

Account Opening Form

For Individual / Non-Individual

SETHI FINMART PVT. LTD.

Central Depository Services (India) Limited (CDSL) **Depository Participant (DP)**
DP ID: - 12064300 dated 6th April, 2010 **DP SEBI Regn.. No.IN-DP-507-2020**

Regd. Office Address: Gr. Floor, Harrington Mansion, 8, Ho-Chi-Minh Sarani, Kolkata – 700071
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 Mumbai – 400053. Tel. No. +91-22-66952826, 66952827, Fax: +91-22-26347852
Email Id: info@sethifinmart.com, **Website:** www.sethifinmart.com

Compliance Officer: Mr. Vivek Kumar Sethi, Email Id: compliance.sethi@gmail.com,
 Tel. No. 022-66952826 **CIN NO:** U51109WB1993PTC060900

For any grievance/dispute please contact M/s Sethi Finmart Pvt. Ltd. at the above address or
 Email Id – grievance.sethifinmart@gmail.com

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Know Your Client (KYC)
Application Form (For Individuals Only)



CDSL VENTURES LIMITED
Exploring New Horizons

Intermediary
 Logo

Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: _____

Application Type*: New KYC Modification KYC

KYC Mode*: Please Tick (✓)

Normal EKYC OTP EKYC Biometric Online KYC Offline EKYC Digilocker

1. Identity Details (please refer guidelines overleaf)

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Maiden Name+ (if any) _____

Fathers/Spouse's Name* _____

Date of Birth* _____

Gender* Male Female Transgender

Marital Status* Single Married

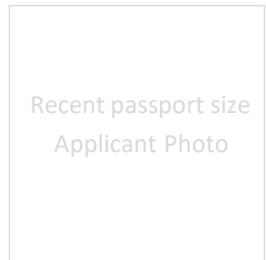
Nationality* Indian Other _____

Residential Status* Resident Individual Non Resident Indian

Foreign National Person of Indian Origin+

Please Tick (✓)

(Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC. Select NRI or Foreign National based on Nationality of the individual)



Cross Signature across photograph

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

A — Aadhaar Card XXXX XXXX _____ (Expiry Date) _____

B — Passport Number _____

C — Voter ID Card _____ (Expiry Date) _____

D — Driving License _____

E — NREGA Job Card _____

F — NPR _____

Z — Others _____ (any document notified by Central Government)

Identification Number _____

2. Address Details* (please refer guidelines overleaf)

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Blank area for stamp or additional information.

Applicant e-SIGN

Blank area for e-signature.

B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)

Line 1* _____

Line 2 _____

Line 3 _____

City/

Town/Village* _____

District* _____

Pin Code* _____

State* _____

Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified**Proof of Address*** (attested copy of any 1 POA for correspondence and permanent address each to be submitted) A — Aadhaar Card XXXX XXXX _____ B — Passport Number _____ (Expiry Date) _____ C — Voter ID Card _____ D — Driving License _____ (Expiry Date) _____ E — NREGA Job Card _____ F — NPR Letter _____ Z — Others _____ (any document notified by Central Government)

Identification Number _____

3. Contact Details (in CAPITAL)

Email ID* _____

Mobile No. * _____

Tel (off) _____ Tel (Res) _____

4. Applicant Declaration

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take 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.

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

DATE: _____ (DD-MM-YYYY)

PLACE: _____

Applicant e-SIGN

Applicant Wet Signature

5. For Office Use Only

In-Person Verification (IPV) carried out by*

Intermediary Details*

IPV Date _____

Emp. Name _____

Emp. Code _____

Emp. Designation _____

 Self certified document copies received (OVD) True Copies of documents received (Attested)

AMC / Intermediary Name :

Employee Signature and Stamp

Institution Name and Stamp

Know Your Client (KYC)**Application Form (For Non- Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked * are pertaining to CKYC and mandatory only if processing CKYC also

**CDSL VENTURES LIMITED**

...Exploring New Horizons

Intermediary
Logo

Application Number: _____

Application Type*: New KYC Modification KYC**1. Entity Details** (please refer guidelines)

PAN* _____

Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Date of Incorporation* _____ Place of Incorporation* _____

Date of Commencement* _____ Registration Number* _____

Entity Type*

Please Tick (✓)

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Private Ltd. Co. | <input type="checkbox"/> Public Ltd. Co. | <input type="checkbox"/> Body Corporate | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Trust/Charity/NGO | <input type="checkbox"/> HUF | <input type="checkbox"/> FPI Category I | <input type="checkbox"/> FPI Category II |
| <input type="checkbox"/> AOP | <input type="checkbox"/> Bank | <input type="checkbox"/> Government Body | <input type="checkbox"/> Defence Establishment |
| <input type="checkbox"/> Body of Individuals | | <input type="checkbox"/> Society | <input type="checkbox"/> LLP |
| <input type="checkbox"/> Non-Government Organization | | | |
| <input type="checkbox"/> Others _____ | | | |

2. Proof of Identity* (please refer the guidelines)

- Officially Valid Document(s) in respect of person authorized to transact
- Certificate of Incorporation/Formation _____ Registration Certificate _____
- Memorandum of Articles and Association Partnership Deed Trust Deed
- Board Resolution Power of attorney granted to its manager, office, employees to transact on its behalf
- Activity Proof –1+ (For Sole Proprietorship Only) Activity Proof –2+ (For Sole Proprietorship Only)

3. Address Details* (please refer the guidelines)**A. Registered Address***

Line 1* _____

Line 2 _____

Line3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

B. Correspondence/Local Address in India (if different from above)*

Line 1* _____

Line 2 _____

Line3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Applicant Digital Signature (DSC)

Proof of Address* (attested copy of any one POA to be submitted—#Not more than 3 months old)

- Certificate of Incorporation/Formation Registration Certificate Other document _____
 Latest Telephone Bill# (Landline only) Latest Electricity Bill# Latest Bank Account Statement#
 Registered Lease/ Sale Agreement of Office Premises **Validity/Expiry Date of POA** (Expiry Date) _____
 Any other proof of address document (as listed overleaf) _____

4. Contact Details

Email ID _____ Mobile No. _____
 Email ID _____ Mobile No. _____
 Tel (off) _____ Fax _____

5. Annexures Submitted

Number of Related Persons -

6. Remarks / Additional Information**7. Applicant Declaration**

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

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

DATE: _____ (DD-MM-YYYY)

PLACE: _____

Applicant Digital Signature (DSC)

Applicant Wet Signature

8. For Office Use Only

KYC carried out by*

Intermediary Details*

KYC Date _____

Emp. Name _____

Emp. Code _____

Emp. Designation _____

 Self certified document copies received (Originals Verified)

 True Copies of documents received (Attested)

AMC / Intermediary Name OR Code:

Employee Signature and Stamp

Employee Signature and Stamp

— This space is intentionally left blank — This space is intentionally left blank — This space is intentionally left blank — This space is intentionally left blank —

Know Your Client (KYC)
Annexure (For Non- Individuals Only)



CDSL VENTURES LIMITED

....Exploring New Horizons

Intermediary
Logo

Please fill the form in ENGLISH and in BLOCK letters
 Fields marked * are mandatory
 Fields marked * are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: _____

Application Type*: New KYC Modification KYC

1. Identity Details of Related Person (please refer guidelines overleaf)

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Maiden Name* (if any) _____

Fathers/Spouse's Name* _____

Date of Birth* _____

Gender* Male Female Transgender

Nationality* Indian Other _____

Related Person Type*
 Director Promoter Karta Trustee Partner Court Appointed Official Proprietor
 Beneficiary Authorized Signatory Beneficial Owner Power of Attorney Holder
 Others _____ (please specify) DIN: _____ (mandatory if the related person is Director)

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

A — Aadhaar Card XXXX XXXX _____

B — Passport Number _____ (Expiry Date) _____

C — Voter ID Card _____

D — Driving License _____ (Expiry Date) _____

E — NREGA Job Card _____

F — NPR _____

Z — Others _____ (any document notified by Central Government)

Identification Number _____



2. Address Details* (please refer guidelines overleaf)

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Applicant e-SIGN

B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified**Proof of Address*** (attested copy of any 1 POA for correspondence and permanent address each to be submitted) A — Aadhaar Card XXXX XXXX _____ B — Passport Number _____ (Expiry Date) _____ C — Voter ID Card _____ D — Driving License _____ (Expiry Date) _____ E — NREGA Job Card _____ F — NPR Letter _____ Z — Others _____ (any document notified by Central Government)

Identification Number _____

3. Contact Details

Email ID _____

Mobile No. _____

Tel (Off) _____ Tel (Res) _____

4. Applicant Declaration

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

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

DATE: _____ (DD-MM-YYYY)

PLACE: _____

Applicant e-SIGN

Applicant Wet Signature

5. For Office Use Only

KYC carried out by*

Intermediary Details*

KYC Date _____

Emp. Name _____

Emp. Code _____

Emp. Designation _____

 Self certified document copies received (OVD) True Copies of documents received (Attested)

Employee Signature and Stamp

Institution Name and Stamp

Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Sr. No.	Name of Applicant PAN	Name	DIN (For Directors) / Aadhaar Number (For Others)	Residential /Registered Address	PAN of the Applicant Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph

Name & Signature of the Authorised Signatory(ies)

Date

Instructions/Guidelines for filling Individual KYC Application Form

A. General Instructions:

1. Self-attestation of documents is mandatory.
2. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per below list mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/ Passport of Minor/Birth Certificate must be provided.
11. Politically exposed persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country e.g., Head of State or of Government, senior politician, senior government/judiciary/military officer, senior executive of state owned corporation, important political party official, etc.

B. Proof of Identity (POI):

1. PAN card with photograph is mandatory for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License / Letter issued by NPR / NREGA job card
3. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
4. Mention identification / reference number if 'Z – Others (any document notified by the central government)' is ticked.
5. Others – Identity card with applicant's photograph issued by any of the following: Central/ State Government 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):

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. Others includes – Utility bill which is not more than 3 months old of any service provider (electricity, landline telephone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India
3. Identity card/document with address issued by any of the following: Central/ State Government 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.
4. Self declaration of High courts/Supreme court judges, giving the new address in respect of their own accounts.
5. For FII/Sub account, Power of attorney given by FII/Sub account to the custodians (which are duly notarized and/or apostilled or consularized) that gives registered address should be taken.
6. Proof of address in name of spouse may be accepted.
7. Registered lease or Sale agreement/ Flat maintenance bill / Insurance copy / Ration card / Latest Property tax
8. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License / Letter issued by NPR / NREGA job card

D. Exemptions/Clarifications to PAN (*Sufficient documentary evidence in support of such claims to be collected)

1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
3. Investors residing in the state of Sikkim.
4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
5. In case of institutional clients, namely FIIs, MFs, VCFs, FVCIs, Scheduled commercial bank, Multilateral and Bilateral development financial institutions, State Industrial development corporations, insurance companies registered with IRDA and public financial institutions as defined under section 4A of the Company Act 1956, custodians shall verify the PAN card details with the original PANs and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

1. Authorized officials of Asset Management Companies (AMCs).
2. Authorized officials of Registrar & Transfer Agent (RTA) acting on behalf of the AMC.
3. KYC compliant mutual fund distributors affiliated to Association of Mutual Funds (AMFI) and have undergone the process of 'Know Your Distributor (KYD)'.
4. Notary Public, Gazette Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/ Consulate General in the country where the client resides are permitted to attest the documents.

F. Online Mode Processing of KYC:

1. EKYC BIOMETRIC
 - Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Applicant details are verified using UIDAI Biometric details.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
 - Intermediary attestation on documents is exempted.
2. EKYC OTP
 - Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Applicant details are verified using UIDAI details using OTP.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
 - Intermediary attestation on documents is exempted.
3. ONLINE KYC
 - Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Virtual In Person Verification (VIPV) is mandatory as per SEBI guidelines.
 - Intermediary attestation on documents (OSV) is exempted.
4. OFFLINE EKYC
 - Applicant may directly upload their document (PAN copy) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Digital KYC performed through Offline Aadhaar e-KYC. OVD sourced from Offline Aadhaar e-KYC.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
5. DIGILOCKER
 - Digital KYC performed through the documents (OVD) sourced from Digilocker.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
 - Intermediary attestation on documents is exempted.

Type of Entity	Additional Documents Required over and above PAN, POI and POA
Corporate	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last to financial years (to be submitted every year). • Copy of latest share-holding pattern including the 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 submitter every year). • Photograph, POI, POA, PAN and DIN number of the whole time Director/ 2 directors in charge of day to day operations. • Photograph, POI, POA, PAN of individual promoters holding control—either directly or indirectly. • Copy of Memorandum and Articles of Association and Certificate of Incorporation. • Copy of Board Resolution for Investment in security markets. • Authorized signatories list with specimen signatures. • Shareholding pattern.
Partnership Firm	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last to financial years (to be submitted every year). • Certificate of Registration (for registered partnership firms only). • Copy of Partnership Deed. • Authorized signatories list with specimen signatures. • Photograph, POI, POA, PAN of Partners. • Shareholding pattern.
Trust	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last to financial years (to be submitted every year). • Certificate of Registration (for registered Trusts only). • Copy of Trust Deed. • List of Trustees certified by Managing Trustees/ CA • Photograph, POI, POA, PAN of Trutees.
HUF	<ul style="list-style-type: none"> • PAN of HUF. • Deed of Declaration of HUF or List of Co-Parceners. • Bank Passbook / Bank statement in the name of HUF. • Photograph, POI, POA, PAN of KARTA.
Banks/Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years • Authorized signatories list with specimen signatures.
Unincorporated Association or a Body of Individuals	<ul style="list-style-type: none"> • Proof of existence or Constitution document. • Resolution of Managing Body and power od Attorney granted to transact business on its behalf.
Army/Government Bodies	<ul style="list-style-type: none"> • Copy of Constitution/Registration or Annual report/Balance Sheet for the last 2 financial years. • Authorized signatories list with specimen signatures.
Army/Government Bodies	<ul style="list-style-type: none"> • Self certification on letterhead. • Authorized signatories list with specimen signatures.
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Society Registration Act. • List of managing committee members. • Committee Resolution for persons authorized to act as authorised signatories with specimen signatures. • True copy of society rules and by-laws certified by Chairman/Secretary.
FPI Category I	<ul style="list-style-type: none"> • FPI Certificate • Constitution Documents • Copy of Board Resolution (optional) • Shareholding pattern and Ultimate Beneficiary Owners List (UBO) • Authorized signatories list with specimen signatures.
FPI Category II	<ul style="list-style-type: none"> • FPI Certificate • Constitution Documents • Copy of Board Resolution • Shareholding pattern and Ultimate Beneficiary Owners List (UBO) with UBO proof of identity • Authorized signatories list with specimen signatures.

ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT – For Individuals

(To be filled by the Depository Participant)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.										
DP ID		BOID								

(To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/ our name as per following details:-

Holder's Details

Sole/First Holder's Name	PAN																		
	UID																		
	UCC																		
Second Holder's Name	EXCHANGE NAME & ID																		
	PAN																		
Third Holder's Name	UID																		

[In case of Minor holder, photograph of guardian has to be affixed along with minor photograph]

Name : _____

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

Types of Account (Please tick whichever is applicable)

Status	Sub- status	
Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual Director Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual Director	<input type="checkbox"/> Individual Margin Trading a/c (Mantra) HUF / AOP <input type="checkbox"/> Minor Others (Specify) _____ <input type="checkbox"/> _____
NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI-Depository Receipt	<input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> NRI Non-Repatriable Promoter Others (Specify) _____
Foreign National	<input type="checkbox"/> Foreign National Others (Specify) _____	Foreign National - Depository Receipts

Details of Guardian (in case the account holder is minor)

Guardian's Name												
PAN											Relationship with the applicant	

I/ We instruct the DP to receive each and every credit in my / our account	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I/ We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
I/ We request you to send Electronic Transaction-cum-Holding Statement at the email ID _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
I/ We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I/ We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	

I/ We wish to receive dividend / interest directly in to my bank account as given below through ECS (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

Bank Details [Dividend Bank Details]												
Bank Code (9 digit MICR code)												
IFS Code(11 character)												
Account number	:											
Account type	:	Saving	Current	Others (specify) _____								
Bank Name	:											
Branch	:											
Bank Branch Address	:											
City	:		State		Country		PIN Code					

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, or) (ii) Photocopy of the Bank Statement having name and address of the BO and not more than 3 months old, (or) (iii) Photocopy of the Passbook having name and address of the BO, (or) (iv) Letter from the Bank.

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

Other Details	
Gross Annual Income Details	Income Range per annum: <input type="checkbox"/> Up to Rs.1,00,000 <input type="checkbox"/> Rs 1,00,000 to Rs 5,00,000 <input type="checkbox"/> Rs 5,00,000 to 10,00,000 <input type="checkbox"/> Rs 10,00,000 to Rs 25,00,000 <input type="checkbox"/> More than Rs 25,00,000 Net worth as on (Date) DDMMYYYY _____ Rs. [Net worth should not be older than 1 year]
Occupation	<input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others (Specify) _____
Please tick , if applicable:	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)
Any other information:	

SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4	MOBILE NO. +91 _____ [(Mandatory , if you are giving Power of Attorney (POA)] (If POA is not granted & you do not wish to avail of this facility, cancel this option).										
<u>Transactions Using Secured Texting Facility (TRUST).</u> <u>Refer to Terms and Conditions Annexure –2.6</u>	I wish to avail the TRUST facility using the Mobile number registered for SMS AlertFacility. I have read and understood the Terms and Conditions prescribed by CDSL for the same . Yes No I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST										
	<table border="1"> <thead> <tr> <th>Stock Exchange Name /ID</th> <th>Clearing Member Name</th> <th>Clearing Member ID</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Stock Exchange Name /ID	Clearing Member Name	Clearing Member ID							
Stock Exchange Name /ID	Clearing Member Name	Clearing Member ID									
Easi	To register for easi, please visit our website www.cdslindia.com. Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.										

EDUCATION QUALIFICATION:

UNDER GRADUATE GRADUATE POST GRADUATE PROFESSIONAL OTHERS

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

Jointly Anyone of the Holder

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

<input type="checkbox"/> <u>first Holder</u>	<input type="checkbox"/> <u>All Holder</u>	<u>Email id</u>
	<input type="checkbox"/> <u>Second Holder</u>	
	<input type="checkbox"/> <u>Third Holder</u>	

I/We have received & read the copy of Rights & Obligation document and terms & conditions & agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First / Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signature			

(Signatures should be preferably in blue ink).

M/s Sethi Finmart Pvt. Ltd.

Director / Authorised Signatories

Nomination Form for Demat Accounts

I / We hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our demise, as trustee and on behalf of my / our legal heir(s) *								
Nomination Details								
	Mandatory Details						Additional Details ****	
	Name of nominee	Share of nominee (%)**	Relation ship	Postal Address	Mobile number & E-mail	Identity Number ***	D.o.B. of nominee	Guardian
Nominee 1								
Nominee 2								
Nominee 3								
Nominee 4								
Nominee 5								
Nominee 6								
Nominee 7								
Nominee 8								
Nominee 9								
Nominee 10								

*Joint Accounts:

Event	Transmission of Account
Demise of one or more joint holder(s)	Surviving holder(s) through name deletion The surviving holder(s) shall inherit the assets as owners.
Demise of all joint holders simultaneously – having nominee	Nominee
Demise of all joint holders simultaneously – not having nominee	Legal heir(s) of the youngest holder

** If % is not specified, then the assets shall be distributed equally amongst all the nominees. Any odd lot after division / fraction of %, shall be transferred to the first nominee mentioned in the nomination form. (see table in 'Transmission aspects').

*** Provide only number: PAN or Driving License or Aadhaar (last 4 digits). Copy of the document is not required. However, in case of NRI / OCI / PIO, Passport number is acceptable.

**** to be furnished only in following conditions / circumstances:

- Date of Birth (DoB): please provide, only if the nominee is minor.
- Guardian: It is optional for you to provide, if the nominee is minor.

1) I / We want the details of my / our nominee to be printed in the statement of holding or statement of account, provided to me/ us by the DP as follows; (please tick, as appropriate)

- Name of nominee(s)
 Nomination: Yes / No

2) I hereby authorize _____ (nominee number ____) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5 of the circular. He / She is authorized to encash my assets up to ____% of assets in the account or Rs. _____. **(Optional)** (strike off portions that are not relevant) This nomination shall supersede any prior nomination made by me / us, if any.

3) Signature(s) – As per the mode of holding in demat account(s)

Name(s) of holder(s)		Signature(s) of holder / thumb impression	Signature of two witnesses*	Name of Witness & Address (wherever applicable) *
Sole / First Holder (Mr./Ms.)				
Second Holder (Mr./Ms.)				
Third Holder (Mr./Ms.)				

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

Rights, Entitlement and Obligation of the investor and nominee:

- If you are opening a new demat account, you have to provide nomination. Otherwise, you have to follow procedure as per 3.10 of this circular.
- You can make nomination or change nominee any number of times without any restriction.
- You are entitled to receive acknowledgement from the DP for each instance of providing or changing nomination.
- Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominees or for each nominee(s) to open separate single account.
- In case all your nominees do not claim the assets from the DP, then the residual unclaimed asset shall continue to be with the concerned Depository in case of Demat account.
- You have the option to designate any one of your nominees to operate your account, in case of your physical incapacitation, at any point of time and not just during opening of account. This mandate can be changed any time you choose.
- The signatories for this nomination form shall be as per mode of holding in the demat account(s) i.e.
 - 'Either or Survivor' Accounts - any one of the holder can sign
 - 'First holder' Accounts - only First holder can sign
 - 'Jointly' Accounts - all holders have to sign

Transmission aspects

- DPs shall transmit the account to the nominee(s) upon receipt of 1) copy of death certificate and 2) completion / updation of KYC of the nominee(s). The nominee is not required to provide affidavits, indemnities, undertakings, attestations or notarization.
- In case of a joint account, for transmission to the surviving joint holder(s) by name deletion, the surviving joint holder(s) shall have the option to update residential address(es), mobile number(s), email address(es), bank account detail(s), annual income and nominee(s), either along with transmission or at a later date. The regulated entity cannot seek KYC documents at the time of transmission, unless it was sought earlier but not provided by the holder.
- Nominee(s) shall extend all possible co-operation to transfer the assets to the legal heir(s) of the deceased investor. In this regard, no dispute shall lie against the DP.

In case of multiple nominees, the assets shall be distributed pro-rata to the surviving nominees, as illustrated below.

% Share as specified by investor at the time of nomination		% assets to be apportioned to surviving nominees upon demise of investor and nominee 'A'			
Nominee	% share	Nominee	% initial share	% of A's share to be apportioned	Total % share
A	60%	A	0	0	0
B	30%	B	30%	45%	75%
C	10%	C	10%	15%	25%
Total	100%	-	40%	60%	100%

Annexure-B

Declaration for opting-out of nomination

To	Date	D	D	M	M	Y	Y	Y	Y
SETHI FINMART PRIVATE LIMITED 218, Laxmi Plaza, 9, Laxmi Industrial Estate, New Link Road, Andheri (W), Mumbai-400053									
UCC/DP ID									
Client ID (only for Demat account)									
Sole/First Holder Name									
Second Holder Name									
Third Holder Name									
I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our MF Folio/ demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our MF Folio / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the MF Folio / demat account.									
Name and Signature of Holder(s)*									
1. _____ 2. _____ 3. _____									

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

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

(To be filled by the Depository Participant)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.										
DP ID										
Client ID										

(To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/ our name as per following details:-

Sole/First Holder's Name	PAN																		
	UID																		
	UCC																		
	EXCHANGE NAME & ID																		
Second Holder's Name	PAN																		
	UID																		
Third Holder's Name	PAN																		
	UID																		

Name *	
<p><i>*In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.</i></p>	

Types of Account (Please tick whichever is applicable)

Status				Sub- status
<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Trust	<input type="checkbox"/> FII	<input type="checkbox"/> Clearing House	To be filled by the DP
<input type="checkbox"/> Bank	<input type="checkbox"/> Mutual Fund	<input type="checkbox"/> CM	<input type="checkbox"/> Others (Specify) _____	
<input type="checkbox"/> OCB	<input type="checkbox"/> FI			
SEBI Registration No. (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	SEBI Registration date	
				D D M M Y Y Y Y
RBI Registration No. (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	RBI Approval date	
				D D M M Y Y Y Y
Nationality	Indian	Others (Specify) _____		

I / We instruct the DP to receive each and every credit in my / our account	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end	Yes No
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Day <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to share the email ID with the RTA	Yes No
I / We would like to receive the Annual Report	Physical / Electronic / Both Physical and Electronic
(Tick the applicable box. If not marked the default option would be in Physical)	

I/ We wish to receive dividend / interest directly in to my bank account given below through ECS (If not marked, the default option would be `Yes") [ECS is mandatory for locations notified by SEBI from time to time]	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

Clearing Member Details (To be filled by CMs only)			
Name of Stock Exchange			
Name of CC / CH			
Clearing Member Id		Trading member ID	

Bank Details [Dividend Bank Details]												
Bank Code (9 digit MICR code)												
IFS Code(11 character)												
Bank Name	:											
Branch	:											
Bank Address	:											
City	:		State		Country		PIN Code					
Account number	:											
Account type	:	Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify) _____										

- i. Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)
- ii. Photocopy of the Bank Statement having name and address of the BO and not more than 3 months old, (or)
- iii. Photocopy of the Passbook having name and address of the BO, (or)
- iv. Letter from the Bank.

In case of option (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document and it should be self-certified by the BO.

SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4	MOBILE NO. +91 _____ [(Mandatory, if you are giving Power of Attorney (POA)] (If POA is not granted & you do not wish to avail of this facility, cancel this option).										
<u>Transactions Using Secure Texting Facility (TRUST).</u> <u>Refer to Terms and Conditions Annexure – 2.6</u>	I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I have read and understood the Terms and Conditions prescribed by CDSL for the same . <input type="checkbox"/> Yes <input type="checkbox"/> No I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST										
	<table border="1"> <thead> <tr> <th>Stock Exchange Name /ID</th> <th>Clearing Member Name</th> <th>Clearing Member ID</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Stock Exchange Name /ID	Clearing Member Name	Clearing Member ID							
Stock Exchange Name /ID	Clearing Member Name	Clearing Member ID									
Easi	To register for easi, please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.										

Other Details	
Gross Annual Income Details	Income Range per annum: <input type="checkbox"/> Up to Rs 1,00,000 <input type="checkbox"/> Rs 1,00,000 to Rs.5,00,000 <input type="checkbox"/> Rs.5,00,000 to Rs. 10,00,000 <input type="checkbox"/> Rs. 10,00,000 to Rs. 25,00,000 <input type="checkbox"/> Rs.25,00,000 to Rs. 1,00,00,000 <input type="checkbox"/> More than Rs.1,00,00,000 Net worth as on (Date) Rs [Net worth should not be older than 1 year]
Please tick , if applicable:	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)
Any other information:	

I/We have received & read the document of Rights & Obligation of BO-DP(DP-CM agreement for BSE clearing Member Accounts) including the schedules thereto and the terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I / We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First / Sole Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Designation			
Signatures			

(Signatures should be preferably in black ink).

(In case of more authorised signatories, please add annexure)

**Rights and Obligations of Beneficial Owner and Depository Participant as prescribed
by SEBI and Depositories**

General Clause

1. The Beneficial Owner and the Depository participant (DP) shall be bound by the provisions of the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996, Rules and Regulations of Securities and Exchange Board of India (SEBI), Circulars/Notifications/Guidelines issued there under, Bye Laws and Business Rules/Operating Instructions issued by the Depositories and relevant notifications of Government Authorities as may be in force from time to time.
2. The DP shall open/activate demat account of a beneficial owner in the depository system only after receipt of complete Account opening form, KYC and supporting documents as specified by SEBI from time to time.

Beneficial Owner information

3. The DP shall maintain all the details of the beneficial owner(s) as mentioned in the account opening form, supporting documents submitted by them and/or any other information pertaining to the beneficial owner confidentially and shall not disclose the same to any person except as required by any statutory, legal or regulatory authority in this regard.
4. The Beneficial Owner shall immediately notify the DP in writing, if there is any change in details provided in the account opening form as submitted to the DP at the time of opening the demat account or furnished to the DP from time to time.

Fees/Charges/Tariff

5. The Beneficial Owner shall pay such charges to the DP for the purpose of holding and transfer of securities in dematerialized form and for availing depository services as may be agreed to from time to time between the DP and the Beneficial Owner as set out in the Tariff Sheet provided by the DP. It may be informed to the Beneficial Owner that "*no charges are payable for opening of demat accounts*"
6. In case of Basic Services Demat Accounts, the DP shall adhere to the charge structure as laid down under the relevant SEBI and/or Depository circulars/directions/notifications issued from time to time.
7. The DP shall not increase any charges/tariff agreed upon unless it has given a notice in writing of not less than thirty days to the Beneficial Owner regarding the same.

Dematerialization

8. The Beneficial Owner shall have the right to get the securities, which have been admitted on the Depositories, dematerialized in the form and manner laid down under the Bye Laws, Business Rules and Operating Instructions of the depositories.

Separate Accounts

9. The DP shall open separate accounts in the name of each of the beneficial owners and securities of each beneficial owner shall be segregated and shall not be mixed up with the securities of other beneficial owners and/or DP's own securities held in dematerialized form.
10. The DP shall not facilitate the Beneficial Owner to create or permit any pledge and /or hypothecation or any other interest or encumbrance over all or any of such securities submitted for dematerialization and/or held in demat account except in the form and manner prescribed in the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996 and Bye-Laws/Operating Instructions/Business Rules of the Depositories.

Transfer of Securities

11. The DP shall effect transfer to and from the demat accounts of the Beneficial Owner only on the basis of an order, instruction, direction or mandate duly authorized by the Beneficial Owner and the DP shall maintain the original documents and the audit trail of such authorizations.
12. The Beneficial Owner reserves the right to give standing instructions with regard to the crediting of securities in his demat account and the DP shall act according to such instructions.
13. "The stock broker / stock broker and depository participant shall not directly / indirectly compel the clients to execute Power of Attorney (PoA) or Demat Debit and Pledge Instruction (DDPI) or deny services to the client if the client refuses to execute PoA or DDPI."

Statement of account

14. The DP shall provide statements of accounts to the beneficial owner in such form and manner and at such time as agreed with the Beneficial Owner and as specified by SEBI/depository in this regard.
15. However, if there is no transaction in the demat account, or if the balance has become Nil during the year, the DP shall send one physical statement of holding annually to such BOs and shall resume sending the transaction statement as and when there is a transaction in the account.
16. The DP may provide the services of issuing the statement of demat accounts in an electronic mode if the Beneficial Owner so desires. The DP will furnish to the Beneficial Owner the statement of demat accounts under its digital signature, as governed under the Information Technology Act, 2000. However if the DP does not have the facility of providing the statement of demat account in the electronic mode, then the Participant shall be obliged to forward the statement of demat accounts in physical form.
17. In case of Basic Services Demat Accounts, the DP shall send the transaction statements as mandated by SEBI and/or Depository from time to time.

Manner of Closure of Demat account

18. The DP shall have the right to close the demat account of the Beneficial Owner, for any reasons whatsoever, provided the DP has given a notice in writing of not less than thirty days to the Beneficial Owner as well as to the Depository. Similarly, the Beneficial Owner shall have the right to close his/her demat account held with the DP provided no charges are payable by him/her to the DP. In such an event, the Beneficial Owner shall specify whether the balances in their demat account should be transferred to another demat account of the Beneficial Owner held with another DP or to rematerialize the security balances held.

19. Based on the instructions of the Beneficial Owner, the DP shall initiate the procedure for transferring such security balances or rematerialize such security balances within a period of thirty days as per procedure specified from time to time by the depository. Provided further, closure of demat account shall not affect the rights, liabilities and obligations of either the Beneficial Owner or the DP and shall continue to bind the parties to their satisfactory completion.

Default in payment of charges

20. In event of Beneficial Owner committing a default in the payment of any amount provided in Clause 5 & 6 within a period of thirty days from the date of demand, without prejudice to the right of the DP to close the demat account of the Beneficial Owner, the DP may charge interest at a rate as specified by the Depository from time to time for the period of such default.

21. In case the Beneficial Owner has failed to make the payment of any of the amounts as provided in Clause 5&6 specified above, the DP after giving two days notice to the Beneficial Owner shall have the right to stop processing of instructions of the Beneficial Owner till such time he makes the payment along with interest, if any.

Liability of the Depository

22. As per Section 16 of Depositories Act, 1996,

1. Without prejudice to the provisions of any other law for the time being in force, any loss caused to the beneficial owner due to the negligence of the depository or the participant, the depository shall indemnify such beneficial owner.
2. Where the loss due to the negligence of the participant under Clause (1) above, is indemnified by the depository, the depository shall have the right to recover the same from such participant.

Freezing/ Defreezing of accounts

23. The Beneficial Owner may exercise the right to freeze/defreeze his/her demat account maintained with the DP in accordance with the procedure and subject to the restrictions laid down under the Bye Laws and Business Rules/Operating Instructions.

24. The DP or the Depository shall have the right to freeze/defreeze the accounts of the Beneficial Owners on receipt of instructions received from any regulator or court or any statutory authority.

Redressal of Investor grievance

25. The DP shall redress all grievances of the Beneficial Owner against the DP within a period of thirty days from the date of receipt of the complaint.

Authorized representative

26. If the Beneficial Owner is a body corporate or a legal entity, it shall, along with the account opening form, furnish to the DP, a list of officials authorized by it, who shall represent and interact on its behalf with the Participant. Any change in such list including additions, deletions or alterations thereto shall be forthwith communicated to the Participant.

Law and Jurisdiction

27. In addition to the specific rights set out in this document, the DP and the Beneficial owner shall be entitled to exercise any other rights which the DP or the Beneficial Owner may have under the Rules, Bye Laws and Regulations of the respective Depository in which the demat account is opened and circulars/notices issued there under or Rules and Regulations of SEBI.
28. The provisions of this document shall always be subject to Government notification, any rules, regulations, guidelines and circulars/ notices issued by SEBI and Rules, Regulations and Bye-laws of the relevant Depository, where the Beneficial Owner maintains his/ her account, that may be in force from time to time.
29. The Beneficial Owner and the DP shall abide by the arbitration and conciliation procedure prescribed under the Bye-laws of the depository and that such procedure shall be applicable to any disputes between the DP and the Beneficial Owner.
30. Words and expressions which are used in this document but which are not defined herein shall unless the context otherwise requires, have the same meanings as assigned thereto in the Rules, Bye-laws and Regulations and circulars/notices issued there under by the depository and /or SEBI
31. Any changes in the rights and obligations which are specified by SEBI/Depositories shall also be brought to the notice of the clients at once.
32. If the rights and obligations of the parties hereto are altered by virtue of change in Rules and regulations of SEBI or Bye-laws, Rules and Regulations of the relevant Depository, where the Beneficial Owner maintains his/her account, such changes shall be deemed to have been incorporated herein in modification of the rights and obligations of the parties mentioned in this document.

BO1 _____ BO2 _____ BO3 _____

**Terms and Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL
[SMS Alerts will be sent by CDSL to BOs for all debits and for all credits as well.]**

Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
2. „DP“ means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. „BO“ means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means “Short Messaging Service”
5. “Alerts” means a customized SMS sent to the BO over the said mobile phone number.
6. “Service Provider” means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. “Service” means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider’s service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in „ON“ and in a mode to receive the SMS. If the mobile phone is in „Off“ mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP

immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.

5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
6. The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to / transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.

Fees:

Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository gives no warranty with respect to the quality of the service provided by the service provider. The Depository will not be liable for any unauthorized use or access to the information and/ or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by any third person.

Liability and Indemnity:

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

Amendments:

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

Governing Law and Jurisdiction:

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in Mumbai.

I / We wish to avail the SMS Alerts facility provided by the depository on my / our mobile number provided in the registration form subject to the terms and conditions mentioned below. I / We consent to CDSL providing to the service provider such information pertaining to account / transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.

I/We have read and understood the terms and conditions mentioned above and agree to abide by them and any amendments thereto made by the depository from time to time. I/ we further undertake to pay fee/ charges as may be levied by the depository from time to time.

I / We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the BOs would be required to take up the matter with their DP.

I/We am/ are aware that mere acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service.

I/We provide the following information for the purpose of **REGISTRATION / MODIFICATION** (Please cancel out what is not applicable).

BOID	<table border="1"> <tr> <td>1</td><td>2</td><td>0</td><td>6</td><td>4</td><td>3</td><td>0</td><td>0</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		1	2	0	6	4	3	0	0																			
1	2	0	6	4	3	0	0																						
	(Please write your 8 digit DPID)								(Please write your 8 digit Client ID)																				
Sole / First Holder's Name	:																												
Second Holder's Name	:																												
Third Holder's Name	:																												
Mobile Number on which messages are to be sent	:	<table border="1"> <tr> <td>+91</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>													+91														
+91																													
	(Please write only the mobile number without prefixing country code or zero)																												
The mobile number is registered in the name of	:																												
Email ID	:	<hr/>																											
	(Please write only ONE valid email ID on which communication; if any, is to be sent)																												
Sole / First Holder (Signature)		Second holder (Signature)					Third Holder (Signature)																						
Place	:						Date	:																					

Demat Debit and Pledge Instruction (“DDPI”)

I/We agree to the terms and purpose of this DDPI document between Mr./Ms. _____(FirstHolder) _____(Second holder) and _____(Third holder); an individual/body of individuals/a sole proprietary concern/a partnership firm/a body corporate/trust, registered/incorporated, under the provisions of the Indian Partnership Act, 1932/ the Companies Act 2013, or any relevant Act or unregistered in nature; and Sethi Finmart Pvt. Ltd, a Company within the meaning of Companies Act, 2013 with its corporate office at Sethi Finmart Pvt. Ltd., #218, Laxmi Plaza, 9 Laxmi Industrial Estate, New Link Road, Andheri (West), Mumbai-400053, India;

Whereas:

(a) I/We have established a business relationship with Sethi Finmart Pvt Ltd. to avail services w.r.t trading, investing & other services offered by Sethi Finmart Pvt Ltd, having a DP ID 12064300, & Client ID _____
UCC details _____.



First Holder



Second Holder



Third Holder


(b) This DDPI document shall be in line with SEBI Circular no. SEBI/HO/MIRSD/DoP/P/CIR/2022/44 dated April 04, 2022, as may be updated from time to time, SEBI/HO/MIRSD/MIRSD-PoD-1/P/CIR/2022/137 dated October 06, 2022 & I agree to the below four points;

S.No	Purpose	Signature of Client		
		First Holder	Second Holder	Third Holder
1	1.2.1 Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker	✓	✓	✓
2	1.2.2 Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	✓	✓	✓
3	Mutual Fund transactions being executed on Stock Exchange order entry platforms	✓	✓	✓
4	Tendering Shares in open offers through Stock Exchange platforms	✓	✓	✓

Demat account of Stock Broker

Name of Exchange	Demat Account Number	Type of Account
NSE	1206430000002020	CDSL Client Unpaid Securities Pledge a/c
NSE	1206430000000437	CDSL CM Pool a/c
NSE	CM BPID:IN513965	NSDL Pool a/c
NSE	1206430000001177	CDSL TM/CM-Client Securities Margin Pledge Account
NSE	IN300126 - 11282336	NSDL TM/CM-Client Securities Margin Pledge Account
NSE	1100001100019946	CDSL Early Payin a/c
NSE	1206430000002185	CDSL TM/CM Client Nodal MFOS a/c

I/We agree and confirm that the consent of this DDPI shall continue until the same is revoked/modified by me/us. This DDPI can be revoked or modified at any time by sending intimation for revocation/modification at the Registered Office of the Attorney.


First Holder


Second Holder


Third Holder

Note: In case of HUF all co-parceners should sign.

Mobile Number on which messages are to be sent	+91									
	<i>(Please write only the mobile number without prefixing country code or zero)</i>									

(Existing users registered for SM S alerts:- Please note that if the mobile number for TRUST is different than the registered mobile number for SMS alert, the new mobile number will be updated for SMS alert also.)

The mobile number is registered in the name of:

(Name) _____

Email ID: _____

(Please write only ONE valid email ID on which communication; if any, is to be sent)

I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purpose of availing the said facility

I/we acknowledge that transactions entered by the above clearing members will be executed on the basis of SMS sent through our registered mobile number under TRUST and I/we shall be wholly responsible for execution / non- execution of the said transactions based on receipt/non-receipt of such SMS.

I/We have read and understood the terms and conditions prescribed by CDSL for the said facility/ies and agree to abide by them and any amendments thereto made by the depository from time to time. I/ we further undertake to pay fee/ charges as may be levied by the depository from time to time.

Signatures

Sole / First Holder

Second Holder

Third Holder

Place: _____

Date: _____

Terms and Conditions for availing Transaction Using Secured Texting (TRUST) Service offered by CDSL

1. Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

- i. "Depository" means Central Depository Services (India) Limited (CDSL)
 - ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository
 - iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
 - iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
 - v. "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time. . Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository
 3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depository shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure of the service provider or network.
 4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
 5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
 6. The BO shall be responsible for submitting response to the „Responsive SMS“ within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for deregistration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
 7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
 8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.
 9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP.
 10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.

11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP.
13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.
17. Indemnity:
In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.
18. Disclaimer:
Depository shall be absolved of any liability in case:-
 - a. There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
 - b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such service provider.
 - c. There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility. .

Rate Structure for Depository Services

1.	Account Opening Charges	NIL
2.	Documentation Charges	NIL

No.	Service	Individual	Corporate
3.	Dematerialisation (for every 50 certificate)	Rs.25/- per DRF plus Rs.3 per certificate or Rs.100/- whichever is higher	Rs.25/- per DRF plus Rs.3 per certificate or Rs.100/- whichever is higher
4.	Rematerialisation	Rs.25 per certificate or Rs.100 whichever is higher	
5.	Equities-Transfer fees-Market & Off Market (Per transaction minimum of Rs.15/-)	Rs.15/-per ISIN or 0.03% of value of transaction (within SFPL) or Rs.40/- per ISIN or 0.03% of value of transaction (outside SFPL) or Rs.40/- per ISIN	Rs. 15/-Per ISIN or 0.03% of Value of Transaction (Within S F P L) or Rs. 40/- Per ISIN or 0.03% of Value of Transaction (Outside SFPL) or Rs.40/- per ISIN
6.	Pledge / Creation / Closure / Invocation	Rs.50/- or 0.02% Whichever is Higher	Rs.50/- or 0.02% Whichever is Higher
7.	Account maintenance charges (Per Annum-Pro -Rata)	Regular account : ANNUAL : Rs.300/- upfront or LIFETIME : Rs.1500/- BSDA Account - Holding Value Up to Rs 4 Lakhs - AMC NIL, More Than Rs 4 to10 Lakhs - AMC Rs 100/-, More Than Rs 10 Lakhs - Not a BSDA. Regular AMC may be levied.	Regular account :ANNUAL: Rs.700/- upfront or LIFETIME : Rs.1500/- BSDA Account - Holding Value Up to Rs 4 Lakhs - AMC NIL, More Than Rs 4 to 10 Lakhs - AMC Rs 100/-, More Than Rs 10 Lakhs - Not a BSDA. Regular AMC may be levied.

	First/Sole Holder	Second Holder	Third Holder
Signature			

FORMAT OF BOARD RESOLUTION IN CASE OF COMPANY

(To be obtained on pre-printed Letterhead of the Company with company Seal)

Certified true copy of an extract from the minutes of a meeting of the board of directors of _____ limited duly convened and at which a proper quorum was present held at the registered office of the company at (address) _____ on _____ day _____ th _____ 20 _____ at _____

“RESOLVED THAT the consent of the Board be and is hereby given to open a **Depository account** of the Company with M/s _____ the Depository Participant as per rules and regulations laid upon by Central Depository Services (India) Limited (CDSL), having its registered office at _____ in the name of _____

RESOLVED FURTHER THAT Mr. _____ and Mr _____ Directors and Mr. _____ the Authorized Person in this behalf, be and are hereby singly / jointly ,and whose specimen signature is attested below be authorized to sign on behalf of the Company, all the necessary documents that may be required for opening of the account.”

“Resolved further that the above Directors/Signatories be and are hereby authorized to give such documents as may be required by M/s _____ from time to time for the operation of the account.”

RESOLVED THAT the company do grant in favor of DP name a Power of Attorney limited to enabling DP name meet pay-in obligations for sale transactions carried out in the account of the Company and authorize Mr. _____ Of the Company to execute, notarize and deliver to DP name., the said Power of Attorney and to do all such other things as may be necessary in this connection”

“FURTHER RESOLVED THAT a certified copy of the said resolution be communicated to DP name together with the specimen signatures of all the aforesaid office bearer by the Chairman of the meeting under the common seal of the company.

Place: Mumbai

CERTIFIED TRUE COPY

Date :

For _____ LTD.

Mr. _____
(Director/Company Secretary)

1 Mr. _____

2 Mr. _____

HUF DECLARATION

From:

(Name & Address of HUF)

Date: _____

To,
Sethi Finmart Pvt.Ltd.
218, Laxmi Plaza,
9, Laxmi Industrial Estate,
New Link Road,
Andheri (W),
Mumbai-400 053

Dear Sir/ Madam,

Re: My BO Account No.12064300-000

I, as a Karta of _____ hereby submit the details of family members of my HUF and declaration stating that they have no objection in account opened and being operated by the name of Karta as follows:

Name of family member	Date of Birth	Relationship with Karta	Signatures
		SELF	

Thanking you.

Yours truly,

(Name & Signature of Karta)
With HUF stamp

Dos

Register for CDSL's internet based facility 'easi' to monitor your demat account yourself. Contact your DP for details.

Register for CDSL's SMS Alert facility - SMART and obtain alerts for any debits or credits due to a corporate action, in your demat account.

- Accept the DIS book from your DP only if each slip has been pre-printed with a serial number along with your demat account number and keep it in safe custody.
- Always mention the details like ISIN, number of securities accurately. In case of any queries, please contact your DP or broker.
- Ensure that all demat account holder(s) sign on the DIS.
- Please strike out the any blank space on the slip.
- Cancellations or corrections on the DIS should be initialed or signed all the account holder(s).
- Submit the DIS ahead of the delivery date for all type of market transactions. DIS can be issued with a future execution date.
- Intimate any change of address or change in bank account details to your DP immediately.
- Check the demat performance of the issuer company with your DP before deciding to send certificates for demat. The list of companies whose demat request are pending is published at www.cdslindia.com.
- Before sending securities for demat, record the distinctive numbers of the securities sent.
- Before granting Power of Attorney to anyone, to operate your demat account, carefully examine the scope & implications of powers being granted.
- The demat account has a nomination facility and it is advisable to appoint a nominee, in case of sole account holders.
- Ensure that, both, your holding and transaction statements are received periodically as instructed to your DP. You are entitled to receive a transaction statement every month if you have any transactions and once a quarter if there have been no transactions in your account.
- Check your demat account statement on receipt. In case you notice any unauthorized debits or credits, contact your DP for clarification. If not resolved, you may contact CDSL's Investor Relations Officer, Mr. Suhas Kulkarni, Central Depository Services (India) Ltd., 17th Floor, P.J.Towers, Dalal Street, Mumbai -400 001, Tel. 2272 3333 , email-investors@cdslindia.com

Don'ts

- Do not leave your instruction slip book with anyone else. Do not sign blank DIS as it is equivalent to a bearer cheque.

Avoid over-writing, cancellations, misspellings, changing of the name and quantity of securities. We request you to meticulously follow the above instructions, to avoid any problems in operation of your demat account.

BO 1x _____ BO 2x _____ BO 3x _____

OPTION FORM FOR ISSUE OF DIS BOOKLET

Date								
------	--	--	--	--	--	--	--	--

DP ID									Client ID								
First Holder Name																	
Second Holder Name																	
Third Holder Name																	

To,
Sethi Finmart Pvt.Ltd.
 218, Laxmi Plaza, 9 Laxmi Industrial Estate,
 New Link Road, Andheri (W),
 Mumbai-400 053

Dear Sir / Madam,

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

OPTION 1:

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL account though I / we have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager.

Yours faithfully

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signature			

OR

OPTION 2:

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

Yours faithfully

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signature			

===== (Please Tear Here) =====

Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from:

DP ID										Client ID									
First Holder Name																			
Second Holder Name																			
Third Holder Name																			

Declaration – Email/ Mobile Updation

To,

Date:

Sethi Finmart Pvt.Ltd.
218 Laxmi Plaza, 9 Laxmi Industrial Estate,
New Link Road, Andheri (W),Mumbai-400053

Dear Sir/Madam,

Subject : Common Mobile number / Email ID For Demat and Trading accounts

I, Ms/Mr. _____ would like to confirm that the Mobile number/E-mail ID _____ / _____ registered in my name. I am your registered client having trading code as _____ and demat account number _____.

I and my family members hereby request that mobile number _____ and email id bearing _____, belonging to undersigned shall be considered in your records for the purpose of receiving communication from you or Stock Exchanges with regard to details of trading transactions executed through you. Upon understanding from you that my mobile number/email id is registered with some of the clients who have trading and/or demat accounts with you, I have to state that this is in my full knowledge and I have consented to the below clients who is / are my relative/s to state my mobile number/email id in their KYCs to which I have no objection.

Thus, any communication relating to our trading and demat account should be sent to the above mentioned mobile number and e-mail id. This facility shall be executed to us as an exception, for our convenience of receiving transaction details at a single mobile number and e-mail id. I understand that for the purpose of availing the above facility “family” means self, spouse, dependent children and dependent parents.

Sr.No.	Client Name	Trading Code	Demat A/c.	Relation	Signature
1					
2					
3					
4					

However, in case of any further regulatory requirements, I undertake to abide upon hearing from you.

Thanking You.

Name :

Address :

Signature: _____

SPECIMEN SIGNATURE OF CARD

DP ID	1	2	0	6	4	3	0	0	Client ID								
--------------	----------	----------	----------	----------	----------	----------	----------	----------	------------------	--	--	--	--	--	--	--	--

	Sole / First Holder	Second holder	Third Holder
Name			
Specimen Signature	<i>(Signature)</i>	<i>(Signature)</i>	<i>(Signature)</i>

-----Please tear here-----

Acknowledgement Receipt for Account Opening Form (To be filled and given by Sethi Finmart Pvt. Ltd.

Application No.	
------------------------	--

Date:-			
---------------	--	--	--

We hereby acknowledge the receipt of the Account Opening Application Form From:

Name of the Sole / First Holder	
Name of the Second holder	
Name of the Third Holder	

Depository Participant Seal and Signature

-----Please tear here-----

ACKNOWLEDGEMENT RECEIPT

Received Nomination Request Form:

DP ID	1	2	0	6	4	3	0	0	Client ID								
--------------	----------	----------	----------	----------	----------	----------	----------	----------	------------------	--	--	--	--	--	--	--	--

Name	:																		
Address	:																		
	:																		
	:																		
Nominee in Favour of	:																		
No Nomination	:	<input type="checkbox"/> Does not wish to Nominate																	
Registration No.	:								Registered on										
									(dd/mm/yyyy)										

Depository Participant Seal and Signature

FATCA & CRS - SELF CERTIFICATION FORM FOR INDIVIDUALS

Client Code

Demat ac no

Particulars	First Account Holder	Second Account Holder	Third Account Holder
Name of the Account Holder			
City of Birth			
Country of Birth			
Address for Tax purpose	<input type="checkbox"/> Same as mailing <input type="checkbox"/> Same as permanent	<input type="checkbox"/> Same as mailing <input type="checkbox"/> Same as permanent	<input type="checkbox"/> Same as mailing <input type="checkbox"/> Same as permanent
Address Type for the above	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office
Nationality (if national of more than one country, please mention all the countries separated by a comma)			
Father's Name (mandatory if PAN not provided)			
Spouse's Name			
Identification Type- Documents submitted as proof of identity of the individual	<input type="checkbox"/> Passport <input type="checkbox"/> Election / Voter's ID card <input type="checkbox"/> Aadhaar Card / Letter <input type="checkbox"/> PAN Card <input type="checkbox"/> Driving License <input type="checkbox"/> Others (pls specify)_____	<input type="checkbox"/> Passport <input type="checkbox"/> Election / Voter's ID card <input type="checkbox"/> Aadhaar Card / Letter <input type="checkbox"/> PAN Card <input type="checkbox"/> Driving License <input type="checkbox"/> Others (pls specify)_____	<input type="checkbox"/> Passport <input type="checkbox"/> Election / Voter's ID card <input type="checkbox"/> Aadhaar Card / Letter <input type="checkbox"/> PAN Card <input type="checkbox"/> Driving License <input type="checkbox"/> Others (pls specify)_____
Identification Number - for the identification type mentioned above			

Are you a tax resident of any country other than India?

First account holder : YES NO

Second account holder : YES NO

Third account holder : YES NO

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below:

Account holder details	Name of Customer	Country/(ies) of Tax residency #	Tax Identification Number (TIN)%	Identification Type (TIN or Other %, please specify)
First				
Second				
Third				

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

% In case Tax Identification Number is not available, kindly provide functional equivalent\$

Certification: I/We have understood the information requirements of this Form as per the CBDT notified Rules 114F to 114H and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the Terms and Conditions below and hereby accept the same. I/We understand that my personal details as provided /available in the bank records will be used for CBDT reporting.

Signature of First Holder

Signature of Second Holder

Signature of Third Holder

Date: ___/___/___

Place: _____

FATCA & CRS - SELF CERTIFICATION FORM FOR INDIVIDUALS

CBDT Terms and Conditions

The Central Board of Direct Taxes (CBDT) has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Custodian / Depository to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple demat account with----- . Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

CBDT Terms and Conditions

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

\$ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form. In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant *Curing Documents* as mentioned below:

FATCA/ CRS Indicia observed (ticked)		Documentation required for Cure of FATCA/ CRS indicia
		If customer does not agree to be Specified U.S. person / reportable person status
1	U.S. place of birth	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: a. Certified Copy of "Certificate of Loss of Nationality or b. Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
2	Residence/ mailing address in a country other than India	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
3	Telephone number in a country other than India (and no telephone number in India provided)	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
4	Standing instructions to transfer funds to an account maintained in a country other than India	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*
2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

* **Government or agency thereof or a municipality**

1) In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA/CRS Indicia observed (ticked)		Documentation required for Cure of FATCA/CRS indicia
		If customer does not agree to be Specified U.S. person/reportable person status
1	U.S. place of birth	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: a. Certified Copy of "Certificate of Loss of Nationality or. b. Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
2	Residence/ mailing address in a country other than India	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
3	Telephone number in a country other than India (and no telephone number in India provided)	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
4	Standing instructions to transfer funds to an account maintained in a country other than india	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*
2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

*Government or agency thereof or a municipality

2) It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers.

If TIN/ Functional Equivalent available	Any document evidencing TIN issued by an authorised government body
No TIN is yet available	An explanation and attach it to the form.

FATCA-CRS Declaration & Supplementary KYC Information - Declaration Form for Non-Individual
 Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance

PAN

Name			
Address Type [for KYC address]		<input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Residential / Business <input type="checkbox"/> PAN <input type="checkbox"/> Registered Offices	
Place for Incorporation		Country for Incorporation	
Gross Annual Income Details in INR <input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 Lacs 1 cr <input type="checkbox"/> > 1 Crore		Net worth in INR in Lacs _____ Net worth as of dd/mm/yyyy	
Is the entity involved in / providing any of the following services:		<input type="checkbox"/> Foreign Exchange / Money Changer Services <input type="checkbox"/> Gaming / Gambling / Lottery Services [e.g. casinos, betting syndicates] <input type="checkbox"/> Money Laundering / Pawning	
		Any other information [if applicable] _____ [Please specify]	

Is your [Entity] Country of Tax Residency other than India - Yes No

If 'Yes' please specify the details of all countries where you [Entity] hold tax Residency and its Tax Identification Number & type

Sr. No.	Country of Tax Residency	Tax Payer Identification Number / Functional Equivalent / Company Identification Number or Global Entity Identification Number	Identification Type [TIN or other please specify]
1			
2			
3			

In case the Entity's Country of Incorporation / Tax Residence is US but Entity is not a Specified US Person, mention Entity's exemption code here _____ (Refer Instructions)

[to be filled By Financial Instructions or Direct Reporting NFFEs]

We are a
 Financial Institution/FFI [refer instructions a.]
 Direct Reporting NFFE [refer instructions b.]

GIIN (Global Intermediary Identification Number):

Name of the sponsoring entity

GIIN not available [tick any one]:

Applied For Not required to apply for - specify sub-category code [refer instructions c]
 Not obtained - Non - participating FFI


[Fill any one as applicable - to be filled by NFEs other than Direct Reporting NFFEs]

1	Is the entity is a listed company [whose shares are regularly traded on a recognized stock exchange [refer instructions d.]	Yes <input type="checkbox"/> (Please specify the name of the Stock Exchange(s) where it is traded regularly) 1. _____ 2. _____
2	Is the entity a 'Related Entity' of a listed company [whose shares are regularly trade on a recognized stock exchange] [refer instructions e.]	Yes <input type="checkbox"/> (Please specify the name of the listed company, name of the Stock Exchange(s) where it is traded regularly) Name of the listed company: _____ Name of the Stock Exchange: _____
3	Is the entity an Active NFE?	Yes <input type="checkbox"/> Nature of business _____ Please specify sub-category of Active NFE: <input type="checkbox"/> <input type="checkbox"/> [refer instructions g.]
4	Is the entity a Passive NFE: [refer instructions h.]	Yes <input type="checkbox"/> Nature of business _____ Also submit UBO Form [provided separately]

Declaration:

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be liable for it. I/We hereby authorize IIFL Wealth Management Limited to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to such information as and when provided by me/us to associates of IIFL Group, issuers, brokers, banks and other relevant parties ("the Authorized Parties") or any Indian or foreign governmental or statutory or judicial authorities/agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax/revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other Authorised Parties to facilitate single submission/updation & for other relevant purposes. I/ We also undertake to keep you informed in writing about any changes/modification to the above information in future promptly, i.e., within 30 days and also undertake to provide any other additional information as may be required at your end. As may be required by domestic or overseas regulators/tax authorities, I/We authorize the Authorised Parties to withhold and pay out any sums from your account or close or suspend your account(s) without any obligation of advising me of the same.

Signature with relevant seal:

Authorised Signatory	
SIGNATURE	17  24

Date:

Place:

FATCA, CRS & UBO Declaration

Mandatory fields
 *Address Type should either Residence or Business or Registered Office \$ Mandatory if PAN of UBO / Controlling persons is not provided
 Note: If the given rows are not sufficient, required information in the given format can be enclosed as additional sheet(s) duly signed by Authorized Signatory
***Note that some of the Authorised Parties may call for additional information/documentation wherever required or if the given information is not clear /incomplete / incorrect and you may have to provide the same as and when solicited**

Declaration

I/We acknowledge and confirm that the information provided above is/are true and correct to the best of my/our knowledge and belief and provided after consulting necessary tax professionals, read & understood the FATCA terms and conditions. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be liable for it. I/We hereby authorize you to disclose, share, remit in any form, mode or manner, all / any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/ us to IIFL Wealth Management Limited, IIFL Group, issuers, brokers, banks and other relevant parties ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India and other investigation agencies without any obligation of advising me/us of the same. Further, I/We, authorize to share the given information to other Authorised Parties to facilitate single submission / update & for other relevant purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future promptly, i.e., within 30 days and also undertake to provide any other additional information / documentary proof as may be required at your end

	Authorised Signatory
SIGNATURE	18  24

Place _____

Date ___/___/___



DECLARATION FOR AVAILING OF BASIC SERVICES DEMAT ACCOUNT (BSDA) FACILITY

Date:- _____

To,	From,
SETHI FINMART PVT LTD	BO Name:-
DP ID :- 64300	BO ID:-
Address:- 218 Laxmi Plaza, 9 Laxmi Industrial Estate, New Link Road, Andheri (W), Mumbai-400053	

Dear Sir / Madam,

- I / We wish to avail the BSDA facility for the new account for which we have submitted my / our account opening form.
- I/ We do **NOT** wish to avail BSDA facility.
- I / We wish to avail the BSDA facility for my / our below mentioned demat account number

	Name	PAN									
Sole/First Holder											
Second Holder											
Third Holder											

I/We have read and understood the regulatory (SEBI) guidelines for opening a Basic Services Demat Account and undertake to comply with the aforesaid guidelines from time to time. I/we also undertake to comply with the guidelines issued by any such authority for BSDA facility from time to time. I/We also agree that in case our demat account opened under BSDA facility does not meet the eligibility for BSDA facility as per guideline issued by SEBI or any such authority at any point of time, my / our BSDA account will be converted to regular demat account without further reference to me/us and will be levied charges as applicable to regular accounts as informed by the DP.

I, the first / Sole holder also hereby declare that I do not have / propose to have any other demat account across depositories as a first / sole holder.

Sole/First Holder	
Second Holder	
Third Holder	

Consent letter for same email id & mobile number

To,
M/s. SETHIFINMART PVT LTD
Address: - 218, LAXMIPLAZA, 9 LAXMI INDUSTRIAL ESTATE,
NEW LINK ROAD, ANDHERI (W), MUMBAI-400 053

BO ID	1	2	0	6	4	3	0	0								
-------	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--

Client Code	
-------------	--

Sole / First Holders Name	
Second Holders Name	
Third Holders Name	

Email ID: _____

Client Email ID Belonging to: Self Spouse Dependent Children
 Dependent Parents

(Please write only **ONE** valid email ID on which communication, if any is to be sent)

Mobile Number on which messages are to be sent															
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

The Mobile number is registered in the Name of: _____

Client Mobile No. belonging to Self Spouse Dependent Children
 Dependent Parents

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature			

Date:

Place:

Investor Charter for Depositories and Depository Participants

1. Vision

Towards making Indian Securities Market - Transparent, Efficient, & Investor friendly by providing safe, reliable, transparent and trusted record keeping platform for investors to hold and transfer securities in dematerialized form.

2. Mission

- To hold securities of investors in dematerialised form and facilitate its transfer, while ensuring safekeeping of securities and protecting interest of investors.

- To provide timely and accurate information to investors with regard to their holding and transfer of securities held by them.

- To provide the highest standards of investor education, investor awareness and timely services so as to enhance Investor Protection and create awareness about Investor Rights.

3. Details of business transacted by the Depository and Depository Participant (DP)

A Depository is an organization which holds securities of investors in electronic form. Depositories provide services to various market participants - Exchanges, Clearing Corporations, Depository Participants (DPs), Issuers and Investors in both primary as well as secondary markets. The depository carries out its activities through its agents which are known as Depository Participants (DP). Details available on the link <https://www.cdslindia.com/DP/dplist.aspx>.

4. Description of services provided by the Depository through Depository Participants (DP) to investors

(1) Basic Services

Sr. No.	Brief about the Activity / Service	Expected Timelines for processing by the DP after receipt of proper documents
1	Dematerialization of securities	7 days
2	Rematerialization of securities	7 days
3	Mutual Fund Conversion / Destatementization	5 days

Sr. No.	Brief about the Activity / Service	Expected Timelines for processing by the DP after receipt of proper documents
4	Re-conversion / Restatementisation of Mutual fund units	7 days
5	Transmission of securities	7 days
6	Registering pledge request	15 days
7	Closure of demat account	30 days
8	Settlement Instruction	<p>For T+1 day settlements, Participants shall accept instructions from the Clients, in physical form up to 4 p.m. (in case of electronic instructions up to 6.00 p.m.) on T day for pay-in of securities.</p> <p>For T+0 day settlements, Participants shall accept EPI instructions from the clients, till 11:00 AM on T day.</p> <p>Note: 'T' refers 'Trade Day'</p>

(2) Depositories provide special services like pledge, hypothecation, internet based services etc. in addition to their core services and these include

Sr. No.	Type of Activity /Service	Brief about the Activity / Service
1.	Value Added Services	<p>Depositories also provide value added services such as</p> <ol style="list-style-type: none"> Basic Services Demat Account (BSDA) Transposition cum dematerialization Linkages with Clearing System Distribution of cash and non-cash corporate benefits (Bonus, Rights, IPOs etc.), stock lending, demat of NSC / KVP, demat of warehouse receipts etc.
2.	Consolidated Account statement (CAS)	CAS is issued 10 days from the end of the month (if there were transactions in the previous month) or half yearly (if no transactions) .
3.	Digitalization of services provided by the depositories	Depositories offer below technology solutions and e-facilities to their demat account holders through DPs:

		<ul style="list-style-type: none"> a. E-account opening b. Online instructions for execution c. e-DIS / Demat Gateway d. e-CAS facility e. Miscellaneous services
--	--	--

5. Details of Grievance Redressal Mechanism

The Process of investor grievance redressal

1.	Investor Complaint/ Grievances	<p>Investor can lodge complaint/ grievance against the Depository/DP in the following ways:</p> <ul style="list-style-type: none"> a. Electronic mode - <ul style="list-style-type: none"> (i) SCORES 2.0 (a web based centralized grievance redressal system f SEBI) <u>Two Level Review for complaint/grievance against DP:</u> <ul style="list-style-type: none"> - First review done by Designated Body - Second review done by SEBI (ii) Respective Depository's web portal dedicated for the filing of compliant (iii) Emails to designated email IDs of Depository - complaints@cdslindia.com b. Offline mode [details of link to the form to be provided by Depositories] [grievance.sethifinmart@gmail.com] <p>The complaints/ grievances lodged directly with the Depository shall be resolved within 21 days.</p>
2.	Online Dispute Resolution (ODR)	<p>If the Investor is not satisfied with the resolution provided by DP or other Market Participants, then</p>

	platform for online Conciliation and Arbitration	the Investor has the option to file the complaint/ grievance on SMARTODR platform for its resolution through by online conciliation or arbitration. SMART ODR - https://smartodr.in/login
3.	Steps to be followed in ODR for Review, Conciliation and Arbitration	<ul style="list-style-type: none"> ➤ Investor to approach Market Participant for redressal of complaint ➤ If investor is not satisfied with response of Market Participant, he/she can escalate the complaint on SEBI SCORES portal. ➤ Alternatively, the investor may also file a complaint on SMARTODR portal for its resolution through online conciliation and arbitration. ➤ Upon receipt of complaint on SMARTODR portal, the relevant MII will review the matter and endeavour to resolve the matter between the Market Participant and investor within 21 days. ➤ If the matter could not be amicably resolved, then the Investor may request the MII to refer the matter case for conciliation. ➤ During the conciliation process, the conciliator will endeavor for amicable settlement of the dispute within 21 days, which may be extended with 10 days by the conciliator. ➤ If the conciliation is unsuccessful, then the investor may request to refer the matter for arbitration. ➤ The arbitration process to be concluded by arbitrator(s) within 30 days, which is extendable by 30 days.
4.	Claim to be filed by Beneficial Owner:	<p>The Beneficial owner who suffered a loss due to the actions of Depository Participant (“DP”)/ Central Depository Services (India) Limited (“CDSL”) needs to file their claim with DP/ CDSL along with relevant documents including but not limited to:</p> <ul style="list-style-type: none"> • Statement of claim • Details of estimated loss (including calculation) and supporting documents • FIR Copy (in case of alleged fraud and infidelity of employee) • Declaration stating that same relief has not been sought before any other fora <p>The hard copy of the claim is to be addressed to the CDSL Legal Team at the registered office of the Company and the soft copy is to be submitted to the Email ID - claims@cdslindia.com.</p>

6. Guidance pertaining to special circumstances related to market activities: Termination of the Depository Participant

Sr. No.	Type of special circumstances	Timelines for the Activity/ Service
1.	<ul style="list-style-type: none"> ▪ Depositories to terminate the participation in case a participant no longer meets the eligibility criteria and/or any other grounds as mentioned in the bye laws like suspension of trading member by the Stock Exchanges. 	Client will have a right to transfer all its securities to any other Participant of its choice without any charges for the transfer within 30 days from the date of intimation by way of letter/email.
	<ul style="list-style-type: none"> ▪ Participant surrenders the participation by its own wish. 	

7. Dos and Don'ts for Investors

Sr. No.	Guidance
i.	Always deal with a SEBI registered Depository Participant for opening a demat account.
ii.	Read all the documents carefully before signing them.
iii.	Before granting Power of attorney to operate your demat account to an intermediary like Stock Broker, Portfolio Management Services (PMS) etc., carefully examine the scope and implications of powers being granted.
iv.	Always make payments to registered intermediary using banking channels. No payment should be made in name of employee of intermediary.
v.	<p>Accept the Delivery Instruction Slip (DIS) book from your DP only (pre-printed with a serial number along with your Client ID) and keep it in safe custody and do not sign or issue blank or partially filled DIS slips.</p> <p>Always mention the details like ISIN, number of securities accurately. In case of any queries, please contact your DP or broker and it should be signed by all demat account holders.</p> <p>Strike out any blank space on the slip and Cancellations or corrections on the DIS should be initialed or signed by all the account holder(s).</p> <p>Do not leave your instruction slip book with anyone else.</p> <p>Do not sign blank DIS as it is equivalent to a bearer cheque.</p>
vi.	Inform any change in your Personal Information (for example address or Bank Account details, email ID, Mobile number) linked to your demat account in the prescribed format and obtain confirmation of updation in system
vii.	Mention your Mobile Number and email ID in account opening form to receive SMS alerts and regular updates directly from depository.
viii.	Always ensure that the mobile number and email ID linked to your demat account are the same as provided at the time of account opening/updation.
ix.	Do not share password of your online trading and demat account with anyone.

x.	Do not share One Time Password (OTP) received from banks, brokers, etc. These are meant to be used by you only.
xi.	Do not share login credentials of e-facilities provided by the depositories such as e-DIS/demat gateway, SPEED-e/easiest etc. with anyone else.
xii.	Demat is mandatory for any transfer of securities of Listed public limited companies.

Sr. No.	Guidance
xiii.	If you have any grievance in respect of your demat account, please write to designated email IDs of depositories or you may lodge the same with SEBI online at https://scores.gov.in/scores/Welcome.html
xiv.	Keep a record of documents signed, DIS issued and account statements received.
xv.	As Investors you are required to verify the transaction statement carefully for all debits and credits in your account. In case of any unauthorized debit or credit, inform the DP or your respective Depository.
xvi.	Appoint a nominee to facilitate your heirs in obtaining the securities in your demat account, on completion of the necessary procedures.
xvii.	Register for Depository's internet based facility or download mobile app of the depository to monitor your holdings.
xviii.	Ensure that, both, your holding and transaction statements are received periodically as instructed to your DP. You are entitled to receive a transaction statement every month if you have any transactions.
xix.	Do not follow herd mentality for investments. Seek expert and professional advice for your investments
xx.	Beware of assured/fixed returns.

8. Rights of investors

- i. Receive a copy of KYC, copy of account opening documents.
- ii. No minimum balance is required to be maintained in a demat account.
- iii. No charges are payable for opening of demat accounts.
- iv. If executed, receive a copy of Power of Attorney. However, Power of Attorney is not a mandatory requirement as per SEBI / Stock Exchanges. You have the right to revoke any authorization given at any time.
- v. You can open more than one demat account in the same name with single DP/ multiple DPs.
- vi. Receive statement of accounts periodically. In case of any discrepancies in statements, take up the same with the DP immediately. If the DP does not respond, take up the matter with the Depositories.
- vii. Pledge and /or any other interest or encumbrance can be created on demat holdings.
- viii. Right to give standing instructions with regard to the crediting of securities in demat account.
- ix. Investor can exercise its right to freeze/defreeze his/her demat account or specific securities / specific quantity of securities in the account, maintained with the DP.
- x. In case of any grievances, Investor has right to approach Participant or Depository or SEBI for getting the same resolved within prescribed timelines.

- xi. Every eligible investor shareholder has a right to cast its vote on various resolutions proposed by the companies for which Depositories have developed an internet based 'e-Voting' platform.
- xii. Receive information about charges and fees. Any charges/tariff agreed upon shall not increase unless a notice in writing of not less than thirty days is given to the Investor.
- xiii. Right to indemnification for any loss caused due to the negligence of the Depository or the participant.
- xiv. Right to opt out of the Depository system in respect of any security.

9. Responsibilities of Investors

- i. Deal with a SEBI registered DP for opening demat account, KYC and Depository activities.
- ii. Provide complete documents for account opening and KYC (Know Your Client). Fill all the required details in Account Opening Form / KYC form in own handwriting and cancel out the blanks.
- iii. Read all documents and conditions being agreed before signing the account opening form.
- iv. Accept the Delivery Instruction Slip (DIS) book from DP only (preprinted with a serial number along with client ID) and keep it in safe custody and do not sign or issue blank or partially filled DIS.
- v. Always mention the details like ISIN, number of securities accurately.
- vi. Inform any change in information linked to demat account and obtain confirmation of updation in the system.
- vii. Regularly verify balances and demat statement and reconcile with trades / transactions.
- viii. Appoint nominee(s) to facilitate heirs in obtaining the securities in their demat account.
- ix. Do not fall prey to fraudsters sending emails and SMSs luring to trade in stocks / securities promising huge profits.

10. Code of Conduct for Depositories

(Part D of Third Schedule of SEBI (D & P) regulations, 2018)

A Depository shall:

- (a) always abide by the provisions of the Act, Depositories Act, 1996, any Rules or Regulations framed thereunder, circulars, guidelines and any other directions issued by the Board from time to time.
- (b) adopt appropriate due diligence measures.
- (c) take effective measures to ensure implementation of proper risk management framework and good governance practices.
- (d) take appropriate measures towards investor protection and education of investors.
- (e) treat all its applicants/members in a fair and transparent manner.
- (f) promptly inform the Board of violations of the provisions of the Act, the Depositories Act, 1996, rules, regulations, circulars, guidelines or any other directions by any of its issuer or issuer's agent.
- (g) take a proactive and responsible attitude towards safeguarding the interests of

- investors, integrity of depository's systems and the securities market.
- (h) endeavor for introduction of best business practices amongst itself and its members.
 - (i) act in utmost good faith and shall avoid conflict of interest in the conduct of its functions.
 - (j) not indulge in unfair competition, which is likely to harm the interests of any other Depository, their participants or investors or is likely to place them in a disadvantageous position while competing for or executing any assignment.
 - (k) segregate roles and responsibilities of key management personnel within the depository including
 - a. Clearly mapping legal and regulatory duties to the concerned position
 - b. Defining delegation of powers to each position
 - c. Assigning regulatory, risk management and compliance aspects to business and support teams
 - (l) be responsible for the acts or omissions of its employees in respect of the conduct of its business.
 - (m) monitor the compliance of the rules and regulations by the participants and shall further ensure that their conduct is in a manner that will safeguard the interest of investors and the securities market.

11. Code of Conduct for Participants

(Part A of Third Schedule of SEBI (D & P) regulations, 2018)

1. A participant shall make all efforts to protect the interests of investors.
2. A participant shall always endeavour to—
 - (a) render the best possible advice to the clients having regard to the client's needs and the environments and his own professional skills;
 - (b) ensure that all professional dealings are effected in a prompt, effective and efficient manner;
 - (c) inquiries from investors are adequately dealt with;
 - (d) grievances of investors are redressed without any delay.
3. A participant shall maintain high standards of integrity in all its dealings with its clients and other intermediaries, in the conduct of its business.
4. A participant shall be prompt and diligent in opening of a beneficial owner account, dispatch of the dematerialisation request form, rematerialisation request form and execution of debit instruction slip and in all the other activities undertaken by him on behalf of the beneficial owners.
5. A participant shall endeavour to resolve all the complaints against it or in respect of the activities carried out by it as quickly as possible, and not later than one month of receipt.
6. A participant shall not increase charges/fees for the services rendered without proper advance notice to the beneficial owners.
7. A participant shall not indulge in any unfair competition, which is likely to harm the interests of other participants or investors or is likely to place such other participants in a disadvantageous position while competing for or executing any assignment.
8. A participant shall not make any exaggerated statement whether oral or written to the clients either about its qualifications or capability to render certain services or about its achievements in regard to services rendered to other clients.

9. A participant shall not divulge to other clients, press or any other person any information about its clients which has come to its knowledge except with the approval/authorisation of the clients or when it is required to disclose the information under the requirements of any Act, Rules or Regulations.
10. A participant shall co-operate with the Board as and when required.
11. A participant shall maintain the required level of knowledge and competency and abide by the provisions of the Act, Rules, Regulations and circulars and directions issued by the Board. The participant shall also comply with the award of the Ombudsman passed under the Securities and Exchange Board of India (Ombudsman) Regulations, 2003.
12. A participant shall not make any untrue statement or suppress any material fact in any documents, reports, papers or information furnished to the Board.
13. A participant shall not neglect or fail or refuse to submit to the Board or other agencies with which it is registered, such books, documents, correspondence, and papers or any part thereof as may be demanded/requested from time to time.
14. A participant shall ensure that the Board is promptly informed about any action, legal proceedings, etc., initiated against it in respect of material breach or non-compliance by it, of any law, Rules, regulations, directions of the Board or of any other regulatory body.
15. A participant shall maintain proper inward system for all types of mail received in all forms.
16. A participant shall follow the maker–Checker concept in all of its activities to ensure the accuracy of the data and as a mechanism to check unauthorised transaction.
17. A participant shall take adequate and necessary steps to ensure that continuity in data and record keeping is maintained and that the data or records are not lost or destroyed. It shall also ensure that for electronic records and data, up-to-date back up is always available with it.
18. A participant shall provide adequate freedom and powers to its compliance officer for the effective discharge of his duties.
19. A participant shall ensure that it has satisfactory internal control procedures in place as well as adequate financial and operational capabilities which can be reasonably expected to take care of any losses arising due to theft, fraud and other dishonest acts, professional misconduct or omissions.
20. A participant shall be responsible for the acts or omissions of its employees and agents in respect of the conduct of its business.
21. A participant shall ensure that the senior management, particularly decision makers have access to all relevant information about the business on a timely basis.
22. A participant shall ensure that good corporate policies and corporate governance are in place.

