INTRODUCER DETAILS

Introducer's Name	First Name	Middle Name	Surname
Introducer's Address			
Introducer's Status	<input type="checkbox"/> Remisier <input type="checkbox"/> Authorised Person <input type="checkbox"/> Existing Client <input type="checkbox"/> Other (pls. specify)_____		
Signature			Phone No.

CLIENT CATEGORISATION

Please Select () on the below appropriate category depending upon your proposed nature of your activity against each product type.

Commercial - <input type="checkbox"/>	Non-Commercial - <input type="checkbox"/>
Product type - <input type="checkbox"/>	Product type - <input type="checkbox"/>
Bullion - <input type="checkbox"/>	Bullion - <input type="checkbox"/>
Base Metals - <input type="checkbox"/>	Base Metals - <input type="checkbox"/>
Energy - <input type="checkbox"/>	Energy - <input type="checkbox"/>
Agri-Commodities - <input type="checkbox"/>	Agri-Commodities - <input type="checkbox"/>

1. COMMERCIAL: Commercial Client includes Value Chain / Physical market participant / exporter / importer / having direct / indirect Exposure to the underlying Commodity
2. NON-COMMERCIAL: Non Commercial Client includes Trader / Arbitrageur