GENERAL INSTRUCTIONS TO THE CLIENTS

(Issued in the interest of the clients)

- 1. Please read the entire form first. This is important for you and for us.
- 2. Please fill up and sign the 'Know Your Customer' form (KYC) yourself. *
- 3. Do not fill up the form in hurry or under compulsion.
- 4. Please read all the **mandatory** and **optional** documents carefully. In case you need any clarification on the contents thereof, please get in touch with us at our Head Office.
- 5. It is suggested that you keep a photocopy of the document, before handing it over to us.
- 6. Please keep yourself abreast with the rules, regulations, instructions etc. issued by SEBI and the Exchanges as far as possible, especially the Do's & Don'ts issued by the Exchanges from time to time.
- 7. In case you are dealing through Sub-Broker / Authorised Person, please ensure that they are registered with SEBI / Exchange.
- 8. Please do not hand over signed, blank DIS (Delivery Instruction Slips) to anybody including employees of Consortium Capital Pvt. Ltd. (CCPL) to avoid unauthorized use of the documents. Please note that we shall not be responsible for any such act on your part.
- 9. Any changes in the information provided in this KYC need to be brought to the notice of CCPL immediately with necessary supporting documents.
- 10. Please make a note of the Unique Client Code (UCC) and quote the same correctly every time you place an order with the dealer. Otherwise we shall not be liable for non-execution.
- 11. Please give instructions to the dealer in as clear and unambiguous term as possible to avoid any problem of miscommunication. Kindly note you cannot hold either CCPL or its officials responsible for any unclear instructions given by you. Your instructions have to be given solely based on your judgement, risk and responsibility. No employee of CCPL is authorized to provide you counsel for your transactions.
- 12. Please make the payments for margins, pay-in within time specified. Make the payments from the same bank account as mentioned in the KYC by way of account payee cheques in favour of CCPL only. Do not make cash payments as CCPL do not accept cash, and no employee of CCPL is so authorized.
- 13. Please meet your delivery obligations only from the demat account mentioned in the KYC, as the shares received from third parties would be rejected. The delivery instruction slips should be completed in all respects and submitted duly signed.
- 14. Any discrepancies in the contract note and account statements should be brought to the notice of the customer grievance cell at HO or sent an email to our investor grievance email id : ig@ccplconnect.com immediately.
- 15. Other than the documents asked for by way of the set of forms, CCPL has the right to call for further documents stipulated by the Exchanges, Regulators, Govt. agencies and CCPL themselves.
- 16. No employee of CCPL including the Branch Manager is authorized to trade on your behalf or apply discretion in buying / selling of scrips. They are only authorized to execute client's instructions.
- 17. Please submit separate CKYC, KYC & FATCA Forms for third holder, if any.
- 18. Submit "FATCA CRS Declaration Entities" Form in case of non-individual accounts separately.
- 19. Please fill up and sign the nomination details in your demat account as per Form 10 at Page no. 17-18.
- ★ Sign positions marked with "✓" & "number". "I" stands for Individual and "C" stands for Corporate.

REGULATORY BODIES ADDRESSES

National Stock Exchange Of India Ltd.

Regd. Office : Exchange Plaza, Plot No. C/1, G Block Bandra-Kurla Complex, Bandra (E), Mumbai - 400 051 Phone : (022) 2659-8100 to 8114, Fax : (022) 2659-8120

Regional Office : 1st Floor, Park View Apartments 99, Rash Behari Avenue, Kolkata - 700 029 Phone : (033) 4040-0400, 2419-5400, Fax : (033) 4040-0440, 2463-1791

BSE Limited

Regd. Office : Phiroze Jeejeebhoy Towers, Dalal Street, Mumbai - 400 001 Phone : (022) 2272-1233/1234, 6654-5695 (Hunting) Fax : (022) 2272-1919, E.mail : is@bseindia.com

Regional Office : 22, Camac Street Unit No.A-1, 1st Floor, Block A, Kolkata - 700 016

National Securities Depository Ltd.

Head Office : Trade World, A wing, 4th Floor Kamala Mills Compound, Lower Parel Mumbai - 400 013

Branch Office : Unit 2E, 2nd Floor, The Millenium 235/2A, A. J. C. Bose Road, Kolkata - 700 020

Securities and Exchange Board of India

Regd. Office : Plot No. C4-A, 'G' Block Bandra Kurla Complex Bandra (East), Mumbai - 400 051 Phone : (022) 2644-9000, 4045-9000 Fax : (022) 2644-9019 to 9022, 4045-9019 to 9022, E-mail : sebi@sebi.gov.in Interactive Voice Response System (IVRS) : Phone : (022) 2644-9950, 4045-9950

Regional Office : L&T Chambers, 3rd Floor, 16, Camac Street, Kolkata - 700 017 Phone : (033) 2302-3000, Fax : (033) 2287-4307, Email : sebiro@sebi.gov.in

ACCOUNT OPENING KIT - TRADING & DEMAT

Name of Stock Broker/Trading Member/Clearing Member : CONSORTIUM CAPITAL PVT. LTD.

SEBI Regn. No. and Date : INZ000274334 Dt.17.07.2019

NSDL Regn. Details : IN-DP-NSDL-319-2009, DP ID : IN303727

Registered & Correspondence Office address : 22, R. N. Mukherjee Road, 2nd Floor, Kolkata - 700 001 Phone : 2262-4894 / 4895 E.mail : mail@ccplconnect.com, Website : www.ccplconnect.com CIN : U67190WB2004PTC097912

Name of Clearing Member For NSE-CD, NSE-Commodity, BSE-CD & BSE-Commodity Segments : GLOBE CAPITAL MARKET LIMITED

SEBI Regn. No. and Date : INZ000177137 dt.14.05.2018

Registered & Correspondence Office address :

609, Ansal Bhawan, 16, Kasturba Gandhi Marg Connaught Place, New Delhi - 110 001 Phone : 3041-2345, Fax : (011) 2372-0883 E.mail : mail@globecapital.com, Website : www.globecapital.com

Compliance Officer Name, Phone No. & email ID :

Mr. Shital Pasari, 98317-52886, Email : spasari.ccpl@gmail.com

CEO Name, Phone No. & email ID :

Mr. Shital Pasari, 98317-52886, Email : spasari.ccpl@gmail.com

For any grievance/dispute, please contact **CONSORTIUM CAPITAL PVT. LTD.** at the above address or email id : ig@ccplconnect.com and Phone No. : 2262-4894. In case not satisfied with the response, please contact the concerned exchange(s) at ignse@nse.co.in and Phone No. (022) 2659-8190 for NSE, at is@bseindia.com and Phone No. (022) 2272-8097 for BSE.

Disclosure of Proprietary trading pursuance to SEBI Circular No. : SEBI/MRD/SE/ Cir-42/2003 dated 19th Nov., 2003, NSE Circular No. : NSE/INVG/PRE/2003/16 dated 25th Nov., 2003 and BSE Notice No. 20031125-7 dated 25 November, 2003:

We, **CONSORTIUM CAPITAL PVT. LTD.**, are also engaged in Proprietary trading apart from Client based business.

TRADING & DEMAT ACCOUNT CHECKLIST (INDIVIDUAL / NRI)

Required Validation	ID Details		Address Details		Bank Details	
Proofs	Name	Photo	Correspondence Address	Permanent Address	Bank Name & A/c No.	MICR / IFSC Code
PAN Card	\checkmark	1				
Passport *	\checkmark	1	✓	\checkmark		
Driving Licence *	\checkmark	1	✓	\checkmark		
Voter ID	\checkmark	1	✓	✓		
UID (Aadhaar)	\checkmark	1	 ✓ 	\checkmark		
Telephone Bill **			1	✓		
(Mobile bill not accepted)						
Electricity Bill **			 ✓ 	~		
Bank Statement **			1	\checkmark	<i>√</i>	
Cancelled Cheque					\checkmark	1
(With Client name &						
A/c No. Printed)						
Bank Verification Letter (Original)	1	1	1	1	1	1

Abbreviations :

- 1) * The Proof should be valid on the DATE of agreement.
- 2) ** The Proof should not be more than 3 months old.
- 3) # Bank Statement should be original and of latest quarter. It should have Bank Manager's Stamp & Sign, if original stationery is not available.
- 4) ## Bank Passbook should have Bank Manager's Stamp & Sign if it is hand written.

PROOF OF FINANCIAL DETAILS	s, any one (for clients who wish to trade in F8	&O)				
 Copy of Income Tax Return 	✓ Copy of Annual Accounts	opy of Form 16 (Salary Certificate)				
 Networth Certificate 	✓ Demat Holding Statement	ank Statements for last 6 months				
PROOF FOR EXISTING DEMAT ACCOUNT HOLDERS						
✓ DP Statement	 Client Master Report (CMR) 					
1. Clients name & DP A/c No. on the proof of DP should match with that mentioned in the account opening form.						
2. DP statement should clearly show DP ID & Client ID.						
3. For E-Broking clients, Demat A	3. For E-Broking clients, Demat A/c should be opened with MODES only with POA.					
PROOFS FOR NRI (NON RESIDENT INDIAN)						
1. PAN card						
2. Valid Passport / PIO Card / OC	2. Valid Passport / PIO Card / OCI Card as proof of Identity. Proof of Foreign Address and Indian Address (If any)					
3. Bank A/c should be either Repatriable Bank A/c for NRE OR Non-Repatriable A/c for NRO Status.						
4. Proof of Demat Account should	4. Proof of Demat Account should be only with NRI status.					
5. Permission for dealing in secur	rities from Authorized Dealer (Bank) / RBI.					

WATCH OUTS / LAST MINUTE REVISION

1. The A/c opening form is filled properly in BLACK INK and BLOCK LETTERS ONLY and do have:

- a. Clients Name and Signature at appropriate places marked in Grey color.
- b. Address as it appears on the address proof. In case permanent & Correspondence addresses are different, make sure to provide address proof for both of them.
- c. Witness signature at appropriate places marked in Light Grey colour.
- d. N. A. mentioned at all places not applicable to the client.
- 2. White ink is not allowed either on form or on agreement. All corrections to be countersigned with full signature.
- 3. All proofs, photographs and signature on the form should be clearly visible and should be self attested by client.
- 4. In Person Verification, PAN & Document verification from original has to be done by SEBI registered Sub-broker / Authorised Person only.
- 5. In case of DP in joint names, all the proofs PAN card and address proof should be provided for the 2nd & 3rd Holder also.

CHECKLIST TABLE FOR ACCOUNT OPENING Important Note : * Requirements are as per NSDL, NDML and SEBI guidelines

	If PROOF TYPE is (submitted as below, th	submitted as below, then it should fulfill the mentioned criteria's	ntioned criteria's	
PROOF TYPE	REQUIREMENTS*	ID PROOF	ADDRESS PROOF	BANK PROOF	SIGNATURE PROOF
PAN Card	 Coloured Photocopy preferred 	 Name, Photograph, Date of Birth should match Signature should be clearly visible 	NA	NA	 Signature should be clearly visible and should match
Passport	 Photocopy of Name and Address page (2 pages) Valid for atleast next TWO months from the date of Account Activation# 	 Name, Photograph, Date of Birth should match Signature should be clearly visible 	 Address mentioned in passport should match with the address mentioned in KYC 	NA	 Signature should be clearly visible and should match
Driving Licence	 Photocopy of Name and Address page (2 pages) Valid for atleast next TWO months from the date of Account Activation# Learning License is Not Acceptable 	 Name, Photograph, Date of Birth should match Signature should be clearly visible 	 Address mentioned in Driving Licence should match with the address mentioned in KYC 	NA	 Signature should be clearly visible and should match
Voter ID	 Photocopy of Name and Address page (2 pages) Coloured Photocopy preferred 	 Name, Photograph should match 	 Address mentioned in Voter ID should match with the address mentioned in KYC 	NA	NA
Aadhaar	 Coloured Photocopy preferred of Aadhaar Card (front and reverse) 	 Name, Photograph should match 	 Address mentioned in Aadhaar should match with the address mentioned in KYC 	NA	NA
Telephone Bills/ Electricity Bill	Telephone Bills/ • The Proof should not be more than 3 months old Electricity Bill	NA	 Address mentioned in bill should match with the address mentioned in KYC 	NA	NA
Bank Statement	 Bank Statement Original / copy of Bank Statement Latest quarter (3 months transactions). Bank Attestation is Mandatory where the Bank statement does not contain pre-printed Bank logo, address and other relevant details about the Bank. (Bank Attestation should contain Authorized signatory of Bank with Name and Employee Code and Bank seal) 	M	 Address mentioned in bank statement should match with the address mentioned in KYC 	 The below should match with the details mentioned in KYC Account holder Name Bank Account No Bank Account Type [Savings/Current] 	M

PROOF TYPE	REQUIREMENTS*	ID PROOF	ADDRESS PROOF	BANK PROOF	SIGNATURE PROOF
Bank Passbook	 Bank Passbook containing Bank Details Client Details Client Details Latest quarter (3 months transactions) pages. Bank Attestation is Mandatory where the Bank statement does not contain pre-printed Bank logo*, address and other relevant details about the Bank. (Bank Attestation should contain Authorized signatory of Bank with Name and Employee Code and Bank seal) 	NA	 Address mentioned in bank pass book should match with the address mentioned in KYC 	 The below should match with the details mentioned in KYC Account holder Name Bank Account No. Bank Account Type [Savings/Current] MICR / IFSC 	ΔA
Cheque	 Original Cancelled Cheque leaf 			The cancelled cheque should have: Pre printed Client Name Pre printed Account No IFSC MICR 	NA
Bank Verification Letter	 Bank's original Letter head Bank Attestation should contain Authorized signatory of Bank with Name and Employee Code and Bank seal Client Name, Account Number, Address, Signature, Account Type, IFSC, MICR (format available in WIRE>download option 	 Client's latest photo should be attested by Bank Client Name & Address Bank A/c no 	 Client's latest photo should be attested by Bank Client Name & Address BankA/c no. 	 Client's latest photo should be attested by Bank Client Name BankA/c no. Address IFSC MICR Accoun Type (Savings/Current) 	 Client's latest photo should be attested by Bank Client Name BankA/c no. Address Address IFSC MICR Account Type (Savings/ Current) Client Signature
 To avoid Objection and Delays Ensure the details mentioned you as per the Checklist tab you as per the Checklist tab be self attested by client. Colored photocopies are pre Proofs submitted should be Signature and Date of birth s and do have : a. Clients Name and Sign b. Address - as it appears of addresses are different, 	void Objection and Delays Ensure the details mentioned in the proof submitted matches with the form filled up by you as per the Checklist table mentioned. All proofs, photographs and signature on the form should be clearly visible and should be self attested by client. Colored photocopies are preferred. Proofs submitted should be compulsory in A4 size. Signature and Date of birth should match with atleast one submitted document proof. The A/c opening form should be filled in BLACK INK and CAPITAL LETTERS ONLY and do have : a. Clients Name and Signature at appropriate places marked in Grey color. b. Address - as it appears on the address proof. In case permanent & correspondence addresses are different, make sure to provide address proof for both of them.			 c. Witness signature at appropriate places marked in light grey color. d. N. A. mentioned at all places not applicable to the client. White ink is not allowed either on form or on agreement. All corrections needs to be countersigned with full signature. In person Verification, PAN & Document verification from original has to be done by SEBI registered Sub-broker/Authorised Person only. In case of DP in joint names, all the proofs-PAN card and address proof - should be provided for the 2nd & 3rd Holder also. Check clarity of the Documents Scanned. Affix proper stamp. Fill up form in clear handwriting. Fill up complete form and mark N.A. where not applicable. 	light grey color. Slient. . All corrections needs to be n original has to be done by id address proof - should be e.

CONSORTIUM CAPITAL PVT. LTD.

	INDEX OF DOCUMENTS	1				
S.NO.	NAME OF THE DOCUMENT AND ITS BRIEF SIGNIFICANCE	PAGE NOS.				
	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 account and an instruction/check list.	8 - 12				
2.	Tariff sheet	13				
	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s).					
3.	Additional KYC Form for Opening a Demat Account (For Individuals)	14 - 18				
	Document captures the additional information about the constituent relevant to demat account with nomination details					
4.	Declaration in case of same mobile number and / or e.mail ID for different clients	19				
5.	Additional KYC Form for Opening a Demat Account (For Non-Individuals)	20 - 22				
	Document captures the additional information about the constituent relevant to demat account					
6.	Option for issuance of DIS Booklet alongwith Account opening	23				
7.	Authorisation for Providing DP Transaction Statement by E.mail or on Website	24				
8.	Mandate Letter for HUF	24				
9.	Schedule of Charges for Beneficiary Account	25				
	The charges payable by the client for availing DP Services					
10.	Policies and Procedures	26 - 29				
	Document describing significant policies and procedures of the stock broker.					
for tra	: Standard Mandatory Documents viz. Rights & Obligations of Stock Broker, Sub-broke ding on exchanges, Uniform Risk Disclosure Documents, and Guidance Note detailing Do's iding, are available in physical/electronic mode as per your choice marked in on Page 10	s and Don'ts				
	e for physical/electronic mode for Rights and Obligations of BO and DP, as prescribed sitories can be marked on Page 15 in case of Individuals and on Page 21 in case of Non-I	•				
	VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER					
11.	Authority Letter for Running Account	30				
	The document deals with an option given to client to settle his obligations towards funds and securities on a running basis & settle the same at monthly/quarterly interval at his discretion.					

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CENTRAL KYC REGI	STRY Know Your Customer (KYC) Application Form Individual
Important Instructions: A) Fields marked with "*" arr B) Please fill the form in En C) Please fill the date in DE	glish and in BLOCK letters. H) For particular section update, please tick (✓) in the box available before the
For office use only (To be filled by financial ir	Application Type* New Update Institution) KYC Number (Mandatory for KYC update request) Account Type* Normal Simplified (for low risk customers) Small OTP based E-KYC
1. PERSONAL DE	TAILS (Please refer instruction A at the end)
Name* (Same as ID pr Maiden Name Father / Spouse Name Mother Name Date of Birth*	
Gender*	M- Male DF- Female T-Transgender
Marital Status* Citizenship* Residential Status*	Married Unmarried Others IN- Indian Others (ISO 3166 Country Code) Resident Individual Non Resident Indian Foreign National Person of Indian Origin
Occupation Type*	S-Service (Private Sector Public Sector Government Sector) O-Others (Professional Self Employed Retired Housewife Student) B-Business X- Not Categorised Impression Signature / Thumb
2. TICK IF APPLIC	ABLE CRESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end)
ISO 3166 Country Code	REQUIRED* (Mandatory only if section 2 is ticked) e of Jurisdiction of Residence* ber or equivalent (If issued by jurisdiction)* ISO 3166 Country Code of Birth*
3. PROOF OF IDE	NTITY (Pol)* (Please refer instruction C at the end)
 (Certified copy of <u>any one</u> of A- Passport Number B- Voter ID Card C- PAN Card 	of the following Proof of Identity[Pol] needs to be submitted) or Passport Expiry Date D D - M M - Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 D- Driving Licence E- UID (Aadhaar) F- NREGA Job Car Z- Others (any docur 	Driving Licence Expiry Date
	Identification Number
4. PROOF OF AD	DRESS (POA)" //ANENT / OVERSEAS ADDRESS_DETAILS_(Please see instruction D at the end)
_	of the following Proof of Address [PoA] needs to be submitted)
Proof of Address*	Residential / Business Residential Business Registered Office Unspecified Passport Driving Licence UID (Aadhaar) Voter Identity Card NREGA Job Card Others Image: Specify and the specific and the speci
Line 1*	Image: City / Town / Village* Image: City / Town / Village* Image: City / Town / Village* Image: City / Town / Village* Image: City / Town / Village* Image: City / Town / Village*

_	E / LOCAL ADDRESS DETAILS * (Please se	
Same as Current / Perma	nent / Overseas Address details (In case of	f multiple correspondence / local addresses, please fill 'Annexure A1')
Line 1*		
Line 2		
Line 3		City / Town / Village*
District*	Pin / Post Code*	* State / U.T Code* ISO 3166 Country Code*
Same as Current / Perma Line 1*	IRISDICTION DETAILS WHERE APPLICAN nent / Overseas Address details	AT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked) Same as Correspondence / Local Address details
Line 2		City / Town / Village*
Line 3		ZIP / Post Code* ISO 3166 Country Code*
State*		
	(All communications will be sent on provided	M-LN.
Tel. (Off)	Tel. (Res)	Mobile
FAX	Email ID	
6. DETAILS OF RELAT	ED PERSON (In case of additional related po	versons, ple ase fill 'Annexure B1') (please refer instruction G at the end) KYC Number of Related Person (if available*)
Related Person Type*		ssignee Authorized Representative
ricialeur croon rype	Prefix First Name	Middle Name Last Name
Name*		
	(If KYC number and name are provided, below	w details of section 6 are optional)
PROOF OF IDENTITY [Pol] OF RELATED PERSON* (Please see instructi	ion (H) at the end)
A- Passport Number		Passport Expiry Date
B- Voter ID Card		
_		
D- Driving Licence		Driving Licence Expiry Date
E- UID (Aadhaar)		T T T
F- NREGA Job Card		
Z- Others (any documen	t notified by the central government)	Identification Number
S- Simplified Measures	s Account - Document Type code	Identification Number
7. REMARKS (If any)	Mobil	ile no. / Email-ID) (Please refer instruction F at the end)
8. APPLICANT DECL	ARA TION	
therein, immediately. In case any of for it.		edge and belief and I undertake to inform you of any changes eading or misrepresenting, I am aware that I may be held liable [Signature / Thumb Impression]
Date : DD-MM-		Signature / Thumb Impression of Applicant
9. ATTESTATION / FC	DR OFFICE USE ONLY	
Documents Received	Certified Copies	
KYC VERI	FICATION CARRIED OUT BY	INSTITUTION DETAILS
Date		Name CONSORTIUM CAPITAL PVT. LTD.
Emp. Name		Code IN0811
Emp. Code		
Emp. Designation		
Emp. Branch		
	[Employee Signature]	[Institution Stamp]
1		

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

General Instructions:

- 1 Fields marked with '*' are mandatory fields.
- 2 Tick 🗸 wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- 6 Wherever state code and country code is to be furnished, the same should be the two -digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which may be obtained from our office.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick () in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of 'Small Account type' only personal details at section number 1 and 2, photograph, signature and self-certification required.

A Clarification / Guidelines on filling 'Personal Details' section

- 1 Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1 Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that typ e of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

C Clarification / Guidelines on filling 'Proof of Identity [Pol]' section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).
 - Document Code Description

02

06

- 01 Identity card with applicant's photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
 - Letter issued by a gazetted officer, with a duly attested photograph of the person.

D Clarification /Guidelines on filling 'Proof of address [PoA] -Current/ Permanent/Overseas address details' section

- 1 PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3 In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.
 - Document Code Description
 - 01 Utility bill which is not more than two months old of any service provider (electricity, telephone, post -paid mobile phone, piped gas, water bill).
 - 02 Property or Municipal Tax receipt.
 - 03 Bank account or Post Office savings bank account statement.
 - 04 Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
 - 05 Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
 - Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

E Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

- 1 To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2 In case of multiple correspondence / local addresses, Please fill 'Annexure A1'

F Clarification / Guidelines on filling 'Contact details' section

- 1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
- 2 Do not add '0' in the beginning of Mobile number.

G Clarification / Guidelines on filling 'Related Person details' section

- Provide KYC number of related person if available.
- H Clarification / Guidelines on filling 'Related Person details Proof of Identity [Pol] of Related Person' section
 - 1 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

□ NEW □ CHANGE REQUEST (Please tick ✓ the appropria	te) Acknowle	dgement No.	k	O NICT
Please fill this form in ENGLISH and in BLOCK LETTERS				
(Please tick ✓ the box on left margin of appropriate row where CHANGE/CO IDENTITY DETAILS	RRECTION is require	ed and provide the deta	ils in the corresponding row)	Technology, Trus
. Name of the Applicant				
				PHOTOGRAPH
Father's/Spouse Name				
a. Gender 🗌 Male 🛛 Female 3b. Marital status 🗌 Single 🗌 Ma	arried 3c. Date	of Birth D D /	M M / Y Y Y Y	Please affix your recent passpo size photograph and
a. Nationality 🗌 Indian 🗌 Other (Please specify)				sign across it
b. Status	onal			
a. PAN				
b. Unique Identification Number (UID) / Aadhaar, if any:				
. Specify Proof of Identity submitted	her (Please specify)			
ADDRESS DETAILS				
. Residence / Correspondence Address				
City / Town / Village			Pin Coo	le
State		Country		
Tel. (Res.) E-Mail Id . Permanent Address (If different from above or oversea	s address, mand	Mobile No atory for Non-Res	ident Applicant)	
City / Town / Village		Country	Pin Coo	le
State		Country		
DECLARATION	ha haat of multiparties	dee and heliof and l		
hereby declare that the details furnished above are true and correct to t indertake to inform you of any changes therein, immediately. In case any o	f the above informatio	n is found to be false		
r untrue or misleading or misrepresenting, I am aware that I may be held lia				
Date:	D / M M ,		Signature o	f the Applicant
OR OFFICE USE ONLY				
n Person Verification (IPV) Details:				
lame of the person who has done the IPV:				
Designation: Employee ID:				
ame of the Organization:				
Date of IPV: DDD/MM//YYYY		who has done the IPV	Seal/Stamp o	f the Intermediary
	gnature of the person			
☐ Originals Verified and Self Attested Document copies received	gnature of the person			
	gnature of the person			

KNOW YOUR CLIENT (I	KYC) Application I	orm - For Non Individ	luals	
	(Please tick ✓ the appropriate)	Acknowledgement No.		NICIDI
Please fill this form in ENGLISH and in BLOC (Please tick ✓ the box on left margin of appropria		-		
IDENTITY DETAILS	ale row where Change/Connection			Technology, Trust & I
1. Name of the Applicant				
2a. Date of incorporation D D / M I	M / Y Y Y Y 2b. P	ace of incorporation		
3. Date of commencement of business				
4a. PAN				
4b. Registration No. (e.g. CIN)				
5. Status (Please tick ✓ the appropriate)				
Private Limited Co. Dublic	: Ltd. Co. 🗌 Body Corporate	e Dartnership	Trust	
Charities NGO'		□ FII	HUF	
AOP Bank	Government Bo	, ,		nt
BOI Socie	ty 🗌 LLP	FPI - Category I	FPI - Category II	
FPI - Category III Other	s (Please specify)			
ADDRESS DETAILS				
1. Address for Correspondence				
City / Town / Village			Pin Code	
State		Country		
2. Specify the Proof of Address submitt	ed for Correspondence Addre	SS:		
3. Contact Details				
Tel. (Off.)		Fax		
Tel. (Res.)		Mobile No		
E-Mail Id.				
4. Registered Address (If different fro	m above)			
City / Town / Village		Country	Pin Code	
State		Country		
OTHER DETAILS (If space is insufficient,	enclose these details separately [IIIu	strative format enclosed])		
1. Name, PAN, residential address and	photographs of Promoters/Pa	artners/Karta/Trustees and whole tir	ne directors:	
2a.DIN of whole time directors :				
2b.Aadhar number of Promoters/Partne	ers/Karta :			
DECLARATION				
I/We hereby declare that the details furnished all and I/we undertake to inform you of any changes				
be false or untrue or misleading or misrepresent				
	Date: DD/	M M / Y Y Y Y	Name & Signature of the Author	orised Signatory
FOR OFFICE USE ONLY				
In Person Verification (IPV) Details: Name of the person who has done the IPV:				
Designation:	Employee ID:			
Name of the Organization:				
Date of IPV: DDD/MM/	YYYY			
	Signature of	the person who has done the IPV	Seal/Stamp of the Inte	ermediary
Originals Verified and Self Attested Doc	ument copies received			
		Date	Signature of the Authorise	ed Signatory

Name				
				DUOTOCDADU
Relationship with Applicant (i.e. promoters, whole time directors etc.)				PHOTOGRAPH
PAN	3b. DIN			
Aadhar (UID) Number				Please affix
Residential/ Registered Address				your recent passport
				size photograph and
City / Town / Village			Pin Code	sign across it
State		Country	Fill Code	
Name				
Relationship with Applicant (i.e. promoters, whole time directors etc.))			PHOTOGRAPH
PAN	3b. DIN			
Aadhar (UID) Number				P1
Residential/ Registered Address				Please affix your recent passport
				size photograph and
				sign across it
City / Town / Village		Country	Pin Code	
State		Country		
Name				
Relationship with Applicant (i.e. promoters, whole time directors etc.)	<u> </u>			PHOTOGRAPH
				- Indicate -
PAN	3b. DIN			
Aadhar (UID) Number				Please affix
Residential/ Registered Address				your recent passport
				size photograph and sign across it
City / Town / Village			Pin Code	
State		Country		
Name				
				PHOTOGRAPH
Relationship with Applicant (i.e. promoters, whole time directors etc.)	3b. DIN			PHOTOGRAPH
Relationship with Applicant (i.e. promoters, whole time directors etc.)				
Relationship with Applicant (i.e. promoters, whole time directors etc., PAN				PHOTOGRAPH Please affix your recent passport
Relationship with Applicant (i.e. promoters, whole time directors etc., PAN				Please affix your recent passport size photograph and
Relationship with Applicant (i.e. promoters, whole time directors etc., PAN				Please affix your recent passport
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Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number Residential/ Registered Address			Pin Code	Please affix your recent passport size photograph and
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Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number Residential/ Registered Address City / Town / Village State		Country	Pin Code	Please affix your recent passport size photograph and
Relationship with Applicant (i.e. promoters, whole time directors etc., PAN	3b. DIN		Pin Code Pin Code	Please affix your recent passport size photograph and sign across it
Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number Residential/ Registered Address City / Town / Village State Name Relationship with Applicant (i.e. promoters, whole time directors etc.)		Country	Pin Code I<	Please affix your recent passport size photograph and
Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number Residential/ Registered Address City / Town / Village State Name Relationship with Applicant (i.e. promoters, whole time directors etc.) Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN	3b. DIN	Country	Pin Code Pin Code	Please affix your recent passport size photograph and sign across it
Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number Residential/ Registered Address City / Town / Village State Name Relationship with Applicant (i.e. promoters, whole time directors etc.) Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number			Pin Code Image: Code management of the second sec	Please affix your recent passport size photograph and sign across it
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Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number Residential/ Registered Address City / Town / Village State Name Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number Relationship with Applicant (i.e. promoters, whole time directors etc.) PAN Aadhar (UID) Number			Pin Code Image: Amage: Ama	Please affix your recent passport size photograph and sign across it PHOTOGRAPH Please affix your recent passport size photograph and
		Country Country	Pin Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code	Please affix your recent passport size photograph and sign across it PHOTOGRAPH Please affix your recent passport

Name & Signature of the Authorised Signatory (ies)

A. IMPORTANT POINTS:

- Self attested copy of PAN card is mandatory for all clients, including Promoters/Partners/Karta/Trustees and whole time directors and persons authorised to deal in securities on behalf of company/firm/others.
- 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 2. 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.
- If correspondence & permanent address are different, then proofs for both have to be 5 submitted
- 6 Sole proprietor must make the application in his individual name & capacity.
- 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. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC
- 9 (Continuous Discharge Certificate) is to be submitted.
- 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 10 Board/Passport of Minor/Birth Certificate must be provided.
- Politically Exposed Persons (PEP) are defined as individuals who are or have been 11. entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers,
- senior executives of state owned corporations, important political party officials, etc. B. Proof of Identity (POI): List of documents admissible as Proof of Identity:
- Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving 1. license
- 2.
- PAN card with photograph. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

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

- (*Documents having an expiry date should be valid on the date of submission.)
- Passport/Voters Identity Card/Ration Card/Unique Identification Number (UID)/ Aadhar Letter/Registered lease or Sale Agreement of Residence/Driving License/ Flat Maintenace bill/Insurance Copy.

- Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill Not more than 2. 3 months old
- 3 Bank Account Statement/Passbook -- Not more than 3 months old.
- 4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign 5 Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
- 6 Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
- 7. For FII/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.

The proof of address in the name of the spouse may be accepted. 8

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.
 - Investors residing in the state of Sikkim. 2
 - 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.
 - In case of institutional clients, namely, Flls, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, 5 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:

- 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). In case of NRIs, authorised officials of overseas branches of Scheduled Commercial
- 2 Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy /Consulate General in the country where the client resides are permitted to attest the documents

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

TRADING ACCOUNT RELATED DETAILS - FOR INDIVIDUALS & NON-INDIVIDUALS

BANK ACCOUNT(S) DETAILS	
	First Bank Details	Second Bank Details
Bank Name		
Branch		
Address		
Bank A/c No.		
A/c Type	Saving Current	Saving Current
	Others-In case of NRI/NRE/NRO	Others-In case of NRI/NRE/NRO
MICR No.		
IFSC code		
DEPOSITORY ACCO	OUNT(S) DETAILS	
	First Demat A/c Details	Second Demat A/c Details
Depository		
Participant Name		
Depository Name	🗖 NSDL 🗖 CDSL	INSDL I CDSL
Beneficiary Name		
DP ID		
Beneficiary ID		
(BO ID)		
		where you wish to trade. The segment not
	struck off by the client.	C ¹
Exchange	Segment	Signature
1. National Stock E	Exchange of India Ltd Cash	\checkmark
	- F&O	✓
	- Currency Derivative	s 🗸
	- SLBM	\checkmark
	- Commodity	✓
	- MFSS	\checkmark

2. BSE Limited	- Cash	\checkmark							
	- F&O	\checkmark							
- Currency Derivatives 🗸									
	- SLBM	✓							
	- Commodi	ity 🗸							
		segment/new exchange, separate authorization/let	tter						
should be taken from the c	lient by the stock broker.								
OTHER DETAILS									
Gross Annual Income Deta									
Income Range per annum	■ Below ₹ 1 Lac ■ 1-5 La	ac 🗖 5-10 Lac 🗖 10-25 Lac 🗖 25 Lacs-1 crore 🗖 > 1 cr	rore						
Net-worth		as on (date)							
(Net worth should not be a		(dd/mm/yyyy)							
Occupation (Individuals) (Please tick any one		ublic Sector D Government Service D Business iculturist D Retired D Housewife D Student	•						
and give brief details)	□ Others								
Please tick, if applicable, f									
authorized signatories / P		Politically Exposed Person (PEP)							
Partners / Karta / Trustees	s / whole time directors	tors Related to a Politically Exposed Person (PEP)							
PAST ACTIONS									
Details of any action / proceedings initiated / pending / taken by SEBI / Stock exchange / any other authority against the applicant / constituent or its Partners / promoters / whole time directors / authorized persons in charge of dealing in securities during the last 3 years									
DEALINGS THROUGH OTH	ER STOCK BROKERS								
		proker (in case dealing with multiple stock brokers /si	ub-						
brokers, provide details of									
Name of stock broker									
Name of Sub-Broker, if any									
Client Code		Exchange							
Details of disputes/dues pe	ending from/to such stock	k broker/sub- broker							

ADDITIONAL DETAILS								
Whether you wish to receiv	e physical contract note or Electronic Contract Note (ECN) (please specify)							
, Specify your Email id, if applicable :								
Whether you wish to receiv	e the standard documents - Rights and Obligations, Risk Disclosure Document							
(RDD) and Guidance note -	physically or electronically, (please specify) :							
Please note that these doc	uments are also available in certain vernacular languages on demand.							
Whether you wish to avail o	of the facility of internet trading / wireless technology (please specify)							
□ YES □ NO								
Number of years of Investm	ent / Trading Experience							
In case of non-individuals, n	ame, designation, PAN, UID, signature, residential address and As per Annexure							
photographs of persons aut	horized to deal in securities on behalf of company/firm/others							
Any other information								
INTRODUCER DETAILS (opt	ional)							
Name of the Introducer								
	(Surname) (Name) (Middle Name)							
Status of the Introducer	Sub-broker Remisier Authorized Person Existing Client							
	Others, please specify							
Address and Phone No.								
of the Introducer								
Signature of the Introducer								
NOMINATION DETAILS (for	individuals only)							
I/We wish to nominate	I/We do not wish to nominate							
Name of the Nominee								
Relationship with the Nomi	nee							
PAN of Nominee	Date of Birth of Nominee							
Address and Phone No.								
of the Nominee								
If Nominee is a minor, deta	ils of guardian :							
Name of guardian								
Address and Phone No.								
of Guardian								
Signature of guardian								

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

DECLARATION

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

Place	:	✓
Date	:	Signature of Client/ (all) Authorized Signatory (ies)

ANNEXURE

DETAIL OF PROMOTERS / PARTNERS / KARTA / TRUSTEES AND WHOLE TIME DIRECTORS AND PERSONS AUTHORIZED TO DEAL IN SECURITIES ON BEHALF OF COMPANY / FIRM / OTHERS

Particulars	1st	2nd	3rd
Designation			
Name			
PAN			
DIN / UID			
Residential Address			
Photograph	Please affix your recent passport size photograph and sign across it	Please affix your recent passport size photograph and sign across it	Please affix your recent passport size photograph and sign across it
Signature			

FOR OFFICE USE ONLY

UCC Code allotted to the Client : ____

	Documents verified with Originals	Client Interviewed By
Name of the Employee		
Employee Code		
Designation of the employee		
Date		
Signature		

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

Signature of the Authorised Signatory

Date : __

Seal/Stamp of the stock broker

INSTRUCTIONS / CHECK LIST

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

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income - Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement	Bank account statement for last 6 months
Any other relevant documents substantiating	Self declaration with relevant
ownership of assets	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 / sub-broker's office.
 - b. In case of non-resident clients, employees at the stock broker's local office, overseas can do inperson verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
- 5. For non-individuals :
 - a. Form need to be initialized by all the authorized signatories.
 - b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company / firm / others and their specimen signatures.

TARIFF SHEET

A. BROKERAGE

		%	Min. Paisa	Min. Per Lot
1.	Capital Market Segment			
	Square up Brokerage			Not Applicable
	Delivery Brokerage			Not Applicable
2.	Futures & Options Segment			
	Brokerage in Futures			
	Brokerage in Options			
3.	Currency Derivatives Segment			
	Brokerage in Futures			
	Brokerage in Options			
4.	Commodity Derivatives Segment			
	Brokerage in Futures			
	Brokerage in Options			

B. TRANSACTION CHARGES

	Basis of Calculation	NSE	BSE
Capital Market	% of Turnover		
Equity Futures	% of Turnover		
Equity Options	% of Turnover		
Currency Futures	% of Turnover		
Currency Options	% of Turnover		
Commodity Futures	% of Turnover		
Commodity Options	% of Turnover		

C. OTHER CHARGES

	Basis of Calculation	CAPITAL MARKET	 CURRENCY DERIVATIVES
GST, Krishi Kalyan Cess and			
Swatch Bharat Cess on Brokerage	% of Brokerage (A)		
GST, Krishi Kalyan Cess and			
Swatch Bharat Cess on Turnover Charges	% of Transaction Charges (B)		
Stamp	% of Square Up Turnover		
	% of Delivery Turnover		
SEBI Turnover Charges	% of Turnover		

ACCOUNT OPENING FORM (FOR INDIVIDUALS)

CONSORTIUM CAPITAL PVT. LTD.

CLIENT ID					Τ												Date	D	D	Μ	Μ	Y	Υ	Υ	Y
(To be filled by F	Parti	icipa	ant))				1														I	1		
I/We request you to open a depository account in my/our name as per the following details :																									
(Please fill all the details in CAPITAL LETTERS only)																									
A) DETAILS OF ACCOUNT HOLDER(S) :																									
Account Holder	(s)																								
Sole/ First Hold	er N	lam	e																						
Second Holder Name																									
Third Holder Name																									
			9	Sole	e/	Firs	t H	olde	er				Se	ecor	nd ⊦	lold	er				Thire	d Ho	lder		
PAN																									
Occupation (ple	ase					Sec							Priva			-					ate S		or		
tick any one and	d			-		turis			0.0+	irad			Agric				Ret	irad		0	cultu lic Se			Det	irad
give brief details	s)							ervi									rvice				ernn				
			_			-		Bus									usine				sewi				
										onal							fessio				lent				
			O	ther	rs	(Ple	ease	spe	eci	ty;			Othe	ers (I	Plea	ase s	speci	ty;		Othe	ers (I	Pleas	se sp	beci	ty;
Brief details																									
B) For Associati					-						-				-						-				
opened in the Partnership Firm								-										Ass	ocia	tion	of	Pers	ons	(A(ΟР),
Name	II, U	ine	gisi	lere	u	nu	51,	eit.	51	ioui	u b		men	lioi	1	AN	. vv								
C) Type of accou	unt		10	rdir	าลเ	rv R	esi	dent					NR	I-Re			le		NRI	-Nor	ו ר Rej	 natri	able	 `	
						•				vest			Fo		•					mot		Juri	abre		
		1		larg				0									e spe	cify)							
D) Gross Annua	l Ind	com	ne D)eta	ils	s - lı	nco	me	Ra	nge	pe	r a	annu	m (plea	ase t	tick a	iny o	ne)						
■ Below ₹ 1 La	c I	ז ₹	1 -	5 L	ac]₹	5 -	10	Lac		₹	t 10	- 25	Lac		Mo	ore t	nan	₹ 25	Lac	5			
E) In case of NR	ls/ I	Fore	eigr	n Na	iti	ona	ls																		
RBI Approval Re	efer	enc	e N	о.											RB	I Ap	prov	al d	ate	D	M	Μ	Y	۲N	(Y
F) BANK DETAIL	.S :																								
Bank A/c Type		S	avir	ngs	Ac	ccco	unt		Cu	rrer	nt A		coun	t 🗖	l Ot	hers	s (Ple	ease	spec	;ify)_					_
Bank A/c No.																									
Bank Name																									
Branch Address																									
City/town/villag	ge																Р	in C	ode						
State																	С	Coun	ry						
MICR Code																									

G) Please tick, if applicable D Politically Exposed Person (PEP) D Related to Politically Exposed Person (RPEP)										
H) STANDING INS	TRUCTIONS :									
1. I/We authorise you to receive credits automatically into my/our account.										
2. Account to be o	perated through Power of Atto	ney (PoA)		Yes	D No					
3. SMS Alert facili	:y : [Mandatory if you are giving	Power of Attorne	ey (PoA). Er	isure that t	he mobile number					
is provided in the	KYC Application Form]									
Sole/First Holder	□ Yes □ No Second Ho	lder 🛛 Yes 🗖	No Thi	rd Holder	🛛 Yes 🗖 No					
4. Mode of receivir	ng the standard document - Right	s and Obligations								
of Beneficial Ow	ner and Depository Participant	(Tick any one)	D Physica	al Form I	Electronic Form					
5. Mode of receivi	ng Statement of Account (Tick a	ny one)	D Physic	al Form I	Electronic Form					
(Read Note 3 an	d ensure that email ID is provid	ed in KYC Applica	ition Form)							
6. Auto Pledge Co	nfirmation		🗖 Ye	s 🗖 No						
7. To receive Annu	ual Reports, AGM Notices and c	ther								
communication	ns from Issuers & RTA in physica	l form	🗖 Ye	s 🗖 No						
I) Guardian Detail	s (where sole holder is a minor)	[For account of a	a minor, two	o KYC Appli	ication Forms must					
be filled i.e. one fo	or the guardian and another for	the minor (to be	signed by g	guardian)]						
Guardian Name			PAN							
Relationship of gu	ardian with minor									
J) Nomination Op	tion D I/We wish to make a i	nomination. $lacksquare$ I/	We do not v	wish to mal	ke a nomination.					
	[Details are provided	at FORM 10]								
K) BSDA Option	□ I/We wish to avail a BSDA	Facility. [As	per details	given belo	ow]					
	I/We do not wish to avail a BSDA Facility and want to keep my account as regular account.									
BSDA Details										

DECLARATION

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. 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. 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".

	Name(s) of holder(s)	Signature(s) of holder
Sole/First Holder/Guardian		
(in case sole holder is minor)		1
(Mr./Ms.)		
Second Holder		
(Mr./Ms.)		
Third Holder		/
(Mr./Ms.)		

NOTES :

- 1. All communication shall be sent at the address of the Sole/First holder only.
- 2. Thumb impressions and 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.
- 3. For receiving Statement of Account in electronic form:
 - 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.
- 4. Strike off whichever is not applicable.

Q	ccpl	FORM FC (To			MINA d in l		N/ (ICE	LLA						TIC	N				5			SE gy, Trust) & Rea	ch
Date	DD	M M Y Y	Y	Y DP ID I N 3 0 3 7 2 7 Client ID																						
	I/We wish to mak	ke a nomination. [A	s pe	er d	letail	s giv	/en	belc	w]	·	·															
	I/We wish to can	cel the nomination securities held by r	mao ne /	de t	oy m in th	e/ u	s ea	arlier	r an	d cc sha	nse Il ve	quer st in	ntly me	all ri / us	ight [S	s a trik	nd l	liab ff th	ilities e no	s in min	res atic	pect	t of	ben Is be	efic	iary
	ination Details														_											•1
	wish to make a not sitory by me/us in t													o sh	all ı	rece	eive	e all	sec	uriti	es	held	in 1	the		
	ination can be made nees in the account	· ·		De	tails	of 1	st No	min	ee			Det	ails	of 2	nd N	lom	ine	е		De	etai	ils of	. 3 _q	Nor	nine	e
1	Name of the nomi																									
2	Share of each Nominee	Equally							%	, 0								%								%
	Nominee	[If not equally, please specify percentage]	Aı	ny c	odd le	ot af	ter o	divis	sion	sha	ll be	trar	nsfe	rred	to	the	firs	t no	min	ee n	nen	ition	ed i	in th	e fc	orm.
3	· ·	ne Applicant (If any)																								
4	Address of Nomin	ee(s)																								
		PIN Code									-								-				Г			
5	Mobile/Telephone	No. of nominee(s)																								
6	Email ID of nomin	ee(s)																								
7	Nominee Identifi	cation details –																								
	[Please tick any c and provide detail																									
		-		_	_																					
	Photograph & Sig	anaturo		ŀ	Photo Sig	grapi gnatu							-	aph (ature			iee			Ph		graph gnatui				
		gnature																								
		Signature	13 7								13	P							137							
	D PAN																									
	Aadhaar																									
	Saving Bank acc	count no.																								
	Proof of Identity																									
	Demat Account	ID	_																							
	os. 8-14 should be t		e(s)) is a	a mii	nor:					_															
8	Date of Birth {ir nominee(s)}	n case of minor																								
9	Name of Guardi {In case of minor	an (Mr./Ms.) nominee(s)}																								
10	Address of Guardi																									
	г	PIN Code									-								-							
11	Mobile/Telephone						1								I											
12	12 Email ID of Guardian																									
13	Relationship of Guar	rdian with nominee																								

14	Guardian Identification [Please tick any one of and provide details of and provide details of a statement of the statement of	f following same]				
	Photograph & Signatu Aadhaar Saving Ba Proof of Identity Den	nk account no.				
		Na	me(s) of holder(s)			Signature(s) of holder
Sole/ (Mr./I	First Holder Ms.)					
Seco	nd Holder (Mr./Ms.)					
Third	Holder (Mr./Ms.)					
			Signature of Witness for	Nomination	· ·	
	Name of the Witne	ess	Address		S	ignature of witness
					Date D	D M M Y Y Y Y

NOTES :

- 1. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
- 2. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
- 3. The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
- 4. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
- 5. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
- 6. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
- 7. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
- 8. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
- 9. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
- 10. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure D.
- 11. Savings bank account details shall only be considered if the account is maintained with the same participant.
- 12. DP ID and client ID shall be provided where demat details is required to be provided.



DECLARATION IN CASE OF SAME MOBILE NUMBER AND / OR E.MAIL ID FOR DIFFERENT CLIENTS

[Please tick (\checkmark) wherever applicable]

DP ID	IN303727	Client ID		Date	
Name	of First Holder				
D Mo	bile Number				
🗖 Ema	ail ID				
I hereb	y declare that the afor	esaid mobile	e number or E-mail ID belongs to 🗖 Me	e or E	I My family (spouse,
depen	dent children and depe	endent pare	nts).		
Signati	ure of account holder	1			
Name	of First Holder				

DP ID	IN303727	Client ID		Date
Name	of Second Holder			
D Mo	bile Number			
🗖 Ema	ail ID			
I hereb	by declare that the afor	esaid mobile	e number or E-mail ID belongs to 🗖 Me	e or 🗖 My family (spouse,
depen	dent children and depe	endent pare	nts).	
Signati	ure of account holder	1		
Name	of Second Holder			

DP ID	IN303727	Client ID		Date	
Name	of Third Holder				
D Mo	bile Number				
🗖 Ema	ail ID				
I hereb	y declare that the afor	esaid mobile	e number or E-mail ID belongs to 🗖 M	e or [■ My family (spouse,
depen	dent children and depe	endent pare	nts).		
Signati	ure of account holder	√			
Name	of Third Holder				

ACCOUNT OPENING FORM (FOR NON-INDIVIDUALS)

CCP CONSORTIUM CAPITAL PVT. LTD.

CLIENT ID												Date	D	D	Μ	Μ	Y	Y	Y	Y
(To be filled by Pa	rtici	 pant)														-	-	-	
. ,	We request you to open a depository account in our name as per the following details :																			
(Please fill all the details in CAPITAL LETTERS only)																				
A) DETAILS OF AC																				
					V =7		ame								Р	AN				
Sole/ First Holder																				
-																				
Second Holder																				
Third Holder																				
B) Type of accoun	t I	В	ody	Со	rpora	te				FI				FII						
			uali	fied	l Fore	ign	Inve	stor		Mutu	ial Fu	nd		Trus	st					
		В	ank		CM		HUF	•		Other	s (Ple	ase spe	cify)							
C) For Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., although the account is																				
opened in the na	me	of t	he	pa	rtner	(s), ⁻	trus	tee(es)	etc., 1	the n	ame 8		l of	the	e Par	tne	rship	o Fii	r m,
Unregistered Trus	t, A	ssoc	iatio	on o	of Per	sons	s (AC)P) e	etc.,	should	d be r	nentio	ned	belo	w :					
Name											PAI	N								
D) Income Details	s (ple	ease	spe	cify) - Inc	come	e Rai	nge	per	annum	า									
■ Below ₹ 20 Lac		₹2	0 - 5	50 L	ac 🕻] ₹	50 L	ac -	1 Cr	ore 🗖	Abo	ve₹1	Cror	e, ar	nd					
Networth Amount	t₹											as or	า (Da	te)	D	M	Μ	YY	Y	Y
(Net worth should	l not	be	olde	r th	nan 1	yeaı	r)													
E) In case of FIIs/0	Othe	ers (a	as m	ay	be ap	plic	able)												
RBI Approval Refe	eren	ce N	о.								RBI	Appro	/al da	ate	D	M	Μ	YY	Y	Y
SEBI Registration		nber	foi	r FII	ls)															
F) BANK DETAILS	1																			
Bank A/c Type		Savir	ngs A	Acc(count		Curre	ent /	Acco	ount C	Oth	ers (Ple	ease	spec	ify)_					
Bank A/c No.																				
Bank Name																				
Branch Address																				
City/town/village												Pin	Code							
State		1	1				,			1		Cou	ntry							
MICR Code										IFSC										

G) Please tick, if a	pplicable, for any of	fyour	D F	Politically E	Ехро	osed	Person	(PEP)				
authorized signate	ories/Promoters/Pa	rtners/		Related to Politically Exposed Person (RPEP)								
Karta/Trustees/wl	Karta/Trustees/whole time directors:											
H) Clearing Meml	per Details (to be fil	led up by	y Clearin	g Membei	rs oi	nly)						
Name of Stock Exe	change											
Name of Clearing	Corporation/ Cleari	ng House	e									
Clearing Member	ID											
SEBI Registration	Number											
Trade Name												
CM-BP-ID (to be f	illed up by Participa	ant)										
H) STANDING INS	TRUCTIONS :		,									
1. I/We authorise	you to receive cred	its auton	natically	into my/o	ur a	accou	ınt. l	Yes		No		
2. Account to be o	operated through Po	ower of A	Attorney	(PoA)				Yes		No		
3. SMS Alert facili	ty : [Mandatory if yo	ou are giv	ing Pow	er of Attor	ney	(PoA	A). Ensu	re that tl	he	mob	ile n	umbei
is provided in the	KYC Application For	m]										
Sole/First Holder	🗖 Yes 🗖 No	Second	d Holder	Yes		No	Third I	Holder			es 🕻	🗖 No
4. Mode of receivi	ng the standard docu	ument - R	ights and	d Obligatio	ns							
of Beneficial Ov	vner and Depository	/ Particip	ant (Tick	any one)		🛛 Pł	nysical F	orm E		Elect	roni	ic Form
5. Mode of receiv	ing Statement of Ac	count (Ti	ck any o	ne)		🗖 Pł	nysical F	orm [Elect	roni	ic Form
(Read Note 3 ar	nd ensure that emai	l ID is pro	ovided in	KYC Appli	icati	ion F	orm)					
6. Auto Pledge Co	onfirmation					0	Yes	🗖 No				
7. To receive Ann	ual Reports, AGM N	lotices ar	nd other									
communicatio	ns from Issuers & R	TA in phy	sical for	m		0	Yes	🛛 No				
J) LIST OF FAMILY I	MEMBERS (SEPARAT	E ANNEX	(URE MA	Y BE USED	IN (CASE	NUMBI	ER OF M	ΕN	1BER	IS H	IGHER
SI. Name of No.	Coparcener / Mem	ber	Gender	Date of B	irth		elation h Karta	*Whet Membe				cener/ pecify

* Son, daughter, grandson & grand-daughter will be Co-parceners. Spouse, daughter-in-law will be Members.

DECLARATION

The Rules and Regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by us and we have understood the same and we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. We hereby declare that the details furnished above are true and correct to the best of our knowledge and belief and 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, we are aware that we may be held liable for it. **I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".**

Authorised Signatories (Enclose a Board Resolution for Authorised Signatories. In case of HUF, details of Karta to be given)

Sole/First Holder		Name	Signature(s)
First Signatory / Karta of HUF			1
Second Signatory			1
Third Signatory			1
Other Holders			
Second Holder			1
Third Holder			1
Mode of Operation this is not applicable		e/First Holder (In case of joint holdin	ngs, all the holders must sign. In case of HUF,
Any one singly	,		
Jointly by			
As per resolution	on		
D Others (please	specify)		

NOTES:

- 1. In case of additional signatures, separate annexures should be attached to the application form.
- 2. Thumb impressions and 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.
- 3. For receiving Statement of Account in electronic form:
 - 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.
- 4. Strike off whichever is not applicable.

Option for issuance of DIS booklet alongwith account opening

(to be filled by persons seeking to open a depository account who have given Power of Attorney to operate the depository account to a stock broker/Participant/Portfolio Manager and do not intend to open a Basic Services Demat Account)



CCP CONSORTIUM CAPITAL PVT. LTD.

Name(s) of account holder(s)							
Sole / First Holder							
Second Holder							
Third Holder							

Option for Issue of DIS booklet (please tick any one)

Option 1 D - I/We wish to receive the Delivery Instruction Slip (DIS) booklet with account opening.

Option 2 - I/We do not wish to receive the DIS booklet with account opening. However, the DIS booklet should be issued to me/ us immediately on my/ our request at any later date.

In case of Option 2, mode of receiving Client Master Report and copy of Schedule of Charges **Physical** (Address as mentioned in KYC Form) **Electronic** (E.mail ID as mentioned in KYC Form)

Beneficial Owner	Name	Signature with date
Sole/First Holder		\checkmark
Second Holder		
Third Holder		

SPECIMEN RESOLUTION FOR OPENING A DEMAT ACCOUNT (only for Corporates/Clearing Members) To be submitted on Company's Letter Head

	/ Clearing Member depository account of the company be having its Regd. Office at 22, R. N. Mukherjee Road, 2nd and
Mr. / Mrs	Directors, and Mr. / Mrs.
and Mr. / Mrs	authorised signatories are hereby singly/
jointly authorised to complete all account	opening formalities, issue receipt / delivery instructions,
demat / remat requests, intersettlement tran	nsfer, account closure / shifting / freeze / defreeze requests,
pledge instructions; cancellations of the afor	resaid and all other acts as may be necessary for operations
of the account and a copy of this resolution	n be delivered to Consortium Capital Pvt. Ltd."

AUTHORISATION FOR PROVIDING DP TRANSACTION STATEMENT BY E.MAIL OR ON WEBSITE

То

CONSORTIUM CAPITAL PVT. LTD.

22, R. N. Mukherjee Road, 2nd Floor Kolkata - 700 001

Dear Sir,

With regard to Transaction Statement including Statement of Account :

- 1. I/We understand that, I/We have the option to receive transaction statement by email or on website, in pursuance of the same, I/We hereby opt for receipt of transaction statement (including but not limited to statement of account holding statement or any other communication) through e.mail ______ or on website.
- 2. I/We am/are aware that I/We will not receive the transaction statement in paper form.
- 3. I/We will take all the necessary means to ensure confidentiality and secrecy of the login name and password of the internet/email account.
- 4. I/We am/are aware that the transaction statement may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised, in which case I/we shall not hold you responsible in any manner.
- 5. I/We shall immediately inform the DP about change in email address if any, in case transaction statements are sent by e.mail.
- 6. I/We or You will have the right to terminate this service by giving a 10 days written notice in advance.

Thanking you,

Yours faithfully,

Sole (First) Holder	Second Holder	Third Holder
Place :		Date :
For Official Use Only :		
Signature Verified By :		
Name	Signature	

A MANDATE LETTER FOR HUF (to be signed only by the karta)

То

CONSORTIUM CAPITAL PVT. LTD.

22, R. N. Mukherjee Road, 2nd Floor Kolkata - 700 001

Dear Sir,

I, ________ (Name of Karta) opening a HUF Demat Account with CONSORTIUM CAPITAL PVT. LTD. (DP ID : IN 303727) hereby understand and declare that any cheque drawn in favour of "Karta" can also be collected and submitted to Bank Account in the name of HUF and vice-versa, enabling me to receive refund orders /demand drafts /dividends /interest warrants. This is pursuant to RBI approval in this regard and NSDL Circular No. NSDL/POLICY/2007/0064 dated October 19, 2007 stating the same.

Thanking you,

Yours sincerely

⁽Signature of Karta with HUF Stamp)



CONSORTIUM CAPITAL PVT. LTD.

Regd. Office : 22, R. N. Mukherjee Road, 2nd Floor, Kolkata - 700 001 Phone : 4008-1234, Fax : 2231-1202, E.mail : mail@ccplconnect.com Website : www.ccplconnect.com, CIN : U67190WB2004PTC097912



SEBI REGN. NO. : IN-DP-NSDL-319-2009 * DP ID : IN 303727

SCHEDULE OF CHARGES FOR BENEFICIARY ACCOUNTS

SI.No.	Activity	Charges
1.	Account Opening	Nil
2.	Advance Deposit	Rs.300/-
3.	Account Maintenance - For Individual - For Corporate	Rs.300/- + GST for 1st Quarter & next 3 Quarters free Rs.1000/- + GST for 1st Quarter & next 3 Quarters free
4.	Dematerialisation	Rs.70/- + Rs.2/- per Certificate
5.	Rematerialisation	Rs.15/- for every 100 securities/shares or part thereof or Rs.15/- per Certificate, whichever is higher
6.	Transaction - Buy - Sell	NIL Rs.15/- per Instruction
7.	Custody Charges	NIL
8.	Pledge Creation Charges	Rs.50/- per Instruction
9.	Pledge Creation confirmation / Closure / Closure confirmation / Invocation Charges	NIL
10.	Failed instruction charges	NIL
11.	DIS Book issue charges	Rs.30/- per book
12.	Other Charges, if any	A fee of Rs.15/- per instruction / Maximum Rs.300/- for conversion of Mutual Fund units from Demat to physical. A fee of Rs.15/- per instruction for redemption of Mutual Fund units.

Any other charges incurred by Client, e.g. Demat, Transaction etc.

- Bills will be payable monthly with interest @ 15% p.a. or part thereof for delayed payment.
- ◆ Demat Rejection Charges ₹ 20/-.
- ♦ Cheque Dishonour Charges ₹ 50/-.
- Failed / Rejected Delivery Instructions Charges ₹ 20/-.
- Valuation of Securities will be as per price on the day of transaction.
- Same day transaction Charges ₹ 25/-.
- The above charges supercedes all the earlier communications in this regard.
- The Charges are subject to revision at the DP's sole discretion.
- Courier Charge for DRF mailing, billing will be levied extra.

POLICIES AND PROCEDURES

A. Refusal of orders for penny stocks

The typical "penny stock" is a very small company with highly illiquid and speculative shares. They trade at a relatively low price and market capitalization. The company's policy is to classify the following stocks as "penny" stocks

- a. All stocks having current market price upto Rs.10.
- b. All stocks classified as Illiquid Securities as per Exchanges' circulars from time to time.

An order for penny stock trading may be denied

- 1. If applicable exposure limit / market wide position limit / trading member position limit / client wise position limit will be exceeded.
- 2. If trading debarred / banned by any regulatory authority.
- 3. If trade pattern is objectionable (also includes frivolous, vexatious and malicious)
- 4. If otherwise not permissible under our Risk Management policy / Anti money laundering policy/ any other policy for the time being in force.
- 5. If 100% upfront margin is not paid or the securities are not to be delivered in Demat form.
- 6. If payment of Minimum Processing Charges on Contract Note is not agreed upon.
- 7. Where circumstances appear to justify such action or on reasonable grounds.

We shall not be held liable for restricting / prohibiting trade in penny stocks at any time. Also the Client shall indemnify us in respect of any loss caused to us by virtue of the Client trading in penny stock.

B. Setting up Client's Exposure limit

Clients will be granted turnover and exposure limits on the basis of available deposits being sufficient to cover upfront margin requirements.

- a. Deposits to
 - include margins specifically deposited by the clients
 - include what is withheld from settlement obligations as margin on payout.
 - exclude what is ploughed back from margin to meet settlement obligation on payin.
- b. Deposits may be made available in the form of cash, FDR, BG, Margin pledge of securities / other acceptable collaterals.
- c. In case of cheques, they must come from client's designated bank account only. Depending upon the circumstances, the Risk Manager will be at liberty to give benefit / credit for cheques only on realization of funds.
- d. Haircuts will be applicable on the non cash component (other than Cash / BG/ FDR) of deposits at rates specified by Exchanges from time to time.
- e. Cash and Non cash component (after haircut) of deposits must be maintained in a specified ratio. Any non cash component in excess of specified proportion of cash component will not be reckoned. This specified ratio will depend upon the Credit Rating of the client from Risk Manager.

In case of derivatives, Clients shall be allowed to trade only upto the applicable clientwise position limits set by the Exchanges / Regulators from time to time.

The exposure limits set by Consortium Capital Pvt. Ltd. (CCPL) does not by itself create any right for the Client and are liable to be withdrawn at any time without notice and the client shall bear the loss on account of withdrawal of such limits. The client agrees to compensate CCPL in the event of CCPL suffering any loss, harm or injury on account of exposure given and / or withdrawn.

C. Applicable brokerage rate

- a. Brokerage on option contracts will be charged on the Premium amount.
- b. Brokerage rates not to exceed 2.5% of the contract price exclusive of statutory levies.

MANDATORY

Exclusions:

- o In case of options, brokerage shall not exceed higher of 2.5% of premium amount or Rs. 100 per lot.
- o Where sale / purchase value of a share is Rs.10/- or less, a maximum brokerage of 25 paise per share may be collected.
- c. Brokerage rate will be mutually decided before the onset of trading. Any change in future can only have prospective effect and must be effected in writing.

D. Imposition of Penalty / Delayed Payment Charges

Penalties will be levied on clients for :

- a. A violation by the client of the requirements / stipulations of Exchanges / any Regulatory Authority.
- b. His trading pattern been objectionable (includes disturbing fair price determination in the market or resorting to unfair trade practices).
- c. His suspension of information / providing false information.

Further, any penalty / fine / charge imposed on us by Exchanges / any Regulatory Authority shall be fully recoverable from the client and the client will have to bear the same.

Rs.500 will be collected from clients in addition to actual recovery of Cheque Return Charges.

Any relaxation of the penalty on a client will require the Board's specific approval which may grant the same depending on the circumstances on case to case basis. Any such relaxation in a case no way entitles any client to seek relaxation in the same circumstances, either then or in future.

We are currently charging Delayed Payment charges @ 15% p.a.

Clients to note : Ignorance of law is no excuse at law.

E. Right to sell clients' securities or close clients' positions, without giving notice to the client

Any failure on part of a client to pay the whole of the margin deposit and/or settlement obligation requirements, within the time permitted by the Rules and Regulations of Exchanges/ Regulatory Authorities, will entitle us to, without anynotice to the client :

- 1. Withdraw trading facility from the client.
- 2. Square off / close-out all or any part of outstanding positions of client forthwith or any time thereafter, at our discretion, to the extent possible, by placing at the Exchange, counter orders. Such close-out/ square off shall be limited to the extent of client's margin/ settlement obligations.
- 3. Sale all or any part of client's securities held in CUSA forthwith or any time thereafter at our discretion. Such close out shall be limited to the extent of client's margin / settlement obligations.
- 4. Invoke Margin Pledge.
- 5. Invoke BG / FDRs deposited with us.
- 6. Use other risk containment measures as may be deemed fit and appropriate under the circumstances.
- 7. Impose penalties / delayed payment charges / other disciplinary action fit and appropriate.

Though it will be our sincere effort to timely notify the client of the shortfall and give him reasonable time to make good the shortfall, this is a not a pre-condition to the exercise of the above rights, and the client should be aware of the timelines of meeting obligations himself.

The Risk Manager will consider the credit risk rating of the client and take all or any of above measures in a mannera man of just and reasonable mind would have done under the circumstances. The action shall be final and bindingon the client and any profit / loss shall be borne by the client only.

In case of cheques, they must come from client's designated bank account only. Depending upon the circumstances, the Risk Manager will be at liberty to give benefit / credit for cheques only on realization of funds. He will be exclusivelyguided by a risk containment focus and protection of company's interest. Clients are therefore advised to keepsufficient margins well in advance.

We reserve the above right, however, we are not obliged to close clients' positions / sell clients' securities, and it shallbe the continued responsibility of the client to make payments towards outstanding dues/ obligations and / or applicablemargins to CCPL in time.

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

- a. When a ban of fresh position is in force in any security, no further position is allowed. In case a position has already been inadvertently taken, the existing position may be closed.
- b. In case of non-payment of dues margin (which includes additional margins as and when levied) and settlement obligations (which includes daily MTM settlement of future contracts, final settlement of future contracts, premium settlement of option contracts, and exercise settlement of option contracts after commission, fees, and/or charges).
 - Margin requirement will be computed on a real-time basis.
 - Initial margin component is required on an upfront basis.
 - Depending upon the circumstances, the Risk Manager will be at liberty to give benefit / credit for cheques only on realization of funds.
- c. If we are in close-out mode for any reason / if we are disabled for any reason.
- d. If the trading pattern is objectionable (includes disturbing fair price determination in the market or resorting to unfair trade practices).
- e. In case violation of any directive / regulation/ laws / bye-laws of Exchanges / Other Regulatory Authorities will result or have resulted.
- f. Where the client is unable to provide funds / securities in a manner that can be transferred to the exchange immediately for pay-in / margin obligations.
- g. In the event of death or insolvency of the client or his / its otherwise becoming incapable of receiving / paying for any contracts which the client has ordered to be bought or sold, or of delivering or transferring securities.
- h. On failure to comply with any of the provisions relating to delivery, payment and settlement of deals or any failure to fulfill the terms and conditions subject to which the deal has been made.
- i. If applicable exposure limit / market wide position limit / trading member position limit / client wise position limit will be exceeded or has exceeded.
- j. In case of high market volatility, where the current margins of the clients with us does not cover the value at risk of the client.
- k. If otherwise not permissible under our Risk Management policy / Due diligence policy / Anti money laundering policy/ any other policy for the time being in force.
- I. Where circumstances appear to justify such action or on reasonable grounds.

Besides restricting further trades/ closing existing trades, other measures as may be deemed fit may further be taken.

Any profit / loss on closing out shall be borne by client only.

G. Internal shortages of securities

If securities are not received in our Pool A/c from the selling client before the pay in date but there is no failure to meet securities obligations towards the Exchange, i.e., there is an instance of internal shortage, the following procedure will be adopted.

- 1. There will be a buying-in of shares against the selling client through a "deemed auction" for the benefit of buying client. The buying-in shall be from the market and may be with or without the notice of the client.
- 2. If for any reason whatsoever there couldn't be a buying-in on T+2 day, the shares will be deemed to be closed on T+2 day using the following valuation:

Higher of :

- a. Highest price from the 1st day of the relevant trading period till the date of close out.
- b. Closing price on the auction day (T+2) plus 5%.

The selling client will be debited for "deemed auction" price / "close out" price. In case of close out, the buying client shall be credited for the close-out price.

Any loss of corporate benefit to the buyer of the securities shall be recovered from the defaulting seller's account.

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

A client may give a written request for temporarily suspending/ closing his account. The request will be processed within a maximum of 2 working days from the date of receipt of the request provided:

- a. He doesn't owe us any money across all segments / Exchanges on any account.
- b. There are no outstanding / open positions of the client.

During such suspension, the client will not be in a position to trade with us. The suspension may be revoked by a request in writing from the client. This request will be processed within a maximum of 7 working days from the receipt of the request provided:

- a. He fulfills latest KYC standards applicable then.
- b. He provides any additional information that may be required by us / Regulatory Authorities then.
- c. He has not been debarred from trading by any Authority meanwhile.
- d. His conduct, till date, has been fair, honourable and just.

Notwithstanding any such suspension / closure, all rights, liabilities and obligations of the parties arising out of or in respect of transactions entered into prior to such closure / suspension shall continue to subsist and binding on the client.

I. Deregistering a client

Deregistering a client shall mean complete termination of his trading agreement (irrespective of segment / exchange) with us. Once deregistered, a client will not be entertained back for fresh registration for atleast 1 year.

Deregistration can be initiated on client's specific written request provided full and final settlement of all his accounts with us both for funds and securities have been effected.

Deregistration can also be initiated by us in the following situations :

- 1. He is guilty of breach of terms and conditions of the Member Client Agreement.
- If he is guilty of contravention, non-compliance, disobedience, disregard or evasion of any of the Bye laws, Rules and Regulations of the Exchange / Clearing Corporation / Other Regulatory Authorities or of any of their Resolutions, Orders, Notices, Discretions, decisions or rulings.
- 3. If he is guilty of any conduct, proceeding or method of business which is deemed dishonourable, disgraceful or inconsistent with just and equitable principles or detrimental to the interests of CCPL or prejudicial or subversive to its objects and purposes.
- 4. His financial condition is found to be unsatisfactory to the extent that he cannot be permitted to do business with safety to ourselves.
- 5. He is otherwise not incapacitated to deal in securities / derivatives contracts.

Such deregistration shall not affect our rights against such client to recover any dues against him, i.e., our right as a creditor shall remain unaffected. Also the deregistered client shall be bound to fulfill deals and obligations outstanding at the time of his deregistration.

The above Policies and Procedures are subject to change / updation from time to time. The updated Policies and Procedures shall be posted on the website www.consortiumcapital.co.in. Clients are requested to refer to the updated Policies and Procedures and abide by the same.

AUTHORITY LETTER FOR RUNNING ACCOUNT OF FUNDS

Date : ____

CONSORTIUM CAPITAL PVT. LTD. 22, R. N. Mukherjee Road, 2nd Floor

Kolkata - 700 001

Dear Sir,

- 1. With reference to my/our trading account opened with you, I/we request you to maintain a running account for funds and securities on my/our behalf without settling the account on settlement of each transaction. I/We further request you to retain all amounts and securities receivable by me/us until specifically requested by me/us to be settled within one working day of request, if the same is lying with Consortium Capital Pvt. Ltd. & within 3 working days from the request if the same is lying with clearing member / clearing corporation.
- 2. I/we understand and agree that no interest will be payable to me/us on the funds or securities so retained with you.
- 3. I/we may be trading in derivatives segment & cash segment of various Exchanges and hence have various accounts with you. In this regard I/we hereby authorize Consortium Capital Pvt. Ltd. to act at its discretion of adjusting any credit balance under my/ our various accounts against the debit in any account across segments/Exchange, without taking any further instruction from me/us.
- 4. I/we also confirm that the securities lying in my withhold A/c should be considered as margin deposit / collateral.
- 5. I/we authorize you to set off a part or whole of the margin deposited by me/us against any of my / our dues, by appropriating relevant amount of fund or by sale of securities which form part of margin.
- 6. I/we hereby authorize you to pledge my / our securities deposited as margin or withheld by you as permitted in the running account and to deposit my / our funds deposited as margin to Exchanges / Clearing Corporations towards margin.
- 7. I/we may revoke the authorisation at any time by giving a written notice.
- 8. I/we also agree that the actual settlement of fund and securities shall be done by us, at least once in a quarter or month and the statement of account for the same will be provided to me by Consortium Capital Pvt. Ltd..
- 9. I/we agree that fund given towards collaterals/margins in form of bank guarantee (BG) / Fixed Deposit Receipts (FDR) may not be periodically settled.
- 10. I/we agree that (a) in respect of derivatives market transactions, the Trading Member may retain the requisite securities / funds on settlement date to take care of any margin obligation arising in next 5 days, calculated in the manner specified by the Exchange, and (b) in respect of cash market transactions, the Trading Member may retain entire pay-in obligation of funds & securities due from me/us as on the date of settlement and for next day's business, the Trading Member may retain funds/securities/margin to the extent of value of transactions executed on the day of such settlement.
- 11. I / we authorise you to retain an amount upto ₹ 10,000/- (consolidated amount across segments and across stock exchanges) for actual settlement of that respective traded quarter / month.
- 12. I/we agree/understand that there shall be no inter-client adjustment for the purpose of settlement of the running account.
- 13. There must be a gap of maximum 90 / 30 days (as per the choice of the client viz. Quarterly / Monthly) between two running account settlements.
- 14. Apart from margin liability as on the date of settlement, in all segments, additional margins (maximum upto 125% of margin requirement on the day of settlement), i.e. 225% of the total Margin requirement after excluding the margin on consolidated crystallized obligation, where applicable.
- 15. I/we shall bring any dispute arising from the statement of account or settlement so made to the notice of the Trading Member preferably within 30 working days from the date of receipt of funds/securities or statement as the case may be.

PREFERENCE OF CLIENT FOR SETTLEMENT OF RUNNING ACCOUNT (FUNDS & SECURITIES)				
Settlement Preferences	Monthly	Quarterly		

Thanking you,

Yours truly,

MANDATE TO ISSUE DOCUMENTS IN ELECTRONIC FORMAT

Dated :_____

To CONSORTIUM CAPITAL PVT. LTD. 22, R. N. Mukherjee Road 2nd Floor Kolkata - 700 001

Sir,

Re : Electronic Communication

This has reference to the facility of receiving contract notes and other documents in Electronic form issued by you in compliance with regulations and guidelines issued by SEBI and Stock Exchanges. I / We understand that ECN are valid legal contract notes as per Stock Exchange / SEBI Rules and recognized under Income Tax Act, as well as other Acts in India.

Therefore, the ECN shall be an accepted form of Contract Note to me / us and should be mailed to the following Email ID(s) :

E-mail Id	(a)		\	
	. ,	(Primary - compulsory)		Signature of Client
	(b)		✓	
		(Alternate - optional)		Signature of Client

I / We wish to inform you that I / We would like to avail of this facility. In this regard we state the following :

- 1. This is to further confirm that it will be my / our responsibility that my / our Email ID is active and mail box is not full and the non-receipt of the bounced mail notification at your end shall amount to delivery of the ECN at my / our Email ID.
- 2. I / we undertake to check the ECNs and discrepancy if any shall be brought to your notice within 24 hours of the issuance of contract notes.
- 3. You are authorized to send me / us account statement / other documents / other notices / correspondence periodically through the same channel.
- 4. I / we undertake that any change in my / our Email ID shall be communicated to you in writing through a physical letter.

Kindly take the above into your record and oblige.

Thanking you,

Yours truly,

✓_

Signature of Client

Name :	

Appendix A - Electronic Contract Note [ECN] - DECLARATION (VOLUNTARY)

To CONSORTIUM CAPITAL PVT. LTD.

Member : NSE & BSE

22, R. N. Mukherjee Road, 2nd Floor Kolkata - 700 001

Dear Sir,

Ι.

_____, a client with **Consortium Capital Pvt.**

Ltd., Member of National Stock Exchange of India Ltd. & BSE Limited, undertake as follows:

- I am aware that the Member has to provide physical contract note in respect of all the trades placed by me unless I myself want the same in the electronic form.
- I am aware that the Member has to provide electronic contract note for my convenience on my request only.
- Though the Member is required to deliver physical contract note, I find that it is inconvenient for me to receive physical contract notes. Therefore, I am voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out / ordered by me.
- I have access to a computer and am a regular internet user, having sufficient knowledge of handling the email operations.
- My email id is*_____. This has been created by me and not by someone else.
- I am aware that this declaration form should be in English or in any other language known to me.
- I am aware that non-receipt of bounced mail notification by the member shall amount to delivery of the contract note at the above e-mail ID.

The above declaration and the guidelines on ECN given in the Annexure have been read and understood by me. I am aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same. *(The email id must be written in own handwriting of the client.)

Client Name :	
Unique Client Code :	_PAN :
Address :	
Signature of the client :	
Date :	Place :
Verification of the client signature done by :	
Name of the designated officer of Consortium Capital	Pvt. Ltd

For Consortium Capital Pvt. Ltd.

To CONSORTIUM CAPITAL PVT. LTD. 22 B. N. Mukheriee Boad, 2nd Floor

22, R. N. Mukherjee Road, 2nd Floor Kolkata - 700 001

Dear Sir,

Subject : My/Our request for trading in commodity forward contracts/ commodity derivatives on NSE & BSE as your client

I/We, the undersigned, have taken cognizance of NSE & BSE Circulars and Guidelines on the guidelines for calculation of net open positions permitted in any commodity and I/we hereby undertake to comply with the same.

I/We hereby declare and undertake that we will not exceed the position limits prescribed from time to time by NSE, BSE or SEBI and such position limits will be calculated in accordance with the contents of above stated circulars of NSE & BSE as modified from time to time.

I/We undertake to inform you and keep you informed if I/any of our partners/directors/karta/trustee or any of the partnership firms/companies/HUFs/ Trusts in which I or any of above such person is a partner/ director/karta/trustee, takes or holds any position in any commodity forward contract/commodity derivative on NSE / BSE through you or through any other member(s) of NSE / BSE, to enable you to restrict our position limit as prescribed by the above referred circulars of NSE / BSE as modified from time to time.

I/We confirm that you have agreed to enter orders in commodity forward contracts/commodity derivatives for me/us as your clients on NSE / BSE only on the basis of our above assurances and undertaking.

Thanking You,

Yours faithfully,

Date : _____

To CONSORTIUM CAPITAL PVT. LTD.

22, R. N. Mukherjee Road, 2nd Floor Kolkata - 700 001

Dear Sir,

Sub: Registration for Commodity Options

I/We, Mr		Client Code	intend to
trade in Commodity	options subject to regulator	y requirement of the exchange and SEE	31 from time to time.

I/We further confirm having read and understood the contents of additional Risk Disclosure Documents. I/We have also been informed that the standard set of documents has been displayed for information on Member's designated website, if any.

We confirm that you have agreed to enter orders in commodity options for me/us as your client on NSE / BSE only on the basis of our above undertaking.

Thanking You,

Yours faithfully,

Additional Mandatory clauses in terms of SEBI, RBI, NSE, BSE & NSDL Act, Rules, Regulations, Circulars & Guidelines and Prevention of Money Laundering Act, 2002.

1. CLIENT INFORMATION

In addition to the information given in the Client Registration Form and supporting documents / proof submitted, it is the responsibility of the Client to ensure that, any change in the Client Registration Form or information provided to CCPL by the Client, is updated immediately, in writing, by providing the relevant proofs / documents.

Additionally, if any statutory authority seek information / documents about the Client, Consortium Capital Pvt. Ltd. (CCPL) shall provide the same with or without informing the Client. CCPL, may from time to time, seek additional documents / information, to fulfil its regulatory responsibility and the Client shall provide the same immediately. Failure to provide such information may result in CCPL taking appropriate action as it may deem fit.

In case the Client fails to update such change in the Client Registration Form information or fails to provide the information sought for by CCPL, CCPL, at its discretion, may decide on the appropriate course of action, including but not limited to refusal of further transactions of the Clients. The Client shall not hold CCPL responsible for any consequential loss or damage and shall indemnify CCPL from the same.

2. FUNDS / SECURITIES

CCPL will receive funds / securities and / or disburse funds / securities only from / to the bank account / demat account given by the Client in the Client Registration. CCPL reserves the right not to accept funds / securities from any other bank / demat account and also payments made through demand draft / pay order / cash. The Client shall not hold CCPL responsible for any consequential loss and / or damage and / or claims and will indemnify CCPL from such consequential claims and / or damage and / or loss.

Third Party Payments : CCPL reserves the right not to accept payments from bank account not mentioned in the KYC/ updated in the CLIENT DATABASE maintained with CCPL. However, if, due to oversight CCPL has accepted any such third party payments and credits for the same are given in the Client, CCPL will reverse the credit immediately on discovering the same. Client shall not hold CCPL responsible for any consequential loss or damage and shall indemnify CCPL from the same.

Third Party Delivery of Securities : CCPL reserves the right to accept deliveries only from such demat account where the Client is the sole / first holder and the same is mentioned in the KYC and / or updated in the Client database maintained with CCPL. However, if, due to oversight, CCPL has accepted any third party deliveries, the same shall be rectified in the manner deemed fit by CCPL. The Client shall not hold CCPL responsible for any consequential loss or damage and shall indemnify CCPL from the same.

3. RISK PROFILING OF THE CLIENT

CCPL will based on its risk management policy give exposure, equivalent to a pre-determined multiple / times of the net credit balance in the ledgers (across all segments), the value collaterals given by the Client (after applying appropriate hair cut), track record of the Client market conditions and / or regulatory directives and thus may vary from Client to Client. CCPL reserves the right not to allow transactions in respect of certain Securities or Segments or orders / requests below and above certain value / quantity, as may be notified by CCPL from time to time.

4. RISK MANAGEMENT POLICY

All the Client trades will be as per the Risk Management Policy, including but not limited to, exposure available to the Clients, collaterals accepted and its valuation after appropriate haircuts, square offs, applicable margins and payment of same, restriction in trading in certain stocks, etc. Summary of the risk management policy is enclosed along with this registration kit. The details in available in the Website.

5. INFORMATION THROUGH SMS / E.MAIL

CCPL is authorised to send consolidated summary of Client's scrip-wise buy and sell positions taken with average rates to the client by way of SMS / e.mail on a daily basis, nothwithstanding any other document to be disseminated as specified by SEBI from time to time.

I understand, accept and agree to comply with the above.

ELECTRONIC PAY OUT REQUEST

Date : _____

To CONSORTIUM CAPITAL PVT. LTD. (CCPL) 22, R. N. Mukherjee Road 2nd Floor Kolkata - 700 001

Dear Sir,

I/We furnish below the details of my Bank Account to enable the transfer of funds payable to me/us against sale of securities / Credit Balances in my account.

Bank :	Branch :	
Type of Account : D Savings	Current INRE INRO Others (Specify)	
A/c. No. :	MICR No. :	
IFSC CODE(RTGS/NEFT) :		

Copy of cheque must be enclosed.

Name of Joint Account Holder (if any) :_____

I/We hereby declare that the particulars mentioned above are correct, complete and true and I/we request CCPL to transfer the funds against payments due to me into the above mentioned Bank Account until any other instruction is given by me/us. It is also agreed by me/us that the above facility is being provided to me/us by CCPL at my request and it can be discontinued/withdrawn by CCPL at its discretion at any point of time, as and when required without prior notice.

- 1. The transfer of funds to my/our bank account will continue to be governed by the terms and conditions as per my declaration to CCPL.
- 2. I/We shall review, upon receipt, all transfers of funds made into the aforesaid bank account. In case fund payment is not received in my/our account on the scheduled date then I/We will notify the same to CCPL within two days, failing which it shall be assumed that the funds have been credited to my account and CCPL shall not be liable in any manner thereafter for the same.
- 3. If the transaction is delayed or not effected at all for incomplete or incorrect information provided by me/us, I/we would not hold CCPL responsible and hereby indemnify CCPL from any losses or damages there from.
- 4. All charges levied by Bank for the said facility shall be borne by me/us.
- 5. I/We hereby advised to keep these instructions in force unless specifically informed by me/us in writing.

Thanking you,

Yours truly,

✓_____ Signature of the Client

CONSENT LETTER FOR RECEIVING ALERTS, TRADING / RESEARCH CALLS, REPORTS, NEWS ETC. ON MOBILE

Date : _____

To CONSORTIUM CAPITAL PVT. LTD. (CCPL) 22, R. N. Mukherjee Road 2nd Floor Kolkata - 700 001

Dear Sir,

I do hereby declare that my Mobile Numbers are (1)______. (2)_______. Further, I authorize CCPL that the same may be used for giving me any information / reports / news / live updates / alerts / sms / research calls.

Or

We, ______ do hereby declare that Mr. ______ having mobile number _______ is authorized on our behalf to receive any information / reports / news / live updates / alerts / sms / research calls on our behalf.

I/We undertake to CCPL and confirm to use my/our own judgement in taking a call and execute trade in the identified securities according to my/our financial strength/capabilities and shall not hold CCPL responsible for any loss suffered by me/us on account of executing or omitting to execute any trades in pursuance of the SMS alerts and/or investment advises sent by CCPL. I/We further declare that the above mentioned statement is true and correct.

Thanking you,

Yours truly,

✓_____ Signature of the Client

CONSENT LETTER FOR EMAIL AND MOBILE ALERT FACILITIES

Dated :_____

To **CONSORTIUM CAPITAL PVT. LTD.** 22, R. N. Mukherjee Road 2nd Floor Kolkata - 700 001

Sir,

This is with reference to my/our trading account opened with you. I/we request you to arrange facility of receiving email and/or mobile alert facility issued by Exchange in compliance with regulation and guidelines, issued by concerned authorities from time to time.

Email Facility	Service Required - YES D NO D
Email ID	
Owned by - Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	\checkmark
SMS Facility	Service Required - YES D NO D
Mobile Number	
Owned by - Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	\checkmark

* Please specify the Name and PAN detail in case email id and/or Mobile Number is other than that of the client.

In this regards we state the following :

- 1. This is to further confirm that it will be my/our responsibility that my/our Email ID and/or Mobile Number are active and the relevant Inbox is not full. Further, the trading member will not be held liable for the mails and / or SMS alert not received.
- 2. I/we undertake that any change in my/our Email ID and/or Mobile Number shall be communicated to you in writing through a physical letter.
- 3. I/we agree that this authority shall be valid, until it is revoked by me/us at any time by giving a written notice to Consortium Capital Pvt. Ltd.

✓_____ Signature of Client

NSE - MFSS Facility

Date :

To **CONSORTIUM CAPITAL PVT. LTD.** 22, R. N. Mukherjee Road 2nd Floor Kolkata - 700 001

Sub : Mutual Fund Service System (MFSS) Facility

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

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

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

I/we am/are willing to abide by the terms and conditions as mentioned in the Circular dated 24 November 2009 and as may be specified by the Exchange from time to time in this regard.

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

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

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

Thanking You,

Yours faithfully,

Signature of the Client

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

- 1. Pre-requisites for becoming Investor/Client for the New MFSS facility
 - 1.1. The Client who is desirous of investing in units of mutual fund schemes through the New MFSS.
 - 1.2. The Client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the Participant of the New MFSS.
 - 1.3. The Client has satisfied itself of the capacity of the Participant to deal in Mutual Fund units and wishes to execute its instruction through the Participant and the client shall from time to time continue to satisfy itself of such capability of the Participant before executing transaction through the Participant.
 - 1.4. The Client has approached to the Participant with the application for availing the New MFSS facility.
 - 1.5. The Client has submitted relevant KYC (Know Your Client) details to the Participants.
- 2. Terms and Conditions
 - 2.1. The Client shall be bound by circulars issued by NSEIL, Rules, Regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
 - 2.2. The Client shall notify the Participant in writing if there is any change in the information in the client registration form' provided by the client to the Participant at the time registering as a client for participating in the New MFSS or at any time thereafter.
 - 2.3. The Client shall submit to the Participant a completed application form in the manner prescribed formatfor the purpose of placing a subscription order with the Participant.
 - 2.4. The Client has read and understood the risks involved in investing in Mutual Fund Schemes.
 - 2.5. The Client shall be wholly responsible for all his investment decisions and instruction.
 - 2.6. The Client shall ensure continuous compliance with the requirements of the NSEIL, SEBI and AMFI.
 - 2.7. The Client shall pay to the Participant fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant renders to the Client.
 - 2.8. The Client will furnish information to the Participant in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
 - 2.9. In the event of non-performance of the obligation by the Participant, the Client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL or NSCCL.
 - 2.10. In case of any dispute between the Participants and the investors arising out of the MFSS facility, NSEIL and /or NSCCL agrees to extend the necessary support for the speedy redressal of the disputes.

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Signature ✓

Voluntary information provided by the client in relation to the Prevention of Money Laundering Act, 2002

۲<u>_____</u>

Name of the Client

If Business / Profession : Nature of business :

Industrv

Details of my/our Relatives, having account with Consortium Capital Pvt. Ltd. :

:

Name	Relationship	UCC (Client Code)
1.		
2.		
3.		
4.		

Details of the Corporate / Partnership Firm / Trust etc. where I/We am/are affiliated

Name	Entity Type	Nature of Business	Relationship	UCC (Client Code)
1.				
2.				
3.				
4.				

I/We hereby submit and agree to submit every year following documents to Consortium Capital Pvt. Ltd., before the due date as prescribed by Consortium Capital Pvt. Ltd. :

1. Profit and Loss Account & Capital Account

- 2. Balance Sheet
- 3. Self attested copy of Income Tax Return (If return not available, I/we will furnish Form 16)
- 4. Copy of Form 16 in case of Salary Income
- 5. Any other document providing financial details of the client

I/We confirm that I/We will immediately inform Consortium Capital Pvt. Ltd. in case I/We am/are convicted under any grounds or any action is taken against me/us by any authority(ies).

I/We intend to invest in the stock market with : Own Funds Borrowed Funds (If Borrowed Funds, then please specify below Sources of funds :)

Sources of Borrowed Funds (if any)	Amount (₹)

I/We hereby declare that I/We am/are beneficial owner of the Trading / On-line account opened with Consortium Capital Pvt. Ltd., and that I/We am/are investing mv/our own funds with Consortium Capital Pvt. Ltd.

Client Signature	Client's Name		
	For Office use only :		
Risk categorisation of clie	nt as per PMLA, 2002 : High Risk	□ Medium Risk	□ Low Risk
Verified by :			
Authorised & Approved by	:		
VOLUNTARY	40		

FORMAT OF BOARD RESOLUTION IN CASE OF CORPORATES

CERTIFIED TRUE COPY O	F THE RESOLUTION	PASSED AT	THE	MEETING	OF THE BO	ARD OF	DIRECTO	RS OF
						Ltd. AN	ID HAVIN	IG ITS
REGISTERED OFFICE AT _							HE	LD ON
	DAY OF		200	AT	A.M./P.M			

RESOLVED THAT the Company be registered as Client with Consortium Capital Pvt. Ltd., Member of National Stock Exchange of India Ltd. (NSE) and BSE Limited (BSE) for the purpose of dealing in Cash Segment, F&O Segment, Currency Derivatives Segment, Commodity Segment or any other segment and the said Member be and is hereby authorised to honour instruction oral or written, given on behalf of the Company by any of the under noted authorised signatories :-

SI. No.	Name	Designation
1.		
2.		
3.		

who are authorised to sell, purchase, transfer, endorse, negotiate and/or otherwise deal with/through deal through Consortium Capital Pvt. Ltd. on behalf of the Company.

RESOLVED FURTHER THAT Mr. _____ Directors and / or Mr. _____ Directors and / or Mr. _____ Authorised Signatory of the Company be and are hereby authorised to sign, execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may deemed necessary or expedient to open account and give effect to this resolution.

AND RESOVED FURTHER THAT, the Common Seal of the Company be affixed, wherever necessary, in the presence of any Directors or of any one Director and Company Secretary, who shall sign the same in token of their presence."

For _____Ltd.

Chairman/Company Seceratary

Specimen Signatures of the Authorised Persons

The above signatures to be attested by the persons signing the resolution for account opening on behalf of the Company.

DECLARATION OF ULTIMATE BENEFICIAL OWNERSHIP

(Mandatory For Non-Individuals)

Investor Name

PAN

Part I - LISTED COMPANY / ITS SUBSIDIARY COMPANY [If applicable, Part II Not Applicable]

We hereby declare that the Applicant/ Owner of the controlling interest in the applicant

is a Company listed on a Stock Exchange

is a majority-owned subsidiary of a Company listed on a Stock Exchange Name of the holding/ parent company (with % share)_____

Name of such Listed Company (if not the Applicant itself)____

Stock Exchange where listed

Security ISIN

Part II - OTHER THAN LISTED COMPANY / ITS SUBSIDIARY COMPANY

Name & Address of the Ultimate Beneficial Owner [UBO]	PAN or any other identification proof where PAN not applicable	oriax	% of beneficial interest in the Applicant	Whether Politically Exposed?	UBO Code (see instruction next page)
(1)					
(2)					
(3)					

If UBO is already KYC compliant, KYC complied proof to be enclosed. Else PAN or any other valid identity proof and address proof must be attached (self certified by the UBO and certified by the Applicant)

Part III - DECLARATION

We understand that Consortium Capital Pvt. Ltd. is relying on this information for the purpose of determining the beneficial ownership	
of the account. We certify that the information we provided on this form is true and complete to the best of our knowledge and belief. We agree to submit a new form within 30 days if any information or certification on this form gets changed.	Authorised Signatory [with seal] Date : Place :

In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit. 42

GENERAL INFORMATION & INSTRUCTIONS

As per SEBI Master Circular No. CIR/ISD/AML/3/2010 dated December 31, 2010 regarding Client Due Diligence policy, related circulars on anti-money laundering and SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

Ultimate Beneficiary Owner [UBO]:

A. For Investors other than individuals or trusts:

- (i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:
 - more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company:
 - more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership;
 - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

B. For Investors which is a trust:

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

C. Exemption in case of listed companies/foreign investors

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/ MIRSD/ 11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client.

UBO Code Description

• UBO-1 : Controlling ownership interest of more than 25% of shares or capital or profits of the Applicant, where the Applicant is a company • UBO-2 : Controlling ownership interest of more than 15% of the capital or profits of the Applicant, where the Applicant is a partnership • UBO-3 : Controlling ownership interest of more than 15% of the property or capital or profits of the Applicant, where the Applicant, where the Applicant is an unincorporated association or body of individuals • UBO-4 : Natural person exercising control over the Applicant through other means i.e., exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under UBO-1 to UBO-3 above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests] • UBO-5 : Natural person who holds the position of senior managing official [In case no natural person could be identified as above] • UBO-6 :The settler(s) of the trust • UBO-7 :Trustee(s) of the Trust • UBO-8 :The Protector(s) of the Trust [if applicable]. • UBO-9 :The beneficiaries with 15% or more interest in the trust if they are natural person(s) • UBO-10 : Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership.

FATCA/CRS DECLARATION FORM - FOR INDIVIDUAL

Applicant Name

PART I - Please fill in the country for each of the following :

- 1. Country of :
 - a) Birth b) Citizenship

- Residence for Tax Purposes C)
- US Person* : □ Yes □ No 2

PART II - Please note :

- If in all fields above, the country mentioned by you is India and if you do not have US person status, please proceed a. to Part III for signature.
- If for any of the above field, the country mentioned by you is not India and/or if your US person status is Yes, please provide b. the Tax Payer Identification Number (TIN) or functional equivalent** as issued in the specific country in the table below :
 - i) TIN Country of Issue
 - TIN ii) Country of Issue
 - iii) TIN Country of Issue
- In case any of the parameters in Part I indicates that you are a US person or a person resident outside of India for tax a. purpose and you do not have Taxpaver Identification Numbers/functional equivalent, please complete and sign the Self-Certification section given in Part IV.
- In case you are declaring US person status as 'No' but your Country of Birth is US, please provide document h evidencing Relinguishment of Citizenship. If not available provide reasons for not having relinguishment certificate

Please also fill Part IV Self-Certification.

PART III - Customer Declaration (Applicable for all customers)

- Under penalty of perjury, I/we certify that : (i)
 - The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") 1. or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person)
 - The applicant is an applicant taxable as a tax resident under the laws of country outside India. (This clause is 2. applicable only if the account holder is a tax resident outside of India)
- I/We understand that Consortium Capital Pvt. Ltd. is relying on this information for the purpose of determining the (ii) status of the applicant named above in compliance with FATCA/CRS. Consortium Capital Pvt. Ltd. is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- (iv) I/We agree that as may be required by domestic regulators/tax authorities Consortium Capital Pvt. Ltd. may also be required to report, reportable details to CBDT or close or suspend my account.
- (v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Signature :	
Name :	Date (DD/MM/YYYY) :

PART IV - Self-Certification :

To be filled only if-

- (a) Name of the country in Part I is other than India and TIN or functional equivalent is not available, or
- (b) US person is mentioned as Yes in Part I, and TIN is not available

I confirm that I am neither a US person nor a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India. Therefore, I am providing the following document as proof of my citizenship and residency in India.

Signature

Document Proof submitted (Please tick document being submitted)

□ Passport □ Election Id Card □ PAN Card □ Driving License □ UIDAI Letter □ NREGA Job Card □ Govt. Issued ID Card

* U.S. Person means,

- (a) an individual, being a citizen or resident of the United States of America;
- (b) a partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;
- (c) a trust if,-
 - (i) a court within the United States of America would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust; and
 - (ii) one or more U.S. persons have the authority to control all substantial decisions of the trust; or
- (d) an estate of a decedent who was a citizen or resident of the United States of America;

** Functional Equivalent of TIN

Many countries do not issue TIN to their taxpayers. However, such countries issue some other high integrity number with an equivalent level of identification (a functional equivalent). Examples of such numbers are-

- Social Security Number
- National Insurance Number
- Citizen Or Personal Identification Code Or Number
- Resident Registration Number

FATCA/CRS DECLARATION FORM - FOR NON-INDIVIDUAL

Applicant Name___

PART I

A. Is the account holder a Government body/International Organization/listed company on recognized stock exchange:

□ Yes □ No

If "No", then proceed to point B. If "yes" please specify name of stock exchange, if you are listed company _______ and proceed to sign the declaration.

- B. Is the account holder a (Entity/Financial Institution) tax resident of any country other than India : □ Yes □ No If "yes", then please fill of FATCA/ CRS Self certification Form. If "No", proceed to point C.
- C. Is the account holder an Indian Financial Institution :
 Yes No
 - If "yes", please provide your GIIN, if any _____. If "No", proceed to point D.
- D. Are the Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian citizen : D Yes D No

If "yes", (then please fill FATCA/ CRS self-certification form)). If "No", proceed to sign the declaration.

CUSTOMER DECLARATION

() Under penalty of perjury, I/we certify that :

- 1. The applicant is:
 - (i) An applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District to Columbia or any other states of the U.S.,
 - (ii) An estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person)
- 2. The applicant is an applicant taxable as a tax resident under the laws of country outside India.
 - (i) I/We understand that Consortium Capital Pvt. Ltd. is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. Consortium Capital Pvt. Ltd. is not able to offer any tax advice on FATCA/CRS or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
 - (ii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
 - (iii) I/We agree that as may be required by domestic regulators/tax authorities Consortium Capital Pvt. Ltd. may also be required to report, reportable details to CBDT or close or suspend my account.
 - (iv) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Name of the Entity	
Signature 1	Signature 2
Signature 3	(As per MOP)
Date :	

PART II

Self-Certification Form	(Entity) for Foreign	Account Tax Complianc	e Act ("FATCA") and Co	mmon Reporting Standard	ls(CRS)
					/

Sectio	n 1 : Entity inf	forn	nation	
Name of	f Entity			
Custome	er id (if existing)			_Entity Constitution Type
Entity Id	lentification type :		Tax Identification Number (TIN) 🗖 US GIIN 🗖 Company Identification Number
			Global Entity Identification Nun	nber (EIN) 🗖 Other
Entity Ide	entification No			
Entity Id	lentification issuing	<u></u> ςοι	untryCour	ntry of Residence for tax purpose
Sectio	n 2 : Classific	atic	on of Non-Financial entiti	es
I/We (or	n behalf of the enti	ity) c	ertify that the entity is:	
a) An	entity incorporate	d an	d taxable in US (Specified US p	erson) : 🗖 Yes 🗖 No
lf "Y	Yes", please provid	le yo	ur U.S. Taxpayer Identification No	umber (TIN)
b) An	entity incorporate	d an	d taxable outside of India (other	than US) : DYes DNo
lf")	Yes", please provid	le yo	ur TIN or its functional equivalent	
Pro	ovide your TIN issu	ing c	country	
c) Ple	ease provide the fo	ollow	ing additional details if you are i	not a Specified US Person :
FA	TCA / CRS classi	ifica	tion for Non-financial entities	(NFFE)
	Active NFFE		Passive NFFE without any contr	olling Person
	Passive NFFE wi	th C	ontrolling Person(s): US	Others
	Direct Reporting	NFF	E (Choose this if any entity has	registered itself for direct reporting for FATCA and thus
	Consortium Capit	tal P	vt. Ltd. is not required to do the	reporting)
Ple	ase provide GIIN n	umb	er:	
Sectio	n 3 : Classific	atic	on of financial institution	s (including Banks)
I/We (or	n behalf of the enti	ity) c	ertify that the entity is :	
a. An	entity is a U.S. fin	anci	al institution : DYes DNo	
lf "	Yes", (i) Please p	rovic	de your Taxpayer Identification N	Jumber (TIN)
	(ii) Please pr	rovid	e GIIN, if any	
lf "l	<i>No", please</i> tick or	ne of	the following boxes below :	
FA	TCA classificatio	n		Please provide the Global Intermediary Identification number (GIIN) or other information where
			nancial Institution in a Model 1 greement ("IGA") Jurisdiction	
	Reporting Foreign	n Fir	nancial Institution in a Model 2	
	Participating FFI	in a	Non-IGA Jurisdiction	
	Non-reporting FI			
	Non-Participating	j Fl		
	Owner-Document	ted F	-I with specified US owners	

Section 4 : Controlling person declaration

If you are classified as "Passive NFFE with Controlling Person(s)" or "Owner documented FFI" or "Specified US	
person", please provide the following details:	

Name of controlling p	person Correspondence Address		Country of residence for tax purpose	TIN	TIN issuing country	Controlling person type	
Details	Control	ling person 1	Controlling person	2Controlling pe	rson 3Controll	ing person 4Cor	Itrolling person 5
Identification Type							
Identification Number							
Occupation Type							
Occupation							
Birth Date							
Nationality							
Country of Birth							

Section 5 : Declaration

- (i) Under penalty of perjury, I/we certify that :
 - 1. The number shown on this form is the correct taxpayer identification number of the applicant, and
 - 2. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof, or
 - 3. The applicant Is an applicant taxable as a tax resident under the laws of country outside India.
- (ii) I/We understand that Consortium Capital Pvt. Ltd. is relying on this information for the purpose of determining the status of the applicant named above in compliance with CRS/FATCA. Consortium Capital Pvt. Ltd. is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form gets changed.
- (iv) I/ We agree as may be required by Regulatory authorities, Consortium Capital Pvt. Ltd. shall be required to comply to report, reportable details to CBDT or close or suspend my account.
- (v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct and complete including the tax payer identification number of the applicant.

I/We hereby confirm that details provided are accurate, correct and complete

Authorized Signatories a	nd Company	Seal (if	applicable)
Name			

ANTI-MONEY LAUNDERING (AML) – COMBATING FINANCING OF TERRORISM (CFT) WHAT YOU MUST KNOW – FAQS

Help us in preventing money laundering / terrorist financing.......Your assistance really matters us.

Ever wondered why the Broker is asking you certain personal information which has hitherto never been called for? Such information can include documents evidencing source of funds / income tax returns / bank records etc. By providing this information to the Broker, at the time of account opening and subsequently as and when required, you are actually assisting the efforts in prevention of money laundering / terrorist financing. Here are the details, presented in the form of frequently asked questions (FAQs) to let you know how.

What is Money Laundering?

Money Laundering is the process by which criminals attempt to hide and disguise the true origin and ownership of the proceeds of their criminal activities, thereby avoiding prosecution, conviction and confiscation of the criminal funds. The term Money Laundering is also used when the funds are used for terrorist financing, though the origin of the funds may be legitimate.

Money Laundering has acquired a global character that not only threatens security, but also compromises the stability, transparency, and efficiency of financial systems. Money-laundering techniques are becoming more sophisticated and complex with each passing day.

The objective of AML & CFT Program is to prevent financial intermediaries from being used as a tool for the purpose of Money Laundering & terrorist financing and to preserve the integrity of the Financial system.

In response to mounting concern over money laundering, the Financial Action Task Force on money laundering (FATF) was established by the G-7 Summit in Paris in 1989 to develop a co-ordinated international response. One of the first tasks of the FATF was to develop Recommendations, 40 in all, which set out the measures national governments should take to implement effective anti-money laundering programmes.

How much money is laundered per year?

The IMF has stated in 1996 that the aggregate size of money laundering in the world could be somewhere between two and five percent of the world's gross domestic product.

Using 1996 statistics, these percentages would indicate that money laundering ranged between USD 590 billion and USD 1.5 trillion. However it must be said that overall it is absolutely impossible to produce a reliable estimate of the amount of money laundered and therefore the FATF does not publish any figures in this regard.

How is money laundered?

In the initial - or placement - stage of money laundering, the launderer introduces his illegal profits into the financial system. This might be done by breaking up large amounts of cash into less conspicuous smaller sums that are then deposited directly into a bank account, or by purchasing a series of monetary instruments (cheques, money orders, etc.) that are then collected and deposited into accounts at another location.

After the funds have entered the financial system, the second – or layering – stage takes place. In this phase, the launderer engages in a series of conversions or movements of the funds to distance them from their source. The funds might be channelled through the purchase and sales of investment instruments, or the launderer might simply wire the funds through a series of accounts at various banks across the globe. This use of widely scattered accounts for laundering is especially prevalent in those jurisdictions that do not co-operate in anti-money laundering investigations. In some instances, the launderer might disguise the transfers as payments for goods or services, thus giving them a legitimate appearance.

Having successfully processed his criminal profits through the first two phases the launderer then moves them to the third stage – integration – in which the funds re-enter the legitimate economy. The launderer might choose to invest the funds into real estate, luxury assets, or business ventures.

Where does money laundering occur?

Money laundering can occur practically anywhere in the world. Generally, money launderers tend to seek out countries or sectors in which there is a low risk of detection due to weak or ineffective anti-money laundering programmes.

How does money laundering affect business, economic development & society at large?

Money laudering damages the integrity of the financial institution, entire society and undermines democracy and the rule of the law as it rewards corruption and crime.

There is a damping effect on foreign direct investment when a country's commercial and financial sectors are perceived to be subject to the control and influence of organised crime. Fighting money laundering and terrorist financing is therefore a part of creating a business friendly environment which is a precondition for lasting economic development.

The possible social and political costs of money laundering, if left unchecked or dealt with ineffectively, are serious. Organised crime can infiltrate financial institutions, acquire control of large sectors of the economy through investment, or offer bribes to public officials and indeed governments.

The economic and political influence of criminal organisations can weaken the social fabric, collective ethical standards, and ultimately the democratic institutions of society.

How does fighting money laundering help fight crime?

Targeting the money laundering aspect of criminal activity and depriving the criminal of his ill-gotten gains means hitting him where he is vulnerable. Without a usable profit, the criminal activity will not continue.

What should individual governments be doing about it?

A great deal can be done to fight money laundering, and, indeed, many governments have already established comprehensive anti-money laundering regimes. These regimes aim to increase awareness of the phenomenon – both within the government and the private business sector – and then to provide the necessary legal or regulatory tools to the authorities charged with combating the problem.

Some of these tools include making the act of money laundering a crime; giving investigative agencies the authority to trace, seize and ultimately confiscate criminally derived assets; and building the necessary framework for permitting the agencies involved to exchange information among themselves and with counterparts in other countries.

What are Local regulations on AML / CFT?

- a) Prevention of Money Laundering Act,2002 (PMLA) came in to force with effect from July 01,2005 read with the prevention of Money Laundering (Amendment) Act,2009.
- b) SEBI Guidelines on PMLA vide circular issued in January 2006 followed by latest Master circular issued in February 2010.
- c) Exchanges have also issued Guidelines on PMLA to be followed by all registered intermediary.

How is Money Laundering defined under PMLA 2002?

Section 3 of the Prevention of Money Laundering Act (PMLA) 2002 defines the "Offence of Money Laundering" as:

"Whosoever directly or indirectly attempts to indulge or knowingly assists or knowingly is party or is actually involved in any process or activity connected with the **proceeds of crime** and projecting it as untainted property shall be guilty of the offence of money laundering."

"**Proceeds of crime**" has been defined in Section 2 of the PMLA as the property derived or obtained directly or indirectly by any person, as a result of criminal activity relating to a scheduled offence or the value of such property.

"Scheduled Offences", as per section 2 of PMLA, are specified in two parts of the schedule to PMLA. The value involved in offences specified in Part B should be Rs.30 lakhs or more.

Why KYC / AML Policy for Market Intermediary?

SEBI has instructed all Market Intermediary to adopt a KYC / AML Policy

- a) To prevent criminal elements from using the Capital Market for money laundering activities.
- b) To enable the Broker to know / understand the customers and their financial dealings better, which in turn would help the Broker to manage risks prudently.
- c) To put in place appropriate controls for detection and reporting of suspicious activities in accordance with applicable laws / laid down procedures.
- d) To comply with applicable laws and regulatory guidelines.
- e) To take necessary steps to ensure that the concerned staff is adequately trained in KYC / AML procedures.

What are the obligations of Market Intermediary under PMLA 2002?

Section 12 of PML Act 2002, places certain obligations on every banking company, financial institution and market intermediary, which include:

- a) Maintaining a record of prescribed transactions.
- b) Furnishing information of prescribed transactions to the specified authority (Financial Intelligence Unit-India (FIU-IND).
- c) Verifying and maintaining records of the identity of its clients.
- d) Preserving records in respect of a,b,c above, for a period of 10 years from the date of cessation of transactions with the clients.

What is Financial Intelligence Unit-India (FIU-IND)?

FIU-IND is a central, national agency, set up by Government of India on 18th November,2004, responsible for receiving (and as permitted, requesting), analyzing and disseminating to the competent authorities, disclosures of financial information (i) Concerning suspected proceeds of crime and potential financing of terrorism, or (ii) Required by national legislation or regulation, in order to combat money laundering and terrorist financing.

What are the transactions to be reported by Market Intermediary to FIU-IND?

a) All cash transactions of the value of more than Rs.10 lakhs or its equivalent in foreign currency.

b) All series of cash transactions integrally connected to each other, which have been valued below Rs.10 lakhs or its equivalent in foreign currency (excluding individual transactions below Rs.50,000/- in the reporting) where such series of transactions have taken place within a month and the aggregate value of such transactions exceeds Rs.10 lakhs.

- c) Counterfeit currency transactions.
- d) Suspicious transactions.

What are suspicious transactions?

Rule 2(1)(g) of PMLA-2002 defines suspicious transactions as:

A transaction whether or not made in cash which, to a person acting in good faith :

- (a) gives rise to a reasonable ground of suspicion that it may involve the proceeds of crime; or
- (b) appears to be made in circumstances of unusual or unjustified complexity; or
- (c) appears to have no economic rationale or bonafide purpose; or
- (d) gives rise to a reasonable ground of suspicion that it may involve financing of activities relating to terrorism.

SI.No.	AML Measures	Particulars
1	AML Policy	We have in place written policy & procedure as per guidelines issued by SEBI / Exchange
2	Know Your Customer (KYC)	We have in place system for identification of our clients including KYC documentation.
3	Maintenance of Records	We update the client profile on a regular basis.
4	Screening against negative lists	We have in place record maintenance and retention procedures as prescribed. We screen the client database to ensure that it is not held by or linked to anyone included in the specified list.
5	Risk Assessment	We have in place system to place clients into high, medium & low risk category and apply enhanced due diligence for clients that pose a higher risk.
6	Clients of Special Category	We have in place policy to place clients of special category such as persons with political link, non residents, Trusts, NGOs, closely held Companies, etc. in high risk category.
7	Monitoring, Identification & Reporting of Suspicious Transactions	We have in place, systems and procedures for monitoring, detection and reporting of suspicious transactions to the relevant authorities.
8	Audit	We are subject to inspection by SEBI/Exchange. Additionally we are periodically audited by an independent internal auditor that assesses AML policies and procedures too.

POLICY / DECLARATION ON AML / CFL

Filing compliant on SCORES - Easy & Quick

- a. Register on SCORES portal
- b. Mandatory details for filing complaints on SCORES
 - i. Name, PAN, Address, Mobile Number, E-mail ID
- c. Benefits:
 - i. Effective Communication
 - ii. Speedy redressal of the grievances

POWER OF ATTORNEY (Voluntary & Revocable)

This Power of Attorney (POA) is made on this	day ofby
Name	Address
1	
2	
3	

hereunder referred to as Principal/s), in favour of Consortium Capital Pvt. Ltd., incorporated under the Companies Act, 1956 and having its Regd. Office situated at 22, R. N. Mukherjee Road, 2nd Floor, Kolkata - 700 001, and acting through any of its Directors and/or officers duly authorized by it's Board of Directors for the purpose.

Whereas I/we am/are engaged in buying and selling of securities through Consortium Capital Pvt. Ltd. (CCPL), a member of National Stock Exchange of India Ltd. and BSE Limited (bearing SEBI Single Regn. No. INZ000274334) (hereinafter referred to as 'Exchange/s).

And whereas CCPL is a Depository Participant with National Securities Depository Ltd. bearing Depository Participant ID No. IN303727.

And whereas the Client (first named Principal) wishes to avail and/or have availed the services offered by CCPL in their capacity as a member of the Exchanges/s has entered into a member client agreement/s with CCPL for transacting in securities on the Exchange/s in accordance with the provisions of the said agreement/s read with the terms and conditions (Terms) voluntarily agreed with CCPL and for facilitating proper execution of the transactions contemplated in the said agreement/s and the terms, intends to confer on CCPL the authorities and power specified in this Power of Attorney along with the other Principal/s as under.

 To operate my/our Beneficiary Account bearing number ______ with CCPL to debit towards my/our settlement obligations and to transfer the shares either to the Exchanges/s or the Clearing Corporation and to initiate/release/invoke margin pledge on the securities/units in favour of Consortium Capital Pvt. Ltd. to meet my/our Margin obligation in respect of my/our transactions on any recognized stock exchanges and to further give my/our consent to re-pledge the same securities in favour of the Clearing Corporation/Clearing Member."

unt
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- 2. To make application and/or issue instructions for creation/invocation/closure of lien and/or pledge on the securities / units in the above Beneficiary Account of the Principal/s with CCPL on my/our behalf towards margin/settlement obligations in respect of my/our transactions on the Exchanges through CCPL.
- 3. To register this Power of Attorney in the CCPL's Depository system with CCPL.
- 4. Pursuant to my transactions executed by me through CCPL, to show the details or copy of this Power of Attorney with any authorities who are statutorily empowered to seek such information from CCPL.
- 5. To arrange to return to me / us securities that may have been received by CCPL erroneously and/or those securities which CCPL was not entitled to receive from me / us.
- 6. I/we authorize CCPL to send consolidated summary of Client's scrip-wise buy and sell positions taken with average rates to the client by way of SMS/E-mail on a daily basis, provided client has registered his mobile phone number/e-mail id with CCPL, notwithstanding any other document to be disseminated as specified by SEBI from time to time.

. . .

- 7. Pursuant to my/our instruction or instruction of my/our Authorised Representative to do all such acts and things as may be necessary to effect the subscription / purchase / redemption, tendering shares in open offer / Buy-back / Delisting or any other transaction for mutual funds / online Mutual Fund or otherwise of initial public offer / follow on public offer / right issue / or any other like issues and/or investment product for which services are availed from CCPL
- 8. In case of mutual fund units wrongly / erroneously subscribed and delivered in my/our account, CCPL is authorised to automatically transfer the units in their pool / beneficiary / other account without my/our consent.

The Power of Attorney can be revoked by the Client / Principal/s immediately by furnishing a written request to the Corporate Office of CCPL duly acknowledged by CCPL and upon fulfillment of client's obligations pertaining to unsettled transactions and outstanding dues payable to CCPL as per the terms of the services availed by the Client.

All such acts done by CCPL shall be deemed to be acts done by on our behalf and if necessary shall be ratified by us on the instructions of CCPL.

Any dispute arising out of the operations of the Power of Attorney shall be settled as per the bye laws of the concerned Depository/relevant Court/forums in Kolkata.

This document shall be subject to the jurisdiction of the Courts in Kolkata.

In WITNESS WHEREOF, I/we hereunto set and subscribed our respective hands on the day, date and year hereinabove mentioned.

	Name	Signature
Sole/First Holder		\checkmark
Second Holder		\checkmark
Third Holder		\checkmark

Name	Signature
Consortium Capital Pvt. Ltd.	For Consortium Capital Pvt. Ltd.
	Authorised Signatory

Witness		
Name of witness		
Address of witness		
Signature of witness		

Trading Declaration (To be signed by the client)

Date : _____

To CONSORTIUM CAPITAL PVT. LTD. 22, R. N. Mukherjee Road 2nd Floor

Kolkata - 700 001

Dear Sir,

Sub : Trading Declaration for activation of Equity Derivatives and/or Currency Derivatives

Ι,	s/o or w/o or d/o	
ag	ge years, am willing to activate the Equity Derivative y trading account with you and I have submitted an account	ves / Currency Derivatives segment in
In	this regard I submit the following information:	
1.	Financial Details : Annual Income : Rs Tota	al Net-Worth : Rs
2.	2. Investment Objective : D Short Term D Medium Term D Long Term	
3.	. Risk Appetite : 🗖 Low 🗖 Medium 🗖 High	
4.	Whether dealt / experienced in Equity Derivative in the past :	
	YES, Name of the Broker	Years of Experience
	■ NO, Reason to start Trading	
	Signature of the Client ✓	
5.	Whether dealt / experienced in Currency Derivative in the past	
	YES, Name of the Broker	Years of Experience
	NO, Reason to start Trading	
	Signature of the Client ✓	
the	Im well aware of the risk exposure and the pattern that is involved in Equity e same at my own risk. Having understood that investment in securities ar ulimited risk including risk of leveraging and unlimited loss etc. I am decla	nd particularly in Derivatives segment involves

unlimited risk including risk of leveraging and unlimited loss etc., I am declaring that I am well informed of the pattern/risk/ consequences involved in Equity & Derivatives trading. I am willing to activate the Derivative Segment/s in my Trading Account at my own risk and consequences.

Thanking you,

Yours truly,

✓	
Signature of the Client	

Client's Name :_____

PAN_____

Dated	
Dateu	•

From :

To **CONSORTIUM CAPITAL PVT. LTD.** 22, R. N. Mukherjee Road 2nd Floor Kolkata - 700 001

Ref. : Acknowledgement for the receipt of documents

Dear Sir,

This is to acknowledge the receipt of a copy of the duly executed following documents viz.,

- 1. KYC Form D Physical D Electronic
- 2. Rights and Obligations of stock broker, sub-broker and client D Physical D Electronic
- 3. Rights and Obligations of Beneficial Owner and Depository Participant D Physical D Electronic
- 4. Risk Disclosure Document D Physical D Electronic
- 5. Guidance Note D Physical D Electronic
- 6. Policies & Procedures D Physical D Electronic
- 7. Tariff / Brokerage Charge Sheet D Physical D Electronic
- 8. Any other document executed by me as a client D Physical D Electronic

I/we hereby declare that I/we have the full intimation of the trading code and the unique client code allotted to me/us and the email id for the purpose of receiving electronic contract notes and other details in case provided by me/us, has been confirmed by **Consortium Capital Pvt. Ltd.** through their KYC.

Thanking you,

Yours truly,

✓		
Signature	of the Client	

Client Code_	
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