

[For New Accounts]
Option for opening Basic Services Demat Account (BSDA)

To,

CONSORTIUM CAPITAL PVT LTD
DP ID: IN303727
22, R.N. MUKHERJEE ROAD, KOLKATA-700001

Date:

D	D	M	M	Y	Y	Y	Y
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With reference to my / our application for opening a depository account, I/ We request you to open my / our depository account as a BSDA as per the following details:

	Name	PAN							
Sole/First Holder									
Second Holder									
Third Holder									

I/We have read and understood the Securities and Exchange Board of India's guidelines for facility for a BSDA. I/We hereby declare that I/we am/are eligible to open a depository account as a BSDA holder and undertake to comply with the requirements specified by Securities and Exchange Board of India (SEBI) or any such authority for such facility from time to time. I/We also understand that in case I/We at any point of time do not meet the eligibility as a BSDA holder, my / our aforesaid account is liable to be converted to regular account.

1_____2_____3_____

Signature(s) of Account Holder(s)

[For Existing Accounts]
Option for converting regular account into Basic Services Demat Account (BSDA)

To,

CONSORTIUM CAPITAL PVT LTD
DP ID: IN303727
22, R.N. MUKHERJEE ROAD, KOLKATA-700001

Date:

D	D	M	M	Y	Y	Y	Y
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I/ We request you to convert my / our depository account into BSDA as per the following details:

DP ID	I	N							Client ID							
	Name								PAN							
Sole/First Holder																
Second Holder																
Third Holder																

I/We have read and understood the Securities and Exchange Board of India's guidelines for facility for a BSDA. I/We hereby declare that I/we am/are eligible to open a depository account as a BSDA holder and undertake to comply with the requirements specified by Securities and Exchange Board of India (SEBI) or any such authority for such facility from time to time. I/We also understand that in case I/We at any point of time do not meet the eligibility as a BSDA holder, my / our aforesaid account is liable to be converted to regular account.

1_____2_____3_____

Signature(s) of Account Holder(s)