Religare Broking Ltd.

Form No. : ..... Client Code : .....

Extensive research. Insightful trading.
Intelligent investments.

Account Opening Form - Trading & Depository (NSDL/CDSL)

(Individual & Non-Individual)

RELIGARE Values that bind | BROKING

FOR OFFICE USE ONLY

☐ **NSDL** ☐ **CDSL**

Branch Code

Depository Scheme ☐ Normal ☐ Bandhan ☐ BIMA ☐ BSDA

Client Code

Depository

Initial Cheque Details (1)

Cheque No. Date D D M M Y Y Y Y Amount

Drawn No.

Initial Cheque Details (2)

Cheque No. Date D D M M Y Y Y Y Amount

Drawn No.

	Name	Employee Code	Signature
Introducer			
RM			
Dealer 1			
Dealer 2			

ACCOUNT OPENING KIT

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 - Document captures the basic information about the constituent and an instruction / check list.	1-7
		B. Document captures the additional information about the constituent relevant to trading & depository account and an instruction / check list.	8-19
2.	Tariff Sheet	A. Schedule of Charges for Depository Services	20
		B. Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock/commodity exchange(s).	21
3.	Rights and Obligations	A. Document stating the Rights & Obligations of stock broker / trading member, authorised person and client for trading on stock/commodity exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	L 1-15
		B. Rights and Obligations of Beneficial Owner and Depository Participant.	L 16-18
4.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities & commodities market.	L 19-26
5.	Guidance Note	Document detailing do's and don'ts for trading on stock/commodity exchange, for the education of the investors.	L 27-30
6.	Policies and Procedure	Document describing significant policies and procedures of the stock broker / trading member.	L 31-47
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER / TRADING MEMBER & DEPOSITORY PARTICIPANT			
7.	Request for Trade Alerts through SMS and / or Email	Document requesting trade alerts through SMS & / or Email from Exchanges.	22-24
8.	Authorization For Sharing Personal Information	Document authorizing stock broker to share personal information to receive offers and information on various products/services etc.	
9.	Authority Letter to Pledge the shares / securities / commodities	Document authorizing stock/commodity broker to pledge clients shares / securities / commodities lying towards margin / collateral.	
10.	Verbal Order Acceptance Authorisation	Document authorizing Stock Broker / Trading Member to accept verbal orders in the manner mentioned therein.	
11.	Running Account Authorisation	Document authorizing Stock Broker / Trading Member to maintain the running account of funds, securities & commodities in the manner mentioned therein.	
12.	Format for Client Opting Online Trading Facility	Document for client opting for online trading facility.	
13.	Product Addendum	Intraday products for client enhancing limit / margin facility.	
14.	Option for Issue of Delivery Instruction Booklet (DIS)	Consent for Delivery Instruction Booklet (DIS Booklet)	25
15.	Account Handling Mandate/Letter of Authority/KYC of Related Person	Authorisation for accepting instructions from third person. KYC of Related person (Authorised Representative / Guardian of Minor)	26-28
16.	Categorization of the clients for commodity	Self Declaration - Categorization of the clients for each commodity	29-30
17.	FATCA / CRS Declaration	FATCA / CRS Declaration for Individuals	31-32
18	Demat Debit and Pledge Instruction (DDPI)	Execution of Demat Debit and Pledge Instruction (DDPI) for transfer of securities towards deliveries / settlement obligations and pledging / re-pledging of securities.	33
19.	Voluntary Additional Terms & Conditions for availing depository services	Additional Terms & Conditions for availing depository services.	L48
20.	Product Terms and Conditions	Terms and Conditions for availing Intraday product services.	L49-53
21.	Terms & Conditions-Cum-Registration / Modification Form for Receiving SMS Alert from CDSL		L54-55
22.	Investor Charter and disclosure for Stock Broker and Depository Participant	Investor Charter and disclosure by Stock Broker and Depository Participant for clients.	L57-68
23.	Format for Written Orders	Format for order placement in writing.	L69
24.	NACH Mandate (to be submitted with banker)	Document authorizing to debit depository / other charges electronically from bank.	

Name of Stock Broker / Trading Member / Clearing Member: Religare Broking Limited

Name of Stock Exchange and Depository	Membership Regn.	SEBI Registration Number and Date
National Stock Exchange of India Limited	06537	Cash | F&O | Currency Derivatives | Debt | Commodity Derivatives : INZ000174330 | May 03, 2018
BSE Limited	3004	
Metropolitan Stock Exchange of India Limited	1051	
National Commodity & Derivatives Exchange Ltd	01276	
Multi Commodity Exchange of India Ltd.	56560	
National Securities Depository Limited		**DP ID:** IN301774 | IN-DP-385-2018 | October 16, 2018
Central Depository Services (India) Limited		**DP ID:** 30200 | IN-DP-385-2018 | October 16, 2018

Registered Office Address
2nd Floor, P-14, 45/90, P Block, Connaught Place, New Delhi-110001
Ph: +91-11-4987-1000, 4900-7900 | Fax: +91-11-4987-1189 | Website: www.religareonline.com
Correspondence Office Address
A-3/4/5, Club 125 (Tower-A), Sector-125, Noida-201301 (U.P.)
Ph: 0120-486-6666 | Fax: 0120-486-6274 | Website: www.religareonline.com
CIN : U65999DL2016PLC314319

Compliance Officer Details		**CEO Details**	
Name	: Mr. Vikas Sethi	Name	: Mr. Gurpreet Singh Sidana
Phone No.	: 0120-486-6650	Phone No.	: 0120-486-6575
Email Id	: compliance@religare.com	Email Id	: brokingceo@religare.com

For any grievance/dispute please contact Religare Broking Limited at the above address or email id: igreligare@religare.com and Phone No.: 1860 25 88888. In case not satisfied with the response, please contact the concerned exchange(s) at :

Exchange Name	Email Id	Phone No.
NSE	ignse@nse.co.in	022-26598100 / 1800 266 0050 (Select IVR option 5)
BSE	is@bseindia.com	022-22721233/34
MSE	investorcomplaints@msei.in	022-61129000 Ext. 9028
Senior Manager, Investor Services Centre, Metropolitan Stock Exchange of India Limited, Exchange Square, Suren Road, Chakala, Andheri (East), Mumbai-400 093		
NCDEX	ig@ncdex.com	022-66406789
MCX	grievance@mcxindia.com	022-66494070
NSDL	relations@nsdl.co.in	(022) 2499 4200 / (022) 4886 7000 / (022) 2499 7000
CDSL	complaints@cdslindia.com	1800 22 55 33

ACKNOWLEDGEMENT

I / We acknowledge receipt of the documents at serial 3, 4, 5, 6, 19, 20, 21, 22 and 23 mentioned overleaf under INDEX. I / We have read the contents of these and agree to abide by them. I / We further understand that the copies of rest of the documents mentioned in Index shall be provided to me / us after Verification / Acceptance / Execution by the broker and Depository Participant.

Sole/First Holder Signature	Second Holder Signature	Third Holder Signature

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/ commodities derivatives 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 current & 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 along with other statutory approvals required for investment in commodities. (as applicable)
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) & Address (POA): - List of documents admissible as Proof of Identity & Address:

1. Passport.
2. Driving license.
3. Unique Identification Number (UID) (Aadhaar).
4. Voter's Identity Card issued by Election Commission of India.
5. Job card issued by NREGA duly signed by an officer of the State Government.
6. Letter issued by the National Population Register containing details of name, address, or any other document as notified by the Central Government in consultation with the Regulator.

C. In case of "Officially Valid Documents (OVD)" listed in Proof of Identity & Address does not contain updated address, the document as prescribed below shall be deemed to be the OVD for the limited purpose of proof of address for three month under Conditions that welcome letter after KYC should not returned back in reasonable time to start transaction in account:

1. Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
2. Property or Municipal tax receipt.
3. Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
4. Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.
5. For FII / sub account, Power of Attorney given by FII / subaccount to the Custodians (which are duly notarized and / or apostiled or consularised) that gives the registered address should be taken.

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.

F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, KYC details of all related persons to be provided as per regulatory requirement, as mentioned below:

Types of entity	Documentary requirements
Corporate	• 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, OVD, PAN and DIN numbers of whole time directors / two directors / person authorised to transact / beneficial owner in charge of day to day operations. • Photograph, OVD, 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	• 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 alongwith KYC. • Photograph, OVD, PAN of Partners.
Trust	• 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, OVD, PAN of Trustees.
HUF	• PAN of HUF. • Deed of declaration of HUF / List of coparceners. • Bank pass-book / bank statement in the name of HUF. • Photograph, OVD, PAN of Karta.
Unincorporated association or a body of individuals	• Proof of Existence / Constitution document. • Resolution of the managing body & Power of Attorney granted to transact business on its behalf. • Authorised signatories list with specimen signatures alongwith KYC.
Banks/ Institutional Investors	• Copy of the constitution / registration or annual report / balance sheet for the last 2 financial years. • Authorised signatories list with specimen signatures alongwith KYC.
Foreign Institutional Investors (FII)	• Copy of SEBI registration certificate. • Authorised signatories list with specimen signatures alongwith KYC.
Army/Government Bodies	• Self-certification on letterhead. • Authorised signatories list with specimen signatures alongwith KYC.
Registered Society	• 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 alongwith KYC. • True copy of Society Rules and Bye Laws certified by the Chairman/Secretary. • Power of Attorney granted to transact business on its behalf.

INSTRUCTIONS/ CHECK LIST (for filling additional information related to trading account)

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

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

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

2. Copy of cancelled cheque leaf / pass book / bank statement specifying name of the constituent, MICR Code or / and IFSC Code of the bank should be submitted.
3. Demat master or recent holding statement issued by DP bearing name of the client.
4. For Individuals:
   a. Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker / Authorized person.
   b. In case of non-resident clients, employees at the stock broker's local office, overseas can do ‘in-person’ verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
5. For non-individuals:
   a. Form need to be initialized by all the authorised signatories.
   b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorised to deal in securities on behalf of company / firm / others and their specimen signatures.

KNOW YOUR CLIENT (KYC) / CENTRAL KYC REGISTRY APPLICATION FORM (For Individuals)

Religare Broking Limited
A-3 / 4 / 5, Club 125, (Tower-A)
Sector-125, Noida-201301 (U.P.)

Account Type: ☐ Normal ☐ Minor ☐ Aadhar OTP Based E-KYC
Application Type* ☐ New ☐ Update

CKYC Number _____
(Mandatory for KYC update request)

PHOTOGRAPH
Please affix your recent passport size photograph

2 Signature Across Photograph

Please fill this form in ENGLISH and in BLOCK LETTERS

A. PERSONAL IDENTITY DETAILS

1. Name of the Applicant _____
   Maiden Name (if any) _____
2. ☐ Father's / ☐ Spouse Name _____
3. Mother Name _____
4. a) Gender ☐ Male ☐ Female ☐ Transgender
   b) Marital Status ☐ Single ☐ Married c) Date of Birth D D M M Y Y Y Y
5. a) Nationality ☐ Indian ☐ Others Pls. specify.....
   b) Residential Status ☐ Resident Individual ☐ Non Resident ☐ Foreign National ☐ Person of Indian Origin
6. a) PAN _____ | b) Aadhaar Number, if any X X X X X X X X

B. ADDRESS & IDENTITY DETAILS

Address Type ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

1. Permanent Address _____
   (For Non-Resident Applicant Mandatory to specify overseas address) _____
   City / Town / Village _____ PIN Code _____
   State _____ Country _____
2. Specify the proof of Identity & Address submitted ☐ Aadhaar Card ☐ Any other (please specify).....
3. Contact Details Tel. (Off.) with STD Code _____ Tel. (Res.) with STD Code _____
   Fax No. with STD Code _____ Mobile No. _____
   Email ID _____
4. Current Address (If different from above) _____
   _____
   City / Town / Village _____ PIN Code _____
   State _____ Country _____
5. Specify the proof of address submitted for Current Address _____

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.
- I am aware of other modes of KYC which are available and I have chosen Aadhaar based method voluntarily. My Aadhaar record can be used by KRA Registration Agency/Central KYC Registry only for the specific purpose of validating/maintaining / sharing my KYC record and as an audit evidence. I will have an option to request for deletion of my Aadhaar record.
- I hereby consent to receiving information from KRA Registration Agency/Central KYC Registry through SMS/Email on the above registered number/email address.
- I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

3

Signature / Thumb Impression of Applicant

Date D D M M Y Y Y Y

ATTESTATION / FOR OFFICE USE ONLY

In person Verification (IPV) Details / KYC Verification Carried out by :

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of Authorised Person _____

Name of the Organization: **Religare Broking Ltd.** Emp. Branch _____

Date of IPV: D D / M M / Y Y Y Y

Signature of the person who has done the IPV

Method of receipt of Document: .....

☐ Original Verified, Self Attested Documents & Certified copies received **Date** D D M M Y Y Y Y

Seal/Stamp of the Intermediary

Signature of the Authorised Signatory

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

PHOTOGRAPH

Please affix your recent passport size photograph

Signature Across Photograph

Religare Broking Limited
A-3 / 4 / 5, Club 125, (Tower-A)
Sector-125, Noida-201301 (U.P.)

Application Type* ☐ New ☐ Update

CKYC Number

(Mandatory for KYC update request)

Please fill this form in ENGLISH and in BLOCK LETTERS

A. ENTITY DETAILS

1. Name of the Applicant
2. Date of incorporation/ formation D D M M Y Y Y Y Place of incorporation/ formation
3. Date of commencement of business D D M M Y Y Y Y
4. Country of Incorporation / Formation
5. PAN Registration No. (e.g. CIN)
6. TIN/GST Registration No.
   TIN/Equivalent Issuing Country
7. Entity Constitution Type (please tick ✓ any one) ☐ Private Limited Co. ☐ Public Ltd. Co. ☐ Liquidator ☐ HUF
   ☐ ALP ☐ FI ☐ FII ☐ AJP ☐ AOP ☐ BOI ☐ Government Body ☐ Section 8 Companies (Company Act, 2013)
   ☐ CGD/SGD or Agency ☐ Defense Establishment ☐ BOI ☐ Society ☐ LLP ☐ Bank ☐ FPI-Category I
   ☐ FPI-Category II ☐ FPI-Category III ☐ Partnership ☐ Trust ☐ Others (Please specify) .....

B. PROOF OF IDENTITY (PoI)

☐ Officially valid document(s) in respect of person authorised to transact
☐ Certificate of Incorporation / Formation
☐ Registration Certificate No.
☐ Memorandum and Articles of Association ☐ Partnership Deed ☐ Trust Deed
☐ Resolution of Board / Managing Committee
☐ Power of attorney granted to its manager, officers or employees to transact on its behalf

C. ADDRESS DETAILS

1. Registered Office Address/Place of Business
   Proof of Address ☐ Certificate of Incorporation/Formation ☐ Registration Certificate ☐ Other Document
   Line 1
   Line 2
   Line 3 City/Town/Village
   District State
   PIN/Post Code Country
2. Contact Details
   Tel. (Off.) with STD Code Tel. (Res.) with STD Code
   Fax No. with STD Code Mobile No.
   Email ID
3. Local Address in India (if different from above)
   Line 1
   Line 2
   Line 3 City/Town/Village
   District State
   PIN/Post Code Country
4. Specify the proof of address submitted for Local Address in India

D. NUMBER OF RELATED PERSONS

(KYC to be provided for all related persons)

Signature of the Authorised Signatory(ies)

E.	OTHER DETAILS	
1.	Name, PAN, residential address and photographs of Promoters/ Partners / Karta / Trustees and whole time directors:	If space is insufficient, enclose these details separately [Illustrative format enclosed on page no. 6 & 7]
2.	DIN of whole time directors	
3.	Aadhaar number of Promoters / Partners / Karta	

F.	REMARKS (If any)

G. APPLICANT DECLARATION

- I/We hereby consent to receiving information from KRA Registration Agency/Central KYC Registry through SMS/Email on the above registered number/email address.
- 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 D D M M Y Y Y Y

Place

Name & Signature of the Authorised Signatory(ies)

ATTESTATION / FOR OFFICE USE ONLY

In person Verification (IPV) Details / KYC Verification Carried out by :

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of Authorised Person _____

Name of the Organization: **Religare Broking Ltd.** Emp. Branch _____

Date of IPV: D D / M M / Y Y Y Y

Signature of the person who has done the IPV

Method of receipt of Document: .....

☐ Original Verified, Self Attested Documents & Certified copies received **Date** D D M M Y Y Y Y

Seal/Stamp of the Intermediary

Signature of the Authorised Signatory

DETAILS OF AUTHORISED SIGNATORY(IES) / PROMOTERS / PARTNERS / KARTA / TRUSTEES / WHOLE TIME DIRECTORS & TWO DIRECTORS FORMING A PART OF KNOW YOUR CLIENT (KYC) APPLICATION FORM FOR NON-INDIVIDUALS

Application Type ☐ New ☐ Update ☐ Delete

CKYC Number _____ PAN of the Applicant _____

Name of Applicant _____

1. DETAILS OF RELATED PERSON

PHOTOGRAPH

Please affix your recent passport size photograph

Signature Across Photograph

☐ Addition of Related Person ☐ Deletion of Related Person

☐ Update Related Person Details

☐ CKYC Number of Related Person (if available)

(If CKYC number is available, Only "Related Person Type" & "Name" is mandatory)

Related Person Type ☐ Director ☐ Promoter ☐ Trustee ☐ Partner ☐ Karta ☐ Beneficiary ☐ Authorised Signatory ☐ Power of Attorney Holder ☐ Court Appointment Official ☐ Beneficial Owner ☐ Other (Please Specify) .....

DIN (Director Identification Number) _____
(Mandatory if related person type is director)

Please tick, If applicable ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (RPEP) ☐ Not a Politically Exposed Person (PEP) ☐ Not Related to a Politically Exposed Person (RPEP)

1.1 PERSONAL DETAILS

	Prefix	First Name	Middle Name	Last Name
Name (Same as ID Proof)				
Maiden Name				
Father/Spouse Name				
Mother Name				

Date of Birth D D M M Y Y Y Y

Gender ☐ M - Male ☐ F - Female ☐ T - Transgender

Nationality ☐ IN-Indian ☐ Others (Specify) _____

PAN _____

1.2 PROOF OF IDENTITY AND ADDRESS

1. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

☐ A - Passport Number _____

☐ B - Voter ID Cardd _____

☐ C - Driving Licence _____

☐ D - NREGA Job Card _____

☐ E - National Population Register Letter _____

☐ F - Proof of Possession of Aadhaar _____

2. ☐ E-KYC Authentication _____

3. ☐ Offline verification of Aadhaar _____

Address

Line 1 _____

Line 2 _____

Line 3 _____ City/Town/Village _____

District _____ State _____

PIN/Post Code _____ Country _____

1.3 CURRENT ADDRESS DETAILS

☐ Same as above mentioned address (in such cases address details as below need not be provided)

1. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)
   - ☐ A - Passport Number
   - ☐ B - Voter ID Cardd
   - ☐ C - Driving Licence
   - ☐ D - NREGA Job Card
   - ☐ E - National Population Register Letter
   - ☐ F - Proof of Possession of Aadhaar
2. ☐ E-KYC Authentication
3. ☐ Offline verification of Aadhaar
4. ☐ Deemed Proof of Address -
5. ☐ Self Declaration

Address

Line 1

Line 2

Line 3 City/Town/Village

District State

PIN/Post Code Country

4. CONTACT DETAILS

Tel. (Off) Tel. (Resi)

Mobile Email ID

5. DECLARATION

- I/We hereby consent to receiving information from KRA Registration Agency/Central KYC Registry through SMS/Email on the above registered number/email address.
- 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 D D M M Y Y Y Y

Place

Name & Signature of the Authorised Signatory(ies)

ATTESTATION / FOR OFFICE USE ONLY

In person Verification (IPV) Details / KYC Verification Carried out by :

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of Authorised Person _____

Name of the Organization: **Religare Broking Ltd.** Emp. Branch _____

Date of IPV: D D / M M / Y Y Y Y

Signature of the person who has done the IPV

Method of receipt of Document: .....

☐ Original Verified, Self Attested Documents & Certified copies received **Date** D D M M Y Y Y Y

Seal/Stamp of the Intermediary

Signature of the Authorised Signatory

ACCOUNT OPENING FORM FOR TRADING & DEPOSITORY (For Individuals & Non Individuals)

Religare Broking Limited
A-3 / 4 / 5, Club 125 (Tower-A), Sector-125,
Noida-201301 (U.P.)

Date D D M M Y Y Y Y

Client ID (to be filled by DP) NSDL I N 3 0 1 7 7 4 CDSL 1 2 0 3 0 2 0 0

Client Code:

I/We request you to open a ☐ Trading & Demat Account ☐ Trading Account ☐ Demat Account in my/our name as per the following details:

(Please fill all the details in **CAPITAL LETTERS** only)

A. TYPE OF ACCOUNT NSDL (Please tick whichever is applicable)

☐ Ordinary Resident ☐ NRI-Repatriable ☐ NRI-Non Repatriable ☐ Foreign National ☐ Promoter
☐ Qualified Foreign Investor ☐ Margin ☐ Body Corporate ☐ Partnership Firm ☐ HUF
☐ Bank ☐ FI ☐ Mutual Fund ☐ CM ☐ FII ☐ Trust ☐ Minor ☐ Others (Pls. Specify) _____

TYPE OF ACCOUNT CDSL (Please tick whichever is applicable)

Status	Sub – Status
☐ Individual	☐ Individual Resident ☐ Individual-Director ☐ Individual Director's Relative ☐ Individual HUF / AOP ☐ Individual Promoter ☐ Minor ☐ Individual Margin Trading A/C (MANTRA) ☐ Others(specify) _____
☐ NRI	☐ NRI Repatriable ☐ NRI Non-Repatriable ☐ NRI Repatriable Promoter ☐ NRI Non-Repatriable Promoter ☐ NRI – Depository Receipts ☐ Others (specify) _____
☐ Foreign National	☐ Foreign National ☐ Foreign National - Depository Receipts ☐ Others (specify)_____
☐ Body Corporate ☐ Banks ☐ Trust ☐ Mutual Fund ☐ OCB ☐ FII ☐ CM ☐ FI ☐ Clearing House ☐ Other (Specify) _____	**To be filled by the DP**

B. DETAILS OF ACCOUNT HOLDER(S)

I. SOLE / FIRST HOLDER NAME (For Depository Account) PAN

Occupation (please tick any one and give brief details)
☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional
☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Others (Pls. Specify)_____
Brief Details

Mobile Number Declaration (*Family to strictly include spouse, dependent children and dependent parents only, Kindly tick on relevant option.)	I hereby declare that the Mobile number mentioned on KYC belongs to : ☐ **Self** ☐ **Family*** (please specify the relation below) : ☐ Spouse ☐ Dependent Children ☐ Dependent Parents Family PAN & Name
Consent for SMS Alert facility	☐ Yes ☐ No [Mandatory, if account to be operated through Power of Attorney / Demat Debit and Pledge Instruction (DDPI)]. Ensure that the Mobile number is provided in the KYC application form. Refer to T&C given in Annexure 2.4 CDSL, available on our website: www.religareonline.com
E-mail ID Declaration (*Family to strictly include spouse, dependent children and dependent parents only, Kindly tick on relevant option.)	I hereby declare that the E-mail ID mentioned on KYC belongs to: ☐ **Self** ☐ **Family*** (please specify the relation below) : ☐ Spouse ☐ Dependent Children ☐ Dependent Parents Family PAN & Name
Please tick, If applicable	☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (RPEP) ☐ Not a Politically Exposed Person (PEP) ☐ Not Related to a Politically Exposed Person (RPEP)

II. SECOND HOLDER NAME (For Depository Account)

PAN

Occupation (please tick any one and give brief details)

☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional
☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Others (Pls. Specify)_____

Brief Details

Mobile Number Declaration (*Family to strictly include spouse, dependent children and dependent parents only, Kindly tick on relevant option.)

I hereby declare that the Mobile number mentioned on KYC belongs to :

☐ **Self** ☐ **Family*** (please specify the relation below) :
☐ Spouse ☐ Dependent Children ☐ Dependent Parents

Family PAN & Name

Consent for SMS Alert facility

☐ Yes ☐ No [Mandatory, if account to be operated through Power of Attorney / Demat Debit and Pledge Instruction (DDPI)].

Ensure that the Mobile number is provided in the KYC application form. Refer to T&C given in Annexure 2.4 CDSL, available on our website: www.religareonline.com

E-mail ID Declaration (*Family to strictly include spouse, dependent children and dependent parents only, Kindly tick on relevant option.)

I hereby declare that the E-mail ID mentioned on KYC belongs to:

☐ **Self** ☐ **Family*** (please specify the relation below) :
☐ Spouse ☐ Dependent Children ☐ Dependent Parents

Family PAN & Name

Please tick, If applicable

☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (RPEP)
☐ Not a Politically Exposed Person (PEP) ☐ Not Related to a Politically Exposed Person (RPEP)

III. THIRD HOLDER NAME (For Depository Account)

PAN

Occupation (please tick any one and give brief details)

☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional
☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Others (Pls. Specify)_____

Brief Details

Mobile Number Declaration (*Family to strictly include spouse, dependent children and dependent parents only, Kindly tick on relevant option.)

I hereby declare that the Mobile number mentioned on KYC belongs to :

☐ **Self** ☐ **Family*** (please specify the relation below) :
☐ Spouse ☐ Dependent Children ☐ Dependent Parents

Family PAN & Name

Consent for SMS Alert facility

☐ Yes ☐ No [Mandatory, if account to be operated through Power of Attorney / Demat Debit and Pledge Instruction (DDPI)].

Ensure that the Mobile number is provided in the KYC application form. Refer to T&C given in Annexure 2.4 CDSL, available on our website: www.religareonline.com

E-mail ID Declaration (*Family to strictly include spouse, dependent children and dependent parents only, Kindly tick on relevant option.)

I hereby declare that the E-mail ID mentioned on KYC belongs to:

☐ **Self** ☐ **Family*** (please specify the relation below) :
☐ Spouse ☐ Dependent Children ☐ Dependent Parents

Family PAN & Name

Please tick, If applicable

☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (RPEP)
☐ Not a Politically Exposed Person (PEP) ☐ Not Related to a Politically Exposed Person (RPEP)

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

a) Name

b) PAN

D. FATCA / CRS DECLARATION / SELF CERTIFICATION FOR INDIVIDUALS

	First/Sole Holder	Second Holder (if any)	Third Holder (if any)
Are you U.S. Person? (Includes person born in USA)	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Residence for Tax purposes in jurisdictions(s) outside India	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Citizenship of any country other than India	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Note: If your answer to any of the above questions is 'YES', please fill the declaration of FATCA / CRS given on page no. 31 of the form.

E. INCOME DETAILS

Gross Annual Income Details (please specify)

Income Range per annum

☐ Below ₹1 Lac ☐ ₹1-5 Lac ☐ ₹5-10 Lac ☐ ₹10-25 Lac

☐ ₹25 Lac -1 Crore ☐ Above 1 Crore

Net- worth Amount (₹) _____

As on (date) D D M M Y Y Y Y

(Net worth should not be older than 1 year)

F.

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

☐ Yes ☐ No

G. BANK ACCOUNT DETAILS (1) [Dividend Bank Details]

Bank Name

Branch Address

City / Town / Village PIN Code

State Country

Bank Account No.

Bank Account Type ☐ Savings ☐ Current ☐ Others_____ In case of NRI : ☐ NRE ☐ NRO

MICR Code IFSC

(i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)
(ii) Photocopy of the Bank Statement having name and address of the BO
(iii) Photocopy of the Passbook having name and address of the BO, (or)
(iv) Letter from the Bank.

- In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

BANK ACCOUNT DETAILS (2)

Bank Name

Branch Address

City / Town / Village PIN Code

State Country

Bank Account No.

Bank Account Type ☐ Savings ☐ Current ☐ Others_____ In case of NRI : ☐ NRE ☐ NRO

MICR Code IFSC

H. (1) DEPOSITORY ACCOUNT(S) DETAILS

Depository Participant Name

Depository Name ☐ NSDL ☐ CDSL DP ID Beneficiary ID (BO ID)

Beneficiary Name

(2) DEPOSITORY ACCOUNT(S) DETAILS

Depository Participant Name

Depository Name ☐ NSDL ☐ CDSL DP ID Beneficiary ID (BO ID)

Beneficiary Name

(3) TRADING ACCOUNT DETAILS (applicable for Depository Account only)

I already have trading account and want to map my/our demat account with my trading account:

Name of Stock Broker and Depository Participant : Religare Broking Limited

Trading Code DP ID - IN301774 Beneficiary ID (BO ID)

DP ID - 12030200 Beneficiary ID (BO ID)

I. TRADING PREFERENCES

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

Exchanges	NSE & BSE				MCX & NCDEX
All Segments	Cash / Mutual Fund	F&O	Currency	Debt	Commodity Derivatives
Please sign here to select all the segments					

If you do not wish to trade in any of segments / Mutual Fund, please mention here _____

J. CATEGORIZATION OF THE CLIENT FOR COMMODITY

Category (Please Specify)

☐ Farmers/FPOs ☐ Value Chain Participants (VCPs) ☐ Proprietary Traders
☐ Domestic Financial Institutional investors ☐ Foreign Participants ☐ Others

Note: Declaration for commodities given on page no. 29 is required to be filled, if not opted "others".

K. PAST ACTIONS

Details of any action / proceedings initiated / pending / taken by SEBI / Stock exchange / Commodity exchange any other authority against the applicant / constituent or its Partners / promoters / whole time directors / authorised persons in charge of dealing in securities during the last 3 years, give details (attach annexure if required)

L. ADDITIONAL DETAILS / STANDING INSTRUCTIONS

1. Whether you wish to receive Contract Note, Statement of Account & Transaction-cum-holding statement in Physical or Electronic mode (please specify) ☐ Electronic Mode ☐ Physical Mode
[If Opted Electronic Mode, read note 6 and ensure that Email ID is provided in KYC application form.

2. Mode of receiving Standard Account Opening Documents (Sr. No. 3, 4, 5 and 6 under INDEX): ☐ Electronic Mode ☐ Physical Mode

3. Number of years of Investment/Trading Experience ☐ No ☐ Yes ☐☐ Years of Experience ☐☐ Years in Commodities

4. I/We authorise you to receive credits automatically into my / our Demat account. [Automatic Credit]
(If you do not wish to receive credits automatically please tick ☑ on "No" and cross ☒ the option "Yes") ☑ Yes ☐ No

5.	I / We would like to instruct the DP to accept all the pledge instructions/enable with flag "Standing Instruction for Auto Pledge Confirmation" in my /our account without any other further instruction from my/our end. I / We have read and understood the Securities and Exchange Board of India's guideliens on Pledging of shares in dematerialised form as regulated by SEBI (Depositories and Participants) Regulations, 1996 and Depositories Act, 1996. (If not marked, the default option would be 'No') ☐ Yes ☐ No
6.	Account Statement Requirement ☐ As per SEBI Regulation ☐ Daily ☐ Weekly ☐ Fortnightly ☐ Monthly
7.	I / We would like to share the email ID with the RTA ☐ Yes ☐ No
8.	I / We would like to receive the Annual Report ☐ Physical / ☐ Electronic / ☐ Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)
9.	Account to be operated through Power of Attorney (PoA) ☐ Yes ☐ No
10.	Account to be operated through Demat Debit and Pledge Instruction (DDPI) ☐ Yes ☐ No if Yes, client is required to Sign & Execute DDPI Form
11.	For Joint Accounts communications to be sent to (See Note 8) ☐ First Holder ☐ All Joint Account Holders
12.	In case of non-individual, Name, Designation, PAN, UID, Signature, Residential Address and Photograph of persons authorised to deal in securities on behalf of company / firm / others (attach annexure if required) :
13.	Any other information
14.	easi — To register for **easi**, please visit our website www.cdslindia.com Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.

M. G.S.T. Registration Details:

	State	GST Registration Number
1.		

N. SALES TAX REGISTRATION DETAILS (As applicable, State wise)

Local Sales Tax State Registration No — Validity Date D D M M Y Y Y Y
Name of the State
Central Sales Tax Registration No — Validity Date D D M M Y Y Y Y
Other Sales Tax State Registration No — Validity Date D D M M Y Y Y Y
Name of the State

O. VAT DETAILS (As Applicable, State wise)

Local VAT Registration No — Validity Date D D M M Y Y Y Y
Name of the State
Other VAT Registration No — Validity Date D D M M Y Y Y Y
Name of the State

P. GUARDIAN DETAILS *(where sole holder is a minor), applicable for Depository Account only :*

[For account of a minor, two KYC Application Forms must be filled i.e. one for the guardian and another for the minor (to be signed by guardian)]

Guardian Name
PAN — Relationship of guardian with minor

Q. CLEARING MEMBER DETAILS (to be filled up by Clearing Members only)

1. Name of Stock Exchange
2. Name of Clearing Corporation/ Clearing House
3. Clearing Member ID
4. SEBI Registration Number
5. Trade Name
6. CM-BP-ID (to be filled up by Participant)
7. Trading member ID

R. DEALINGS THROUGH OTHER STOCK BROKERS

If client is dealing through other stock broker, provide the following details:

Name of Stock Broker

SEBI Registration Number

Registered Office Address

City / Town / Village | PIN Code

State | Country

Phone | Fax

Website

Whether dealing with any other stock broker
(if case dealing with multiple stock brokers provide details of all)

Name of stock broker

Client Code (UCC) | Exchange Name & ID

Details of disputes / dues pending from / to such stock broker

S. IN CASE OF NRIs / FOREIGN NATIONALS / FIIs / OTHERS (As may be applicable)

RBI Approval Reference Number | RBI Approval Date D D M M Y Y Y Y

SEBI Registration Number (for FIIs)

SEBI Registration No. (If Applicable) | SEBI Registration Date D D M M Y Y Y Y

RBI Registration No. (If Applicable) | RBI Registration Date D D M M Y Y Y Y

T. INTRODUCER DETAILS (Optional)

Name of the Introducer

Status of the Introducer ☐ Remisier ☐ Authorised Person ☐ Existing Client

☐ Others (please specify)

Address of the Introducer

City / Town / Village | PIN Code

State | Country

Phone No. of Introducer | Signature of the Introducer

U. NOMINATION FORM FOR TRADING AND DEMAT ACCOUNTS *(To be filled in by individual applying singly or jointly)*

Nomination Registration No. : | Date : D D M M Y Y Y Y

UCC | DP ID | Client ID

NOMINATION OPTIONS

☐ I/We wish to make a nomination.
[Details are provided in Nomination Form Prescribed by SEBI]

☐ I/We wish to opt out of a nomination.
[Declaration Form opting out of nomination as Prescribed by SEBI]

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my/our account in the event of my/our death.

	Nomination can be made upto three nominees in the account.	Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1	Name of the nominee(s) (Mr. / Mrs.)			

2	Share of each Nominee Equally ☐ [If not equally, please specify percentage]	%	%	%
		Any odd lot after division shall be transferred to the first nominee mentioned in the form.		
3	Relationship With the Applicant (If any)			
4	Address of Nominee(s)			
	City/Place			
	State			
	Pin Code			
	Country			
5	Mobile/Telephone No. of Nominee(s)#			
6	Email ID of Nominee(s)#			
7	Nominee Identification details#: [Please tick any one of following and provide details of same] ☐ Photograph & Signature	Photograph of 1st nominee Signature of Nominee across photograph	Photograph of 2nd nominee Signature of Nominee across photograph	Photograph of 3rd nominee Signature of Nominee across photograph
	Signature			
	☐ PAN			
	☐ Aadhaar	xxxxxxxxxxxx	xxxxxxxxxxxx	xxxxxxxxxxxx
	☐ Proof of Identity			
	☐ Demat Account ID			
	☐ Saving Bank Account No.			

Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:				
8	Date of Birth {in case of minor nominee(s)}	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
9	Name of Guardian (Mr. / Mrs.) {in case of minor nominee(s)}			
10	Address of Guardian(s)			
	City/Place			
	State			
	Pin Code			
	Country			
11	Mobile/Telephone No. of Guardian#			
12	Email ID of Guardian#			
13	Relationship of Guardian with Nominee			
14	Guardian Identification details# : [Please tick any one of following and provide details of same] ☐ Photograph & Signature	Photograph of Guardian Signature of Guardian across photograph	Photograph of Guardian Signature of Guardian across photograph	Photograph of Guardian Signature of Guardian across photograph
	Signature			
	☐ PAN			
	☐ Aadhaar	x x x x x x x x	x x x x x x x x	x x x x x x x x
	☐ Proof of Identity			
	☐ Demat Account ID			
	☐ Saving Bank Account No.			

Signature of Witness for Nomination*		
Name of the Witness	Address	Signature of Witness

*Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature.
Optional Fields (Information required at Serial nos. 5,6,7,11,12 & 14 is not mandatory).
Note: Residual securities: in case of multiple nominees, remaining after distribution of securities as per percentage of allocation shall be transferred to the first nominee.

V DECLARATION FORM FOR OPTING OUT OF NOMINATION - TRADING AND DEMAT ACCOUNTS

Date D D M M Y Y Y Y

UCC | DP ID | Client ID

Sole/First Holder Name

Second Holder Name

Third Holer Name

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

Detail of Witness*

Name of the Witness	Address	Signature of Witness

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

W MODE OF OPERATIONS FOR JOINT ACCOUNTS

☐ Jointly ☐ Anyone of the holder or survivor(s)

If Mode of Operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations 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

DECLARATION

1. I/We understand that the Stock / Commodity Broker is relying on this information for the purpose of determining the status of the applicants named above in compliance with FATCA/CRS. The Stock Broker is not able to offer any tax advice on FATCA or CRS or its impact on the applicants and I/We shall seek advice from professional tax advisor for any tax questions. Further, I/We agree to submit a new form within 30 days if any information or certification on this form gets changed. I /We agree, as may be required by Regulatory authorities, Stock Broker shall be required to comply to report, reportable details to regulators / tax authorities / or close or suspend my/our account(s).
2. I / We hereby declare that the details furnished above are true, correct and complete 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.
3. I / We confirm having read / been explained and understood the contents of the document on policy and procedures, all voluntary / non-mandatory documents of the stock / commodity broker and the tariff sheet.
4. I / We further confirm having read and understood the contents of the 'Right and Obligations' document(s) and 'Risk Disclosure Document'. I / we do hereby agree to be bound by such provisions as outlined in these documents. I / We have also been informed that the standard set of documents has been displayed for Information on stock/commodity broker's designated website: www.religareonline.com.
5. The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me / us and I / we have understood the same and I / we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. In case non-resident account, I / we also declare that I / we have complied and will continue to comply with FEMA regulations. I / we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".
6. I/We have received and read the document of 'Rights and Obligation of BO-DP' (DP-CM agreement for BSE Clearing Member Accounts) including the schedules thereto and the terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

Name(s) of holder(s) / Authorised Signatory(ies) / KARTA in case HUF	Signature(s) of Holder(s)/Signatory(ies)
Sole / First Holder / Signatory / KARTA / Guardian (in case sole holder is minor) (Mr. / Ms.)	5
Second Holder / Signatory (Mr. / Ms.)	2
Third Holder / Signatory (Mr. / Ms.)	2

Authorised Signatories (Enclose a Board Resolution for Authorised Signatories)

Mode of Operation for Sole / First Holder (In case of joint holdings, all the holders must sign)

- ☐ Any one singly
- ☐ Jointly by
- ☐ As per resolution
- ☐ Others (please specify)

Notes

1. All communication shall be sent at the address of the Sole / First holder only.
2. In case of additional signatures, separate annexures should be attached to the application form.
3. Thumb impressions must be attested by witness or a Magistrate or a Notary Public or a Special Executive Magistrate.
4. Signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
5. The nomination and Declaration form may be signed using e-Sign facility or wet signature and in these cases, witness will not be required.
6. For receiving Statement of Account in electronic form in NSDL:
   I. Client must ensure the confidentiality of the password of the email account.
   II. Client must promptly inform the Participant if the email address has changed.
   III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
7. In case of joint account, on death of any of the joint account holders, the surviving account holder(s) has to inform Participant about the death of account holder(s) with required documents within one year of the date of demise.
8. In case if 'first holder' is selected, the communication will be sent as per the preference mentioned at Sr. No. L1. In case 'All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned at Sr. No. L1 and communication to other holders will be in electronic mode. The default option will be communication to 'first holder', if no option selected.
9. Signatures should be preferably in black ink.
10. Details of the Names, Address, Telephone Number(s), etc., of the Magistrate / Notary Public / Special Executive Magistrate / Special Executive Officer are to be provided in case of attestation done by them.
11. In case of applications containing a Power of Attorney, the relevant Power of Attorney or the self-certified copy thereof, must be lodged along with the application.
12. Strike off whichever is not applicable.
13. In case applicant wish to apply for BSDA services, he/she shall submit additional request form as prescribed by regulatory authority from time to time, available on our website: www.religareonline.com

FOR OFFICE USE ONLY			
UCC Code allotted to the Client			
	Documents verified with Originals	**Client Interviewed By**	**In-Person Verification done by**
Name of the Employee / AP			
Employee Code			
Designation of the Employee / AP			
Date	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
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 'Right and Obligations' document(s), RDD and Guidance Note. I / We have given / sent him a copy of all the KYC documents. I / We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I / We also undertake that any change in the 'Right and Obligations' and RDD would be made available on my / our website: www.religareonline.com, for the information of the clients.

Seal/Stamp of the stock broker

Signature of the Authorised Signatory

*AP: Authorised Person

Date D D M M Y Y Y Y

COMTRACK ACCOUNT DETAILS OF THE CLIENT

Religare Broking Limited
A-3/4/5, Club 125 (Tower-A), Sector-125,
Noida-201301 (U.P.)

To be filled and submitted by clients holding COMTRACK account to the Member by clients.

1. **Name of Client**
2. **Client Address**
   City/Town/Village — PIN Code
   State — Country
3. **PAN No.**
4. **Bank Details:**
   Bank Name
   Branch Address
   City/Town/Village — PIN Code
   State — Country
   Bank Account No.
   Bank Account Type ☐ Savings ☐ Current ☐ Others
   MICR Number — IFSC Code
5. **Name of Trading Member**
6. **Trading Member ID**
7. **COMTRACK Details of Client :**

Sr. No	COMTRACK Participant Name	COMTRACK Participant ID	COMTRACK Account No. of Beneficiary
1.			
2.			
3.			
4.			

DECLARATION

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

Place **Date** D D M M Y Y Y Y

Signature of Client

NOTE

1. Please provide a certified copy of COMTRACK master or a recent COMTRACK holding statement issued by a COMTRACK Participant bearing name of Client.
2. In case the client has multiple COMTRACK account, Please provide proof and details of the same.
3. In case of PAN provide certified copy of PAN.
4. In case of Bank account provide copy of cancelled cheque as proof for all the bank account details provided.

SCHEDULE – A: SCHEDULE OF CHARGES FOR DEPOSITORY SERVICES (w.e.f. 01-06-2023)

ACCOUNT TYPE	REGULAR DEMAT ACCOUNT			BASIC SERVICE DEMAT ACCOUNT
	☐ NORMAL	☐ BANDHAN	☐ BIMA	☐ BSDA
Account Opening Charges	**NIL**	**NIL**	**NIL**	**NIL**
Account Maintenance Charges (Choose any one Scheme)	₹400. p.a. (Payable upfront on a monthly basis)	NIL AMC on providing Refundable Interest free Security Deposit of ₹2500/-	NIL AMC with Non-Refundable one time subscription fee of ₹1111/- (Exclusive of Taxes)	Holding Value for Debt Securities upto ₹1 Lac & for other than Debt securities ₹50000 – NIL AMC
				Holding Value between ₹1,00,001 to ₹2 Lacs for Debt Securities & ₹50001 to ₹2 Lacs for other than Debt securities - ₹100/- p.a AMC
	In case of corporate account, AMC (as per scheme selected above) plus applicable statutory charges (currently ₹500/- AMC as charged by NSDL/CDSL) would be additionally levied.			*Holding Value of Debt securities or other than Debt securities exceeds ₹2 Lacs at any date, shall be charged as per Normal Scheme of Regular Demat Account.
TRANSACTION CHARGES				
• Credit	NIL			NIL
• Debit - Delivery Given to Religare Broking Pool Account - Delivery Given to any other Account	₹12/- for Client with POA / DDPI, ₹ 25/- for Client without POA/DDPI ₹30/- per debit or 0.02% of the value of transaction whichever is higher.			₹30/- or 0.05% of value of transaction whichever is higher
Dematerialization - Demat Processing Charges	₹5/- per certificate			₹10/- per certificate
Demat/Remat Rejection Charges	₹30/- per rejection			₹50/- per rejection
Conversion of Mutual Fund units represented by SOA into Demat	₹20/- per request			₹30/- per request
Rematerialisation / Repurchase / Redemption of Mutual Fund / Reconversion of Mutual Fund units into SOA Charges	₹20/- per request + NSDL/CDSL Charges (NSDL/CDSL Remat Charge @ ₹10/- per hundred shares or part thereof or a flat fees of ₹10 per certificate whichever is higher (Maximum upto ₹5 Lac)			₹ 30/- per request + NSDL/CDSL Charges (NSDL/CDSL Remat Charge @ ₹ 10/- per hundred shares or part thereof or a flat fees of ₹10 per certificate whichever is higher (Maximum upto ₹5 Lac)
Margin Pledge: Client with POA / DDPI to Religare Broking Limited	1. Margin Pledge Creation - ₹10/- Per Transaction 2. Margin Pledge Release (Religare Broking Limited Initiated) - ₹10/- Per Transaction. 3. Margin Pledge Release (Client-Initiated) - ₹20/- Per Transaction.			
Margin Pledge: Client without POA / DDPI to Religare Broking Limited	1. Margin Pledge Creation - ₹15/- Per Transaction. 2. Margin Pledge Release (Religare Broking Limited Initiated) - ₹15/- Per Transaction. 3. Margin Pledge Release (Client-Initiated) - ₹30/- Per Transaction.			
Pledge creation/closure/invocation in favour of Religare CUSPA account (per transaction)	₹20/- per transaction			₹100/- or 0.04% of value of transaction whichever is higher
Pledge creation/closure/invocation in favour of Religare MTF account (per transaction)	₹50/- per transaction			₹100/- or 0.04% of value of transaction whichever is higher
Normal Pledge / Hypothecation (per transaction) Creation/closure / Confirmation / Invocation	₹50/- per request or 0.02% of the value of transaction whichever is higher			₹100/- or 0.04% of value of transaction whichever is higher
Pledge/Margin Pledge Booklet Issuance/re-issuance	₹5/- per leaf			
Freeze / Unfreeze Instruction	₹50/- per request			
Delivery Instruction Booklet (Re-issuance)	₹3/- per leaf			₹5/- per leaf
Courier Charges for Demat / Remat / Repurchase / Redemption Conversion of Mutual Fund units represented by SOA / Reconversion of Mutual Fund units into SOA / Re-issuance of DIS / Pledge Booklet / Margin Pledge Booklet / Rejection Notification / Re-issuance of Statement of Transaction and Holding.	₹50/- per request or as per actuals whichever is higher			₹50/- per request or as per actuals whichever is higher

TERMS & CONDITIONS :

- Clients are required to maintain ₹500/- as security amount towards depository charges, except for clients under BIMA / BANDHAN scheme.
- Changes in Client Master Details, ₹50/- per modification request shall be charged.
- An amount of ₹100/- shall be charged if DIS reissuance request is received on plain paper and DIS booklet is reported lost.
- All charges are payable on a monthly basis and any additional charges / taxes / statutory levies, charged by statutory authority and/or NSDL/CDSL as and when applicable will be levied. Delayed payment will be liable for interest @18% per annum, charged on monthly basis for NSDL/CDSL.
- Depository charges of Broking Client will be debited to their trading account.
- Any other service, which is not mentioned above, will be charged separately as per the rates applicable from time to time. Out of pocket expenses including courier charges for consignment will be charged extra.
- The value of transactions will be in accordance with rates provided by NSDL/CDSL.
- I/We have read and understood the SEBI's guidelines for facility for a BSDA and hereby declare that I/we am/are eligible to open a depository account as a BSDA holder and undertake to comply with the requirements specified by SEBI or any such authority for such facility from time to time.

  In case of auto conversion of account category from Normal Scheme to BSDA and vice a versa, the applicable scheme shall be levied. The client category will be converted on the basis of BSDA eligible file(s) received from NSDL/CDSL and the holding valuation in the client's DP account.

Any other specific charges structure : Religare _____ Date D D M M Y Y Y Y

Sole / First Holder Signature	Second Holder Signature	Third Holder Signature

Note : NSDL & CDSL

1. **It is hereby informed that with the issuance of CAS from Depositories, RBL have discontinued dispatching mandatory annual physical statement.**
2. **Further, it should also be noted that the dispatch of annual CAS statements shall be discontinued if the account continuous to remain zero balance even after one year and /or if no Annual Maintenance Charges (AMC) is received by the DP.**

TARIFF SHEET

PRODUCT PLAN* / BROKERAGE	
Religare	(*Scheme details as per executed addendum)

CASH SEGMENT Brokerage	in% (subject to max. of 2.5%)	Minimum Paise (subject to max. 25 paise)	Tick (✔) any one
Delivery Based			☐ One Side ☐ Both Side
Daily Square up			☐ One Side ☐ Both Side

Minimum brokerage charge for trading in illiquid / high risk scrips in cash segment will be .50% on delivery and .05% on intraday turnover with minimum 5 paisa (Scrip list available under client login).

DERIVATIVE SEGMENT Brokerage	in% (subject to max. 2.5% / ₹100/- Per Lot)	Minimum Paise/ Per Lot	Tick (✔) any one
Future			☐ One Side ☐ Both Side
Option			☐ One Side ☐ Both Side

CURRENCY DERIVATIVES & INTEREST RATE FUTURES SEGMENT		
Brokerage	Brokerage per lot (in ₹)	Tick (✔) any one
Future		☐ One Side ☐ Both Side
Option		☐ One Side ☐ Both Side

COMMODITIES DERIVATIVES SEGMENT:			
Exchange and Segment	Brokerage Slab in %	Minimum Paise/ Per Lot	☐ One Side ☐ Both Side
BSE / MCX / NCDEX - Future			
Exchange and Segment	in % (subject to max. 2.5% of premium amount or Rs.250/- per lot, whichever is higher)	Minimum Paise/ Per Lot	☐ One Side ☐ Both Side
MCX-Option			
Exchange and Segment	in % (subject to max. 2.5% of premium amount or Rs.100/- per lot, whichever is higher)	Minimum Paise/ Per Lot	☐ One Side ☐ Both Side
BSE / NCDEX-Option			

OTHER CHARGES		
Nature of Charge		Applicable Charge
a)	Annual Subscription Fee for EXE Based Diet Users	₹999/- per annum.
b)	Inter Settlement Charges	₹15/- + applicable taxes per transaction
c)	Administrative Charges - Offline : on per offline executed order	₹10/- (Maximum ₹50/- per day /per segment)
d)	Delayed Payment Charges – On overdue balance towards trading or margin (Standard rate per annum)	upto 29.50%
e)	Account Processing Charges	₹500/-
f)	Document Handling Charges (i) Customer opted for receiving documents by **Electronic Mode** : In case such customer intends to receive additional / duplicate copies of documents (contract notes, statements etc.) by Physical mode or physical documents are sent due to email getting bounced. (ii) Customer opted for receiving documents by **Physical Mode**: In case such customer intends to receive additional / duplicate copies of documents (contract notes, statements etc.) by Physical mode.	₹25/- + applicable taxes per contract note/other documents.

In addition to brokerage additional charges including statutory levies i.e. stamp duty, exchange transaction charges, SEBI fees, Goods and Service Tax (GST), CTT, Clearing Charges, STT, other taxes and levies, investor protection fund fees etc. charged by the statutory authorities/ Exchange(s), delayed payment charges, cheque bounce charges, auction settlement charges as may be applicable will be levied. For details please login on our website www.religareonline.com

I/We understand that economic conditions change over time and therefore agree that RBL is authorised to change the tariff in future.

Date D D M M Y Y Y Y

Client Signature

Religare Broking Limited

A-3/4/5, Club 125 (Tower-A), Sector-125, Noida-201301 (U.P.)

I / We have been / shall be dealing through you as my / our broker on the Capital Market and / or Futures & Options Segments / Currency Derivative Segments/Commodity Derivative Segments. As my / our broker i.e. agent I / we direct and authorise you to carry out trading / dealings on my / our behalf as per instructions / authorisations given below.

1. **REQUEST FOR TRADE ALERTS THROUGH SMS AND / OR Email**: In agreement and pursuance to directions and conditions specified by SEBI vide circular no. CIR/MIRSD/15/2011 dated August 2, 2011 and circulars/ clarifications issued by SEBI / exchanges from time to time in this regard.

1.1 I/We hereby confirm that I / we wish to receive the trade alerts through (tick whichever is applicable):

a) SMS alerts ☐ b) Email alerts ☐

1.2 The alerts should be sent:

I. On my registered Mobile Number / Email Id as per your records, or

II. You are requested to update the Mobile Number / Email Id mentioned below in your records and for the purpose of trade alerts:

a) Mobile No. | | | | | | | | | | |

b) Email Address | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

I/We am/are aware that the recipient of SMS/Email alerts on the above Mobile Number and / or Email address can be stopped only on my/our written request.

2. **AUTHORIZATION FOR SHARING PERSONAL INFORMATION:** I/We understand that RBL has outsourced/may outsource certain activities including but not limited to activities relating to KYC, Information Technology functions, technical support functions or any other functions as may be decided by RBL to one or more third parties including group / related entities. I/We would further like to mention that I/We want to make investments in mutual funds, initial public offerings/follow on public offerings, rights issue, fixed deposit(s), money market instruments and other products / services etc. and generally to invest in various avenues/products and to redeem/liquidate any investments and want RBL to give effect to my/our desires/ requirements. In view of the above I/We authorise RBL to share my/our personal and other information with one or more third parties including group/related entities for any one or more of the above said purpose. I/We agree that any offers/information received shall not be contested on grounds of address/phone included in national do not call registry or any other such restrictive regulations/ laws.

3. **AUTHORITY TO PLEDGE THE SHARES / SECURITIES:** I/We am/are aware that securities can be deposited by me/us to you as collateral ("Said Securities") towards my/our margin requirement. I/We am/are further aware that Said Securities can be further deposited by you with Exchanges/ Clearing Members/ Clearing Corporations of Equity and Commodity Exchanges provided authorization from client has been obtained by the Member. Accordingly, I/We hereby authorise you to deposit the Said Securities as collateral with Exchanges/ Clearing Members/ Clearing Corporations of Equity and Commodity Exchanges and mark the pledge in favour of the Exchanges/ Clearing Members/ Clearing Corporations of Equity and Commodity Exchanges. In this regard, I/We confirm/ declare as under:

(i) the Said Securities are in existence, owned by me/us and are and shall be free from any charge, lien or encumbrance, whether prior or otherwise.

(ii) that the Said Securities will be subject to the creation of pledge in favour of or for the benefit of Exchange/ Clearing Member/ Clearing Corporation and further that the Securities over which pledge may be created in future would be in existence and owned by me/us at the time of creation of such pledge and that the Said Securities to be given in future as security to Exchange/ Clearing Member/ Clearing Corporation would likewise be unencumbered, absolute and disposable property of the client.

(iii) that Religare Broking Limited is authorized to do all such acts and things, sign such documents and pay and incur any such costs, debts and expenses as may be necessary under this Deed of Pledge and the same shall be subject to terms and conditions as contained herein.

(iv) that the Said Securities shall be subject to the first priority and lien in favour of Exchange/ Clearing Member/ Clearing

Continued on next page.....

Corporation to secure, the client's obligations and that the rights or interests of the client with respect to the Said Securities shall be subject and subordinate to the rights, claims and interests of Exchange/ Clearing Member/ Clearing Corporation in respect of the Said Securities.

(v) that Exchange/ Clearing Member/ Clearing Corporation may invoke the pledge without any reference to or permission of the client and upon receipt of the Said Securities, Exchange/ Clearing Member/ Clearing Corporation may utilize the proceeds in meeting the my/our obligations in such manner as it may deem fit and that such invocation of pledge will be final and irrevocable against the Clearing Member and me/us.

(vi) I/We shall not make any claims or demands for refund or any reimbursement in relation to the Said Securities.

(vii) I/we hereby confirm that I/we have read the terms and conditions to this effect and fully aware of the consequences of the same.

4. **VERBAL ORDER ACCEPTANCE AUTHORISATION:** I/We agree and acknowledge that in order to avoid any disputes it is recommended by you that I/we should give instructions for order placement/modification and cancellation in writing in the format given along with Policies and Procedure Document, and take signatures of two authorised officers of the branch where orders are tendered along with company stamp on the carbon/photocopy of the instructions in acknowledgment of receipt of my/our instructions. However it is my/our view that the fluctuations in market are so rapid that it is not practical to give written instructions for order placement / modification and cancellation. I/We therefore authorise you to accept my (our) / my (our) authorised representative's verbal instructions for order placement/modification and cancellation in person or over phone (fixed line or mobile phone) and execute the same. I/We understand the risk associated with verbal orders and accept the same, and agree that I/We shall not be entitled to disown orders and consequent trades (if any) by shifting the burden of proof by asking you to prove the placement of orders through telephone recording etc.

5. **RUNNING ACCOUNT AUTHORISAION:** In order to avoid time consuming repeated pay-in by me/us and pay-out by you of funds, I/we hereby direct and authorise you to maintain running account(s) and debit/credit funds from/to the running accounts and make pay-in/receive funds to/from exchanges/clearing corporations/other receiving parties (if applicable). Further, subject to your discretion, please treat my/our funds lying to my/our credit in running accounts as margin/collateral for my/our dealings/trading. In the event I/we have outstanding obligations on the settlement date, you may retain the requisite funds towards such obligations along with funds required to meet margin obligations in all the segments across exchanges as permissible within in regulatory provisions. In case, I/we have traded during my/our chosen settlement period, you may retain upto the maximum amount as permissible within in regulatory provisions duly netting off across all stock/commodities exchanges and their segments. Authorisation is subject to changes as prescribed by the exchange(s)/SEBI from time to time. While settling the account, please send a 'statement of accounts' containing an extract from ledger for funds and an extract from the register of securities displaying all receipts/deliveries of funds/securities/commodities. In the statement(s) being sent, please provide details regarding retention of funds and pledge of securities/commodities, if any. I/We shall bring any discrepancy in the statement(s) preferably within 7 working days from the date of receipt to your notice so as to allow you to take remedial steps, if any are warranted. Please do not carry out above stated settlement of running account in the event I/We avail margin trading facility. Further, do not carry out settlement of running account referred to above for funds given by me/us towards collaterals/margin in the form of bank guarantee (BG)/Fixed Deposit receipts (FDR).

I/We am/are entitled to revoke this Authorisation at any time. My/Our preference for actual settlement of funds is at least:

☐ Once in a Calendar Quarter ☐ Once in a Calendar Month

6. **FORMAT FOR CLIENT OPTING ONLINE TRADING FACILITY :**

I/We wish to avail the following facility being offered by you:

Product / Facility (Please tick the appropriate)		
☐ Browser based	☐ EXE based (Annual Subscription Fees ₹ 999)	☐ Wireless Trading

1. I/We also hereby authorize you to debit the annual subscription fees as applicable to my/our trading account for availing opted facility. The Subscription fee is non-refundable.

Continued on next page.....

2. I/We hereby authorize you to debit the yearly subscription fees as applicable for Exe based services opted by me/us on annual basis. In case I/We wish to withdraw the said facility, I/We will submit the related request in writing.
3. I/We fully aware and agree to the provisions specifying possible risks, responsibilities, obligations and liabilities associated with internet based trading in terms of clauses defined under section "Internet & Wireless Technology based trading facility provided by Members to Client" of the document "Right and Obligations of Members, Authorized Persons and Client" of account opening form.

7. **PRODUCT ADDENDUM :** I/We desire to avail the below mentioned facility for trading in segments opted by me/us:
   1. **TradeSmart Order:** TradeSmart order is an intraday product having an order placement feature wherein a client can limit the loss on every position by necessarily placing a cover order specifying the SLTP and a limit price along with Profit order to book profit.
   2. **Intraday / High Multiplier Facility:** In Intraday/High Multiplier Facility, the Client will be allowed leverage for intra-day trading on available margin/security/collateral. The leverage available shall be liable to change as per company's risk management policy.
   3. **Purchase Today Sell Tomorrow (PTST):** In PTST Facility, client can put buy orders and sell trade on next trading day. If Client does not execute square off "sell trades" against previous trading day's trades done under "PTST" facility prior to Designated Time on T+1 day, then in that event for such trades/open positions of Client trading system will take over control at Designated Time & put square off order.

DECLARATION

I/We hereby declare that the decision to register/enroll under above mentioned products and for making all trades thereby is/ shall be entirely mine/ours decision and I/we have neither been given nor have been in any way influenced by you/your officers with any financial or other advice regarding the suitability or profitability of availing the Facilities as stated above or making any trades thereby. I/We may suffer losses on account of square off/non-square off by the Company with in or at end of the day and I agree to bear such losses without protest or claim against the Company. I/We further acknowledge that not only for above Facility(s) but for any other facility or general trading also, in no case any employee/officer/director or agent of the Company is authorized to give any advice, assurance or handle my/our account in any discretionary manner. I/we agree that in the event I/we were to seek any advise, assurance or allow handling my/our account in any discretionary manner by any employee/officer or agent of the Company, the same shall be mine/our personal arrangement and Company shall be in no way liable for losses etc. which I/we were to suffer as a consequence of such arrangements.

I/we have read and accepted all terms and conditions specified hereinabove and given in document titled "Product Terms & condition" under/as client copy and agree to be bound by all of them.

Client Signature 8 ☞ Date D D M M Y Y Y Y

Client Name

Client Code

OPTION FOR ISSUE OF DELIVERY INSTRUCTION BOOKLET (DIS BOOKLET)

To,

Date D D M M Y Y Y Y

Religare Broking Ltd.

A-3/4/5, Club 125, (Tower-A),Sector-125,
Noida-201301 (U.P.)

Dear Sir / Madam,

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

☐ **OPTION 1:**

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening of my / our NSDL/CDSL account though I / we have issued a Demat Debit and Pledge Instruction (DDPI) / registered for eDIS / executed PMS agreement in favour of / with Religare Broking Limited (name of the DDPI Authority Holder / Clearing Member / PMS manager) for executing delivery instructions for settling stock exchange trades [settlement related transactions] effected through such DDPI Authority Holder-Clearing Member / by PMS manager/ for executing delivery instructions through eDIS.

OR

☐ **OPTION 2:**

I / We do not require the Delivery Instruction Slip (DIS) booklet for the time being, since I / We have issued a Demat Debit and Pledge Instruction (DDPI)/registered for eDIS / executed PMS agreement in favour of / with Religare Broking Limited (name of the DDPI Authority Holder / Clearing Member / PMS manager) for executing delivery instructions for settling stock exchange trades [settlement related transactions] effected through such DDPI Authority Holder - Clearing Member / by PMS manager or for executing delivery instructions through eDIS. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

Yours faithfully

	First/Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures	9 Sole / First Holder Signature	4 Second Holder Signature	4 Third Holder Signature

ACCOUNT HANDLING MANDATE

☐ I/We wish to operate account at my/our own.
(Strike off the authorization details below)

Client Signature ⑩☞

OR

☐ I/We wish to appoint an authorized person besides dealing myself.
(In case this option is selected then kindly give requisite details in below letter)

LETTER OF AUTHORITY

Religare Broking Limited
A-3/4/5, Club 125 (Tower-A), Sector-125, Noida-201301 (U.P.)

Sir,

I / We have been / shall be dealing through you as my / our broker i.e. agent.

I / We hereby appoint Mr. / Ms. / Mrs _____

with residence and other particulars as given below as my / our authorised representative to deal / transact on my behalf and to place orders, give instructions, receive / collect and / or sign contract notes, bills, account statements, settlements, order and / or trade confirmations (whether written or oral / over phone) and any other documents or communication and generally to do any and all act(s) on my / our behalf which I / we can do and I / we undersigned do hereby agree and declare and confirm that all the acts and things done by him/her shall be my / our acts, deeds and things validly done by me / us to all intents and purposes.

Please treat this authorization as written ratification of my verbal directions / authorizations if any given and carried out by you earlier. I agree to indemnify you and keep you indemnified against all losses, damages and actions which you may suffer or face as a consequence of adhering to and carrying out my directions given above.

Please take the above information on record & oblige.

Thanking you

Details of Authorised Representative

Name _____

Address _____

_____

City / Town / Village _____ PIN Code _____

State _____ Country _____

Telephone No. _____ with STD Code Mobile No. _____

PAN _____

Relationship of Authorised Representative with the client _____

Signature of Authorised Representative ⊗ _____

- Enclosed self-attested copy of identity proof of the Authorised Representative.
- An employee or authorised person of Religare Broking Limited cannot be appointed as an authorised representative.

Client Signature ●☞ _____ Date D D M M Y Y Y Y

Client Name _____

Client Code _____

DETAILS OF RELATED PERSON

Application Type ☐ New ☐ Update ☐ Delete

CKYC Number | | | | | | | | | | | PAN of the Applicant | | | | | | | | | | |

Name of Applicant | | | | | | | | | | |

- ☐ C - Driving Licence
- ☐ D - NREGA Job Card
- ☐ E - National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar
- 2. ☐ E-KYC Authentication
- 3. ☐ Offline verification of Aadhaar
- 4. ☐ Deemed Proof of Address
- 5. ☐ Self Declaration

Address

Line 1

Line 2

Line 3 City/Town/Village

District State

PIN/Post Code Country

4. CONTACT DETAILS

Tel. (Off) Tel. (Resi)

Mobile Email ID

5. REMARKS (If any)

6. DECLARATION

- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.
- 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 D D M M Y Y Y Y

Place

Name & Signature of the Authorised Signatory(ies)

ATTESTATION / FOR OFFICE USE ONLY

In person Verification (IPV) Details / KYC Verification Carried out by :

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of Authorised Person _____

Name of the Organization: **Religare Broking Ltd.** Emp. Branch _____

Date of IPV: D D / M M / Y Y Y Y

Signature of the person who has done the IPV

Method of receipt of Document: .....

☐ Original Verified, Self Attested Documents & Certified copies received **Date** D D M M Y Y Y Y

Seal/Stamp of the Intermediary

Signature of the Authorised Signatory

SELF DECLARATION - CATEGORIZATION OF THE CLIENTS FOR EACH COMMODITY

Religare Broking Limited
A-3/4/5, Club 125 (Tower-A), Sector-125, Noida-201301 (U.P.)

Subject: Categorization of the clients for each commodity

I/We have been/shall be dealing through you as my/ our member broker on different Commodity Exchanges. I/We hereby declare my/ our category for the commodities mentioned therein, as given below in accordance with SEBI circular no. SEBI/HO/CDMRD/DNPMP/CIR/P/2019/08 dated January 04, 2019:

		CATEGORIES					
Sr. N.	Name of Commodities	Farmer / FPO	Value chain participant (VCP)	Domestic financial institutional investor	Foreign participant	Proprietary trader	Others
1	BARLEY						
2	CHANA						
3	MAIZE						
4	WHEAT						
5	MOONG						
6	PADDY (BASMATI)						
7	KAPAS / COTTON						
8	BLACK PEPPER						
9	CARDAMOM						
10	CASTOR SEED						
11	GAUR SEED 10 MT						
12	GAUR GUM						
13	SOY BEAN						
14	MUSTARD SEED						
15	CRUDE PALM OIL						
16	MENTHA OIL						
17	RBD PALMOLEIN						
18	REFINED SOY OIL						
19	COTTON SEED OILCAKE						
20	SUGAR M						
21	TURMERIC						
22	JEERA						
23	CORIANDER						
24	CRUDE OIL						
25	NATURAL GAS						
26	ALUMINIUM						
27	BRASS						
28	COPPER						
29	LEAD						
30	NICKEL						
31	ZINC						
32	GOLD						
33	SILVER						

I/We further declare that in case declaration is not provided for any of the particular exchange traded commodity, please consider the "Others" category for the same. I/We undertake that I/we shall inform the member broker in case there is any change in category for any of the exchange traded commodity.

Client Signature ☞ Date D D M M Y Y Y Y

Client Name

Client Code

Continued on next page

CATEGORIES

- Farmers/FPOs: It includes participants such as farmers, farmers' cooperatives, Famers Producers Organisations (FPOs) and such entities of like nature.
- Value chain participants (VCPs): It includes participants such as Processors, Commercial users as Dal and Flour Millers, Importers, Exporters, Physical Market Traders, Stockists, Cash & Carry participants, Produces, SMEs/MSMEs & Wholesalers etc., but exclude farmers/FPOs.
- Proprietary traders: It includes the members of stock exchanges trading in their proprietary account.
- Domestic financial institutional investors: It includes participants such as Mutual Funds (MFs), Portfolio Managers, Alternative Investment Funds (AIFs), Banks, Insurance Companies and Pension Funds etc., which are allowed to trade in commodity derivatives.
- Foreign participants: It includes participants such as Eligible Foreign Entities (EFEs), NRIs etc. which are allowed to trade in commodity derivatives markets.
- Others: All other participants which cannot be classified in the above categories.

FATCA / CRS DECLARATION FOR INDIVIDUALS

Trading Code		DP ID IN301774 | Demat ID	
		DP ID 12030200 | Demat ID	

Sr. No.	Details		1st Holder	2nd Holder	3rd Holder
1.	Address in the jurisdiction details where applicant is resident outside India for tax	Address			
		City / Town / Village			
		State, Pin Code and Country			
2.	Country of Birth	US			
		Other			
3.	Place of Birth	City / Town			
4.	Source of Wealth	Salary			
		Business			
		Gift			
		Ancestral Property			
		Rental Income			
		Prize Money			
		Others			

Please specify the details of all countries where you hold tax residency and its Tax identification Number & Type :

Sr. No.	Details	1st Holder	2nd Holder	3rd Holder
1.	Country of Residence for Tax Purpose (Other than India)#			
2.	Tax Identification No. (US TIN) or Equivalent (Other)			
3.	Identification Type			

To include all countries other than India, where investor is Citizen/Resident/Green Card Holder/ Tax Resident in those respective countries especially of USA.

Declaration & Acknowledgement:

1. I have understood the information requirement of this form (read with the FATCA-CRS Instructions below) and hereby confirm that the information provided above is true, correct and complete to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ am aware that I may liable for it. In case of any change in the above given status on a future date, I undertake to inform Religare Broking Limited the same within 30 Days.
2. I agree that if I/am a U.S. person or tax resident of a reportable foreign jurisdiction (other that U.S.) requiring reporting under FATCA/CRS or any other Law, my account details, as required under inter governmental agreement (IGA)/Multilateral competent authority agreement (MCAA) Signed by Indian government, Would be reported by Religare Broking Limited to the relevant Tax Authority.
3. If My Country of Birth is US, I/am providing a certificate of relinquishment of Citizenship (loss of Nationality) or a self certification for stating reason for not having such a certificate despite relinquishing US citizenship OR not obtaining US citizenship at birth.

I hereby authorize you to disclose, share, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same. Further, I authorize to share the given information to other SEBI Registered Intermediaries to facilitate single submission / updation & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your end.

Signature	Sole/First Holder	Second Holder	Third Holder

FATCA/ Common Reporting Standards (CRS)

1. Who is US person?

   In case of individuals, U.S. person means a citizen or Resident of the United States. Persons who would qualify as US person could be born in the United States, Born outside the united states of a US parents, Naturalized Citizens, Green Card Holders, Tax residents.

2. Who is a reportable person (non US) under common reporting standards (CRS)?

   Under common reporting standards (CRS), Reportable person means tax resident of a reportable foreign jurisdiction other than US and India.

3. Document to be collected if Customer's Country of birth is US but Declares that he/she is not a US person

   - Certificate of relinquishment of citizenship (loss of nationality certificate); or
   - Self certification for stating reason for not having such a certificate despite relinquishing US citizenship; Or
   - Self certification for stating reasons for not obtaining US citizenship at birth.

4. MF transactions will be permitted to clients/ joint holders in new folios after reviewing this declaration and existing KYC data and only if permitted by AMCs.

5. Towards compliance with tax information sharing laws, such as FATCA, 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 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 pay out any sums from your account or close or suspend your account(s).

   Also note that you may receive more than one request to provide this information, if you have multiple relationships with us or our group entities. Therefore it is important that you respond to our request, even if you believe that you have already provided this information earlier.

   Please note that above information is provided only for quick reference to customers. You are requested to refer Rule 114F, 114G and 114H of Income-tax Rules, 1962 consult a legal/tax advisor for any clarification.

DEMAT DEBIT AND PLEDGE INSTRUCTION

Beneficial Owner Account:

DP Name	BO Name	DP ID (NSDL)	BO Account No.	DP ID (CDSL)	BO Account No.
Religare Broking Limited		IN301774		12030200	

Details of accounts where securities can be Transferred/Pledged:

I. Pool (TM/CM) / Clearing Corporation / Client Securities Margin Pledge / Client Securities under Margin Funding Account:

Demat A/c Purpose	NSDL	CDSL	CM Name
NSE Pool A/c	IN558537	12030200 00000039 (Normal), 12030200 00031889 (SLBS), 11000011 00016472 (EPI)	Religare Broking Limited
BSE Pool A/c	IN630043	12030200 00000062 (Normal Pay-In), 12030200 00000081 (Normal Pay-Out)	
NSE MFSS A/c	IN565576	11000011 00017837	NSCCL
BSE STAR MF A/c	IN620031	11000010 00020972	BOISL/ICCL

Demat A/c Purpose	DP Name	Depository	DP ID	Beneficiary ID
Client Securities Margin Pledge Account	Religare Broking Limited	NSDL	IN301774	19955264
		CDSL	12030200	00096533
Client Securities Margin Pledge Account - MTF	Religare Broking Limited	NSDL	IN301774	19980827
Client Securities Under Margin Funding Account	Religare Broking Limited	NSDL	IN301774	19955272
		CDSL	12030200	00096548

The Client hereby authorises the broking division of Religare Broking Limited(i.e. Stock Broker/ Trading Member) to do the following acts:

S. No.	Purpose	Signature of Client *
1.	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker	Sole / First Holder Signature Second Holder Signature Third Holder Signature
2.	Pledging / re-pledging of securities in favour of trading member (TM) /clearing member (CM) for the purpose of meeting margin requirements of the client in connection with the trades executed by the clients on the Stock Exchange.	Sole / First Holder Signature Second Holder Signature Third Holder Signature
3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms	Sole / First Holder Signature Second Holder Signature Third Holder Signature
4.	Tendering shares in open offers through Stock Exchange platforms	Sole / First Holder Signature Second Holder Signature Third Holder Signature

Religare Broking Limited accepts the authority given by the Client at Delhi.

Authorized Signatory

(Signatory Name)

*the same may be signed physically against each purpose of DDPI. The same may also be eSigned.
In case of eSign, client shall be given an option for choosing the specific purpose(s) of DDPI

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To be used if Demat account opened with joint holders

KNOW YOUR CLIENT (KYC) / CENTRAL KYC REGISTRY APPLICATION FORM (For Individuals)

Religare Broking Limited
A-3 / 4 / 5, Club 125, (Tower-A)
Sector-125, Noida-201301 (U.P.)

Account Type: ☐ Normal ☐ Minor ☐ Aadhar OTP Based E-KYC
Application Type* ☐ New ☐ Update

CKYC Number _____
(Mandatory for KYC update request)

PHOTOGRAPH
Please affix your recent passport size photograph

2 Signature Across Photograph

Please fill this form in ENGLISH and in BLOCK LETTERS

A. PERSONAL IDENTITY DETAILS

1. Name of the Applicant _____
   Maiden Name (if any) _____
2. ☐ Father's / ☐ Spouse Name _____
3. Mother Name _____
4. a) Gender ☐ Male ☐ Female ☐ Transgender
   b) Marital Status ☐ Single ☐ Married c) Date of Birth D D M M Y Y Y Y
5. a) Nationality ☐ Indian ☐ Others Pls. specify.....
   b) Residential Status ☐ Resident Individual ☐ Non Resident ☐ Foreign National ☐ Person of Indian Origin
6. a) PAN _____ | b) Aadhaar Number, if any X X X X X X X X

B. ADDRESS & IDENTITY DETAILS

Address Type ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

1. Permanent Address _____
   (For Non-Resident Applicant Mandatory to specify overseas address) _____
   City / Town / Village _____ PIN Code _____
   State _____ Country _____
2. Specify the proof of Identity & Address submitted ☐ Aadhaar Card ☐ Any other (please specify).....
3. Contact Details
   Tel. (Off.) with STD Code _____ Tel. (Res.) with STD Code _____
   Fax No. with STD Code _____ Mobile No. _____
   Email ID _____
4. Current Address (If different from above) _____
   _____
   City / Town / Village _____ PIN Code _____
   State _____ Country _____
5. Specify the proof of address submitted for Current Address _____

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.
- I am aware of other modes of KYC which are available and I have chosen Aadhaar based method voluntarily. My Aadhaar record can be used by KRA Registration Agency/Central KYC Registry only for the specific purpose of validating/maintaining / sharing my KYC record and as an audit evidence. I will have an option to request for deletion of my Aadhaar record.
- I hereby consent to receiving information from KRA Registration Agency/Central KYC Registry through SMS/Email on the above registered number/email address.
- I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

3

Signature / Thumb Impression of Applicant

Date D D M M Y Y Y Y

ATTESTATION / FOR OFFICE USE ONLY

In person Verification (IPV) Details / KYC Verification Carried out by :

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of Authorised Person _____

Name of the Organization: **Religare Broking Ltd.** Emp. Branch _____

Date of IPV: D D / M M / Y Y Y Y

Signature of the person who has done the IPV

Method of receipt of Document: .....

☐ Original Verified, Self Attested Documents & Certified copies received **Date** D D M M Y Y Y Y

Seal/Stamp of the Intermediary

Signature of the Authorised Signatory

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Cover Back Inner

Equity | Commodity | Currency | Insurance | Investments

For more information,

1860-25-88888 **wecare@religareonline.com** **www.religareonline.com**

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Date : 01/08/2023 Version - 5.1

ACKNOWLEDGMENT

Form No. .....

Received the application from Mr./Ms..... as the Sole, First holder alongwith ..... and ..... as the Second and Third holders respectively for opening Trading / Demat account alongwith Nomination Form. Your account will be opened after due verification by us. You can check the status of the application submitted by you on our website (www.religareonline.com)

Your Client Id will be intimated to you once your account gets opened successfully. Please quote the DP ID & Client ID allotted to you (CM-BP-ID in case of Clearing Members) in all your future correspondence.

For **Religare Broking Limited**

Name of Relationship Manager | | | | | | | | | | | | | |

Mobile No. of Relationship Manager | + | 9 | 1 | | | | | | | | | | |

Stamp and Sign

You may contact us at our

Customer Care No. **1860 25 88888** or Email to us at **wecare@religareonline.com**

P.S.: Please take this acknowledgement receipt from the RM/Branch who has contacted you.

*Trading account can not be opened in joint names.

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Debit Mandate Form NACH / ECS / DIRECT DEBIT

UMRN _____ Date D D M M Y Y Y Y

Tick (✓)
- [x] CREATE
- [ ] MODIFY
- [ ] CANCEL

Sponsor Bank Code: ICIC0TREA00

Utility Code: ICIC00261000001992

I/We hereby authorize: Religare Broking Limited to debit (tick✓) SB/CA/CC/SB-NRE / SB-NRO /Other

Bank a/c number _____

with Bank _____ IFSC _____ or MICR _____

an amount of Rupees _____ ₹

FREQUENCY ☐ Mthly ☐ Qtly ☐ H-Yrly ☐ Yrly ☑ As & when presented

DEBIT TYPE ☐ Fixed Amount ☑ Maximum Amount

Reference 1: DPID-IN301774- _____ Phone No. _____

Reference 2: DP Charges Email ID _____

I agree for the debit of Mandate processing charges by the Bank whom I am authorizing to debit my account as per latest Schedule of charges of the Bank.

PERIOD
From D D M M Y Y Y Y
To D D M M Y Y Y Y
Or ☑ Until Cancelled

Signature Primary Account holder _____ Signature of Account holder _____ Signature of Account holder _____

1. Name as in bank records _____ 2. Name as in bank records _____ 3. Name as in bank records _____

- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity / corporate to debit my account.
- I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / corporate or the bank where I have authorized the debit.