

ESTD 1993

CLIENT REGISTERATION FORM

(EQ-CASH, F&O, DEMAT)

Client Name :		
Client Code :	_ KYC No :	_ UCI Seg :
Client ID :	_ UCI Dt :	Sign :

DOCUMENTS REQUIRED	D - CHECKLIST
MANDATORY DETAILS REQUIRED :	REMARKS (OFFICE USE ONLY)
Mother Name	
Mobile No. - Fracil.	
E-mail Networth	
Occupation Type	
FOR INDIVIDUAL	
DOCUMENTS OF INDIVIDUAL	DOCUMENTS OF NOMINEE (required, if nomination facility is choosen)
Pol PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c (Provide any one proof of each, as per table)	Photograph pasted
Photograph pasted signed across	
FOR HUF	
DOCUMENTS OF HUF Pol PoA Bank & MICR/IFSC Proof (Provide any one proof of each, as per table) Proof of Demat A/c	DOCUMENTS OF KARTA (Individual member in whose name HUF is formed) Photograph pasted Pol PoA (Provide any one proof of each, as per table) SIGNATURES OF ALL COPARCENERS (family members other than Karta) Signatures on / Deed of declaration of HUF (any one) Signatures of all major coparceners on Power of Attorney
FOR CORPORATE	
DOCUMENTS OF CORPORATE Pol PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c (Provide any one proof of each, as per table) Board Resolution for investment in stocks market with name of authorised signatory(ies) and mode of operations (jointly or severally) □ On Letter head of Company and should be certified by two directors Articles & Memorandum of Association (Along with Certificate of Incorporation) Latest shareholding pattern □ Including list of all those holding control, either directly or indirectly, in the company in terms of SEBI Takeover Regulations, duly certified by the company secretary / WTD / MD (to be submitted every year) □ In case corporate shareholder holding more than 25% shares, shareholding pattern of that corporate is also required □ Balance Sheets for last 2 financial years (to be submitted every year) FOR PARTNERSHIP FIRM DOCUMENTS OF PARTNERSHIP FIRM □ Pol □ PoA □ Bank & MICR/IFSC Proof □ Income Proof □ Proof of Demat A/c (Provide any one proof of each, as per table) □ Certificate of Registration (in case of registered Partnership Firms Only) Partnership Deed Authority letter	DOCUMENTS OF ALL WHOLE TIME DIRECTORS (WTD) / TWO DIRECTORS IN CHARGE OF DAY TO DAY OPERATION Photograph pasted Pol PoA (Provide any one proof of each, as per table) DOCUMENTS / SIGN OF ALL AUTHORISED SIGNATORY(IES) Photographs letterhead of company Signatures letterhead of company DOCUMENTS OF ALL INDIVIDUAL PROMOTERS HOLDING CONTROL EITHER DIRECTLY OR INDIRECTLY Photograph pasted Pol PoA (Provide any one proof of each, as per table) DOCUMENTS OF ALL PARTNERS KYC of all partners (Demat A/c will be opened in the name of partners) Photograph pasted Pol PoA (Provide any one proof of each, as per table) DOCUMENTS & SIGN OF ALL AUTHORISED SIGNATORY(IES) DOCUMENTS & SIGN OF ALL AUTHORISED SIGNATORY(IES)
Balance Sheet for last 2 financial years (to be submitted every year)	Photographs
SOLE PROPRIET Sole Proprieter must make the application in his INDIVIDUAL name & capacity only If you are submitting bank details of Proprietorship firm as bank / income proof, please prov	vide letter from bank certifying name of individual proprietor
CHECK LIST FOR BACK OFFICE	
PAN VERIFIED CKYC ALL DOCUMENT SELF ATTESTED UCI - NSE DE BROKERAGE CVL KRA	
CHECKED BY	SIGN. BY
TYPES OF DOCUMENTS ACCEPTABLE :	
POI PAN Card, Income Certificate, ITR Copy	
POA Aadhar Card, Voter Id, Driving Licence, Bank Passbook, Electricity Bill, Bank Statement	
BANK Cancelled Cheque, Bank Statement, Bank Passbook	
ITR Acknowledgment, Salary Slip	
W FSB	

DOCUMENTS REQUIRED AS PER SEBI CIRCULAR CIR/MIRSD/16/2011 DATED 22-08-2011 Read wih SEBI Circular bearing Reference No. MIRSTD/SE/CIR-19/2009 dated 3-12-2009

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	Name of Stock Broker / Depository Particip Registered Office/Corespondence Address/Depository Division : 1 Phone No-011-41925330/	C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005	
	Director : Mr. Siddhant Mantry Phone No. : 9	0654406688, Email id : info@focusstockbroker.com	
	Compliance C	officer Details :	
	NSE & BSE : Mr. Ramesh Kumar	DP : Mr. Ramesh Kumar	
	Phone: 011-28711080, 011-28714145	Phone : 011-28711080, 011-28714145	
	Email id : info@focusstockbroker.com	Email id : info@focusstockbroker.com	
	TO BE FILLED BY INTERM	EDIARY / EMPLOYEE	

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

INTRODUCE	R DETAILS
Name of the Introducer: F I R S T N A M E	M D D L E N A M E
Sub-broker Remisier Authorized Person	Existing Client Others: (Please Specify Others)
Address of the Introducer :	
Employee Code : Employee E-mail :	
Mobile : Phone(with	n STD Code) :
	Signature of the

Introducer:

EXCHANGE-WISE INVESTOR GRIEVANCE CELL Exchange Weh Address Contact No. Email - Id ignse@nse.co.in NSE 022-26598100 www.nseindia.com is@bseindia.com / iscdelhi@bseindia.com BSE www.bseindia.com 022-22721233 Depository Web Address Contact No. Email - Id www.cdslindia.com **CDSL** complaints@cdslindia.com 022-22723333

Equity SEBI Registration No INZ000288836. Exchange Registration No.: NSE: TM No-09203, Clearing No-M50934, BSE: Member No-6778, Depository Participant: IN-DP-701-2022

Date:

- 4		T TO FACILE	FROM CLIENT
- A			ekiiwi li ieni

To,

FOCUS STOCK BROKERS LTD.

1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005

I/we hereby confirm that I/we have read, understood, agreed and received a duly executed copy of the:-

- Account Opening Form
- Trading Account Related Details & Tariff Sheet (Trading & Demat Account)
- Rights and Obligations of Stock Brokers, Authorised Person and Clients
- Rights and Obligations of Beneficiary owner and Depository Participant as prescribe by SEBI and Depository
- Internet and Wireless technology based trading facility provided by Stock Brokers to Client
- Risk and Disclosure document for capital market and derivative segments
- Guidance note-Do's and Don't for trading on the Exchange(s) for Investors
- Policies and procedures
- Terms & Conditions as Mutually agreed by me & FATCA & CRS Terms & Conditions
- Other disclosure/documents as agreed by me specifically in voluntary segment.

I/we am/are abiding by these terms & conditions. I/we reconfirm that I/we and stock broker shall refer any claim and/or disputes with respect to deposits, margin money, etc, to arbitration as per the Rules, Byelaws, and Regulation of the Exchanges where the trade is executed and circulars/notices issued there under as may be in force from time to time.

I/We reconfirm that I/we and Stock Broker shall refer all claims, differences or disputes between us arising out of or in relation to dealings, contracts and transaction made subject to the Bye-Laws, Rules and Regulations of the Exchange or with reference to anything incidental thereto or in pursuance thereof or relating to their validity, construction, interpretation, fulfillment or the rights, obligations and liabilities of the parties thereto and including any question of whether such dealings, transactions and contracts have entered into to arbitration in accordance with the provisions of these Byelaws and Regulations.

Thanks and Best regar	rds,	For Focus Stock Brokers Ltd.
Client Name :		
Г		Authorised Signatory / Director
Sign here :		



CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual

Important Instructions:

- A) Fields marked with '*' are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- d) For particular section update, please tick(
) in the box available before the section number and strike ffo the sections not required to be updated.





For office use only Application	
(To be filled by financial institution) KYC Numb	
Account Ty	pe*
. PERSONAL DETAILS	
Prefix	First Name Middle Name Last Name
Name* (Same as ID proof)	
Maiden Name (If any*)	
Father / Spouse Name* Mother Name*	
Date of Birth*	·
Gender* M- Male	F- Female T-Transgender
Marital Status*	☐ Unmarried ☐ Others
Citizenship*	Others
· _	
Residential Status* Resident Individual Foreign National	☐ Non Resident Indian☐ Person of Indian Origin
Occupation Type* S-Service (Private	
☐ O-Others (☐ Profes	
☐ B-Business	
☐ X- Not Categorised	(1)
2. TICK IF APPLICABLE RESIDENC	E EOD TAY DUDDOSES IN ULDISDICTION/S) OUTSIDE INDIA
	E FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA
ADDITIONAL DETAILS REQUIRED* (Manda	tory only if section 2 is ticked)
Country of Jurisdiction of Residence*	
Tax Identification Number or equivalent (If iss Place / City of Birth*	Country of Birth*
Trace / Oily of Birth	Ocultary of Birth
3. PROOF OF IDENTITY (Pol)*	
(Certified copy of <u>any one</u> of the following Proof of	Identity[Pol] needs to be submitted)
A- Passport Number	Passport Expiry Date DDD-MM-YYYYY
B- Voter ID Card	
C-PAN Card	
D- Driving Licence	Driving Licence Expiry Date DD — MM — Y Y Y Y
E- UID (Aadhaar)	
F- NREGA Job Card	
Z- Others (any document notified by the central	
S- Simplified Measures Account - Document	ment Type Identification Number
4. PROOF OF ADDRESS (PoA)*	
4.1 CURRENT/PERMANENT/OVERSEAS A	DDRESS DETAILS
(Certified copy of any one of the following Proof of	Address [PoA] needs to be submitted)
Address Type* Residential / Business	☐ Residential ☐ Business ☐ Registered Offce ☐ Unspecified
Proof of Address* Passport Voter Identity Card	□ Driving Licence □ UID (Aadhaar) □ NREGA Job Card □ Others □ please specify □ □
□ voter identity Card □ Simplified Measures Ac	
Address	
Line 1*	
Line 2	City /Town / Village*
	Post Code* State / U.T Country
China	

Email ID 6. DETAILS OF RELATED PERSON Addition of Related Person Deletion of Related Person (if available*) Related Person Type* Deletion of Related Person (if available*) Related Person Type* Deletion of Related Person Deletion of Related Person (if available*) Related Person Type* Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Authorized Representative Deletion of Related Person (if available*) Authorized Representative Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix First Name Deletion of Related Person (if available*) Prefix Fir		E / LOCAL ADDRESS DETAILS *			
Line 2 District Pin / Post Codo* State / U.T Country 4.4ADDBSSS INTIL BURSDOTTON BOTALS WILES A REPLICANT IS RESIDENT OUTSIDE INSIDE FOR TAX PURPOSES And place details Line 17 Line 2 Line 3 Line 4.7 Line 3 Line 4.7 Line 2 Line 3 Line 4.7 Line 4.7 Line 2 Line 3 Line 4.7 Line 4.	Same as Current / Perma	nent / Overseas Address details			
Line 3					
Distinct* Pin / Poet Code* State / U.T. Country # 3ASPRESS INTEL DIRECTION ECRILS WHERE APPLICANT IS RESIDENT OUTSICE NOW. FOR TAX PURPOSES MAJESTAGE of Code Distinct of Poet Code Disti				City /Tayya /)	(illa e a *
3-ADDRESS IN TREJURISDICTION DEATLS. WHERE APPLICANT IS RESIDENT OUTSIDE INDIFFOR TAX PURPOSES*(Applicable if section 2 is locked) Same as Current / Permanent / Overease Address details Same as Correspondence / Local Address details		Din / Doct Code*			
Same as Correspondence / Local Address details Lino 1* Lino	District	Pili / Post Code	State	/ U.T	Country
Line 2 Line 2 Line 3 State* Second	4.3ADDRESS IN THEJURI	ISDICTION DEATILS WHERE APPLI	CANT IS RESIDENT OUT	SIDE INDIA FOR TAX PURPOS	SES*(Applicable if section 2 is ticked)
Line 3 Li	☐ Same as Current / Perma	nent / Overseas Address details	☐ Same as C	correspondence / Local Address	details
Line 3 State* S. CONTACT DETAILS* (All communications will be sent or provided Mahila no. / Small D)					
State* State*				O' /T ()	···· +
Tot. (Off) Tot. (Res) Mobile M			71D / D 4 O 1		
Get Coff	State*		ZIP/ Post Code	e"	Country
Section Comment Comm	■ 5. CONTACT DETAILS	(All communications will be sent on pr	ovided Mobile no. / Email-II	0)	
Addition of Related Person Detection of Related Person Carterior of Related Person Carte	Tel. (Off)	Tel. (Res)		Mobile	
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Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*) Related Person Type* Guardian of Minor Assignee Authorized Representative Middle Name Last Name	■ 6. DETAILS OF RELAT	ED PERSON			
Related Person Type* Guardian of Minor Assignee Authorized Representative Prefix First Name Middle Name Last Name Last Name Prefix First Name Middle Name Last Name Last Name Middle Name Last Name Last Name Prefix Middle Name Last Name Last Name Prefix Middle Name Last Name Last Name Last Name Last Name Last Name Last Name Proof of IDeNTITY (Pol JO RELATED PERSON) Passport Expiry Date Delate Yell Yell Yell Yell Yell Yell Yell Y	_		KYC Number of Rela	ated Person (if available*)	
Name* (If KYC number and name are provided, below details of section 6 are optional) PROOF OF IDENTITY [Po] OF RELATED PERSON* A. Passport Number B. Voter ID Card C. PAN Card D. Driving Licence E. UID (Aadhaar) F. NREGA Job Card 2. Others (any document notified by the central government) I dentification Number 8. Simplified Measures Account - Document Type Identification Number 1. REMARKS (If any) 8. APPLICANT DECLARATION 1. Inversity delive that the details furnished above are tree and correct to the best of my knowledge and belief and I undertake to inform your of any dranges the first. 1. Inversity delive that the details furnished above are tree and correct to the best of my knowledge and belief and I undertake to inform your of any dranges the first. 1. Inversity delive that the details furnished above are tree and correct to the above registered number of my be hold table for it. 1. Investity consent to receiving information from Central KYC Registry through SMS-Email on the above registered number of my be hold table for it. 1. Investity consent to receiving information from Central KYC Registry through SMS-Email on the above registered number of my be hold table for it. 1. Investity consent to receiving information from Central KYC Registry through SMS-Email on the above registered number of my be hold table for it. 1. Investity consent to receiving information from Central KYC Registry through SMS-Email on the above registered number of my be hold table for it. 1. Investity consent to receive the my be hold table for it. 1. Investity consent to receive the my before the my be hold table for it. 2. Code investment of the my before the my before the my before the my be hold table for it. 2. Code investment of the my my danger through SMS-Email on the above registered number of my before the my be hold table for it. 2. Code investment of the my my danger through SMS-Email on the above registered number of my before the my danger through SMS-Email on the above registered number of	Related Person Type*	☐ Guardian of Minor			tative
(If KYC number and name are provided, below details of section 6 are optional) PROOF OF IDENTITY [Poi] OF RELATED PERSON* A- Passport Number B- Voter ID Card C- PAN Card D- Driving Licence E- UID (Aadhaar) F- NREGA Job Card Z- Others (any document notified by the central government) S- Simplified Measures Account - Document Type Identification Number 7- REMARKS (If any) 8- APPLICANT DECLARATION I hereby declare that the details limitated doce are true and compal to the best of my benothedge and bolinf and I undotate to inform you of any charges thems, immediately, in cose any of the above information from Central KYC Regery through SMSEmail on the above registered numbermenal address. 1 Pass TATION / FOR OFFICE USE ONLY Documents Received Certified Copies INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY Name FOURS STOCK BROKERS LTD. Code IN1198 Date Emp. Designation Emp. Branch Code Designation		Prefix First Nam	ne	Middle Name	Last Name
PROOF OF IDENTITY [Poil OF RELATED PERSON* A - Passport Number B - Voter ID Card C - PAN Card D - Driving Licence E- UID (Aadhaar) F - NREGA Job Card 2 - Others (any document notified by the central government) S - Simplified Measures Account - Document Type Identification Number 7 - REMARKS (If any) 8 - APPLICANT DECLARATION • Iterday decide the lattle deaths furnished above are tax and correct to the best of my barooletigs and belief and I undertable to inform you of any charges therein, minocidely, in case my of the above information from Central KYC Registry through SMSEmal on the above registered number remain address. Paste: D - Main - 2 O FICE USE ONLY Documents Received Certified Copies INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY Name FOCUS STOCK BROKERS LTD. Code IN198 Date - 2 0 Date: Date:	Name*	(If KVC number and name are provide	ad balaw dataila of agation	e are entianal)	
A- Passport Number B- Voter ID Card C- PAN Card D- Driving Licence E- UID (Aadhaar) F- NREGA Job Card Z- Others (any document notified by the central government) S- Simplified Measures Account - Document Type 8. APPLICANT DECLARATION 7. REMARKS (if any) 8. APPLICANT DECLARATION 1. Increase is the decided similarly actors that the decided similarly actors the the decided similarly actors the form to the control to be better or universectively. In case any of the above information is found to be falsor uniter meladed your misragesesting. I am access that in may be held listed for it. 1. Iterately consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. 2. Iterately consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. 9. ANTESTATION / FOR OFFICE USE ONLY Documents Received		· · · · · · · · · · · · · · · · · · ·	ed, below details of section	o are optionar)	
B-Voter ID Card C-PAN Card D- Driving Licence Expiry Date E- UID (Aadhaar) F- NREGA Job Card Z- Others (any document notified by the central government) S- Simplified Measures Account - Document Type 1 RemARKS (If any) 8. APPLICANT DECLARATION • Thereby declave that the details formering stone are true and correct to the best of my tonodedge and belief and I uncertake to inform your of any changes therein, immediately, in case any of the above information is found to be false or untrue or misleading or misleageneously. Interest y consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. Date: D-M-D-D OT M-D-D OT M-D-D OT M-D	_	OF RELATED PERSON*			
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D- Driving Licence Expiry Date D- MM Y Y Y Y E- UD (Aadhaar) F- NREGA Job Card Z- Others (any document notified by the central government) S- Simplified Measures Account - Document Type Identification Number 7- REMARKS (If any) 8. APPLICANT DECLARATION • Iherstly decians that the details furnished above are true and correct to the best of my knowledge and belief and 1 undertable to inform you of any changes the strength of the details furnished above are true and correct to the best of my knowledge and belief and 1 undertable to inform you of any changes the strength of the above information is found to be false or unitare or misleading or misorpretending, I am evente that I may be hold liable for it. • I heretly consent to receiving information from Central XYC Registry through SMS/Email on the above registred number/email address. Date: 9- ATTESTATION / FOR OFFICE USE ONLY Documents Received Certified Copies INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY Name FOCUS STOCK BROKERS LTD. Code IN1198 Date Emp. Name Emp. Ocide Emp. Designation Emp. Branch IN-PERSON VERIFICATION (IPV)	☐ B- Voter ID Card				
E- UID (Aadhaar) F- NREGA Job Card Z- Others (any document notified by the central government) S- Simplified Measures Account - Document Type Identification Number 7. REMARKS (If any) 8. APPLICANT DECLARATION • Inerety decire that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any charges therein, immediately, in case any of the above information is found to be false or untrue or miseascing or misepresering, I am news that I may be held table for it. • I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. Date: 9. ATTESTATION / FOR OFFICE USE ONLY Documents Received	☐ C-PAN Card				
F- NREGA Job Card Z- Others (any document notified by the central government) S- Simplified Measures Account - Document Type Identification Number 7. REMARKS (If any) 8. APPLICANT DECLARATION • Thereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertaike to inform you of any changes thereis, immediately, in case any of the above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it. • Thereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. • Thereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. 9. ATTESTATION / FOR OFFICE USE ONLY Documents Received Certified Copies INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY Name F0CUS STOCK BROKERS LTD, Code IN1198 Date Emp. Name Emp. Code Emp. Designation Emp. Designation Emp. Branch IN-PERSON VERIFICATION (IPV)	□ D- Driving Licence			Driving Licence Expiry Date	$e \ D \ D \ - \ M \ M \ - \ Y \ Y \ Y \ Y$
Z- Others (any document notified by the central government) S- Simplified Measures Account - Document Type 1. REMARKS (If any) 7. REMARKS (If any) 8. APPLICANT DECLARATION • Ihereby declare that the datals furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, minedulely. In case any of the above information is found to be lister or untrue or misleading or misrepresenting. I am aware that I may be need labele for it. • I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. Date: 9. ATTESTATION / FOR OFFICE USE ONLY Documents Received Certified Copies INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY Name F0CUS STOCK BROKERS LTD. Code IN1198 Date Emp. Code Emp. Designation Emp. Designation Emp. Branch Date:	☐ E- UID (Aadhaar)				
S- Simplified Measures Account - Document Type 7. REMARKS (if any) 8. APPLICANT DECLARATION • Thereby declare that the details furnished above are true and correct to the best of my knowledge and belief and 1 undertake to inform you of any changes therein, immediately, in case any of the above information is found to be failse or untrue or misleading or misrepresenting, I am aware that I may be held lable for it. • I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. Date: 9. ATTESTATION / FOR OFFICE USE ONLY Documents Received	☐ F- NREGA Job Card				
T. REMARKS (If any) S. APPLICANT DECLARATION I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for I. I hereby consent to receiving information from Central KY/C Registry through SMS/Email on the above registered number/remail address. Place :	Z- Others (any document r	notified by the central government)		Identification Number	
S. APPLICANT DECLARATION I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and 1 undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/remail address. Date:	☐ S- Simplified Measures	Account - Document Type		Identification Number	
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Date: Designation Employee Signature Place:	· · · · · · · · · · · · · · · · · · ·	e above information is found to be false or untrue or	misleading or misrepresenting, I am	aware that I may be held liable	
Date: Designation Employee Signature Place:	I hereby consent to receiving inform	nation from Central KYC Registry through SMS/Fro	nail on the above registered number	r/email address	
9. ATTESTATION / FOR OFFICE USE ONLY Documents Received	·				(2)
Documents Received					
INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY Name FOCUS STOCK BROKERS LTD. Code IN1198 Date Emp. Name Emp. Code Emp. Designation Emp. Branch IN-PERSON VERIFICATION (IPV) DOCUMENTS VERIFIED WITH ORIGINALS CLIENT INTERVIEWED BY Date: d d / m / 2 0 y y Employee/Sub-Broker/AP Details: Name:	9. ATTESTATION / FO	R OFFICE USE ONLY			
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Date Emp. Name Emp. Code Emp. Designation Emp. Branch DOCUMENTS VERIFIED WITH ORIGINALS CLIENT INTERVIEWED BY Date: d d // m m // 2 0 y y Employee/Sub-Broker/AP Details: Name: Code: Designation:	INSTITUTION DETAIL	S & KYC VERIFICATION CARRIED O	UT BY		0.7.0(17)
Date Emp. Name Emp. Code Emp. Designation Emp. Branch Documents Verified with Originals CLIENT INTERVIEWED BY Date: d d / m m / 2 0 y y Employee/Sub-Broker/AP Details: Name: Code: Designation:	Name FOCUS STOCK BROKE	RS LTD. Code IN1198		IN-PERSON VERIFI	CATION (IPV)
Emp. Name Emp. Code Emp. Designation Emp. Branch [Employee Signature] CLIENT INTERVIEWED BY Date: d d / m m / 2 0 y y Employee/Sub-Broker/AP Details: Name: Code: Designation:				DOCUMENTS VER	IFIED WITH ORIGINALS
Emp. Code Emp. Designation Emp. Branch Date: d d //m m // 2 0 y y Employee/Sub-Broker/AP Details: Name: Code: Designation:		2 0		CLIENT INTERVIEW	/ED BY
Emp. Designation Emp. Branch Employee/Sub-Broker/AP Details: Name: Code: Designation:					
Employee/Sub-Broker/AP Details: Name: Code: Designation:					
Name: Code: Designation:				Employee/Sub-Broker/A	P Details:
[Employee Signature] Designation:	np. Branon			Name:	
[Employee Signature] Designation:				Code:	
[Employee digitatine]		[Employee Signature]			
Signiture		[Employee Signature]			

2

WFSB

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Know Your Client (KYC) Application Form



Application No.:

Please fill in ENGLISH and in BLOCK LETTERS with black ink A. Identity Details (please see guidelines overleaf) 1. Name of Applicant (Please write complete name as per Certificate of Incorporation / Registration; leaving one box blank between 2 words. Please do not abbreviate the Name) **2. Date of Incorporation** | d | d | / | m | m | / | y | y | y | y | Country of Incorporation City of Incorporation : 3. Registration No. (e.g. CIN) ☐ Public Ltd. Co. ☐ Body Corporate ☐ Bank ☐ Government Body ☐ N **4. Status** Please tick (\checkmark) \square Private Ltd. Co. ☐ Partnership ☐ Trust / Charities / NGOs ☐ FII ☐ HUF ☐ Non-Government Organisation ☐ AOP □ Defence Establishment □ Body of Individuals □ Society □ LLP □ Others (Please speci 5. Permanent Account Number (PAN) (MANDATORY) | | | | Please enclose a duly attested copy of your PAN Card

		ce																		
City / Town / Village															Postal C	nde				
State												Country			1 ostar c	Juc				
Mobile (ISD)	(STD)									Fax	(ISD)	(STD)								
F-Mail Id. Provide your mobil Proof of addres	ile number ss to be none Bill (orovided only Land dress doc	by Ap d Line) cument (plicant. □*Late (as listed	Please st Elect	subm tricity B	it ANY ill * se specif	ONE of Latest Ba	t he follo nk Accoun	hange wing nt Sta	e & Dep valid	ository on documer	ts & tered	tick (√) agai	nst t	he do	cum	ent a	
Mobile (ISD) F-Mail Id. Provide your mobil Proof of addres *Latest Teleph Any other pr *Not more than 3 Registered Ac	ile number ss to be I none Bill (roof of ac Months ol	orovided only Land dress doc d. Validity	by App d Line) cument of /Expiry of	plicant. □*Late (as listed date of p	Please st Elect overle proof of	subm tricity B	it ANY ill * se specif	ONE of Latest Ba	t he follo nk Accoun	hange wing nt Sta	e & Dep valid	ository on documer	ts & tered	tick (√) agai	nst t	he do	cum	ent a	
Provide your mobil Provide your mobil Proof of addres *Latest Teleph Any other provided more than 3	ile number ss to be I none Bill (roof of ac Months ol	orovided only Land dress doc d. Validity	by App d Line) cument of /Expiry of	plicant. □*Late (as listed date of p	Please st Elect overle proof of	subm tricity B	it ANY ill * se specif	ONE of Latest Ba	t he follo nk Accoun	hange wing nt Sta	e & Dep valid	ository on documer	ts & tered	tick (√) agai	nst t	he do	cum	ent a	

C. Other Details (please see guidelines overleaf)

- 1. Name, PAN, DIN/UID, residential address and photographs of Promoters/Partners/Karta/Trustees/whole time directors (Please use Annexure on next page to fill in the details)
- 2. Any other information :

DECLARATION

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

NAME & SIGNATURE(S)
OF AUTHORISED
PERSON(S)

(1)

(1)

Place: Date:

FOR OFFICE USE ONLY

Intermediary name **OR** code

Focus Stock Brokers Ltd.

- ☐ (Originals Verified) Self Certified Document copies received
- (Attested) True copies of documents received

Seal/Stamp of the intermediary should contain
Staff Name
Designation
Name of the Organization
Signature

Date



ANNEXURE

	Name of the Applicant PAN of the Applicant	
	Name, PAN, Residential Address and photographs of Promoters/Partners/Karta/Trustees and Wholetime	Other Directors :
1.	Name	Photographs of
	Date of Birth d d / m m / y y y y Status	Promoters / Partners /
	Residential Address	Karta / Trustees / Wholetime / Other
		Directors &
	DIN UID DPIN	authorised signatories
	Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/C	Other Directors:
	Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not a Politically Exposed Person (PEP) Not Related to a Politically Exposed Person (PEP)	tically Exposed Person (PEP)
2.	Name	Photographs of
	Date of Birth d d / m m / y y y Status PAN	Promoters / Partners /
	Residential Address	Karta / Trustees /
		Wholetime / Other Directors &
	DIN	authorised signatories
	Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/C	Other Directors:
		cally Exposed Person (PEP)
- 3	Name	
٠.		Photographs of Promoters / Partners /
		Karta / Trustees /
	Residential Address	Wholetime / Other
		Directors & authorised signatories
	DIN UID DPIN DPIN (6 4 /T 4 AAA / 14 AAA / 15 AAA / 16 AAAA / 16 AAA / 16 AAAA / 1	
	Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/C Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not a Politically Exposed Person (PEP) Not Related to a Politically Exposed Person (PEP)	
_	Name	• • • • • • • • • • • • • • • • • • • •
4.		i notograpiis oi
	Date of Birth d d / m m / y y y y Status PAN PAN PAN	Promoters / Partners / Karta / Trustees /
	Residential Address	Wholetime / Other
		Directors &
	DIN UID UID DPIN DPIN	authorised signatories
	Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/C	
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5.	Name	Photographs of
	Date of Birthdd/mm/yyy Status	Promoters / Partners /
	Residential Address	Karta / Trustees / Wholetime / Other
		Directors &
	DIN UID DPIN	authorised signatories
	Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/Company of your authorized signatories/Promoters/Partner	Other Directors:
	Politically Exposed Person (PEF) Related to a Politically Exposed Person (PEF) Not a Politically Exposed Person (PEF) Not Related to a Politically Exposed Person (PEF)	cally Exposed Person (PEP)
	Date D D M M Y Y Y Y	sod Signatory(ics)
_	Date D D M M Y Y Y Y N Name & Signature of the Authori	sed signatory(les)

	I RADING & D	EMAT ACCOUNT RELATED AD	DITIONAL DETAILS	
BANK ACCOU	nt details		(Through which transaction	ns will generally be routed)
Primary Bank D	Details (for DP and Trading) :			
Bank Name :				
Account No.:		Bran Bran	nch:	
Address :				
,	NEFT / IFS Code :		9 Digit MICR Code :	
Virtual Payment	Address (VPA)			
Account Type :	Savings	nt Others :	(Please Sp	pecify)
Pay-Out Option :	As Per Group	Cheque	Online Transfer / NEF	T / RTGS
Bank/MICR/	/IFSC proof submitted :	Cancelled Cheque (with Client N	lame & A/c No. pre-printed)	
	ook* (If hand written, then with star		cation Letter* (with Rubber Stan	np & Sign of Bank Manager)
	ent* (Either on Bank Stationary or v		anager) *Docume	ents should not be more than 3 months old
-	k Details (for Trading, if any)	: 		
Bank Name :			.	
Account No. :		Brar	nch : _ _	
Address :	JEET / JEC Codo :		9 Digit MICR Code :	
Virtual Payment	NEFT / IFS Code :			
Account Type :	Savings Curre	nt Others :	(Please S	necify)
	nultiple banks, please provide p		(1 10030 0)	Jeony)
	ACCOUNT DETAILS	TOOL OF AIL DAIRS.	(Through which transaction:	s will generally be routed)
	AUUUUNI DLIAILO		(Through Willon transactions	o will goriorally bo routou,
	to open New Demat A/c			
I/We want t	to open New Demat A/c	vide following details)		
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FACILITIES SMC and E-mail plants from stock evolunges to
SMS and E-mail alerts from stock exchanges: SMS Alert E-mail Alert Both None
Please mention Mobile & E-mail ID in KYC form
Whether you wish to receive Contract Note: Electronic Physical
Whether you wish to receive Standard documents*: *Standard Documents -Rights & Obligations, Risk Disclosure Document, Guidance Note and Policies & Procedures *Please mention E-mail ID in KYC form *Standard Documents - Rights & Obligations, Risk Disclosure Document, Guidance Note and Policies & Procedures
I/We wish to avail facility of internet trading / wireless technology : Yes No
TRADING HISTORY
Trading Experience / Number of Years of Investment
Years in Equities Years in Derivatives Years in other Investment related fields No Prior Experience
Stock Profile: Nil < 5 Lac Rs. 5 - 25 Lac Rs. 25 - 50 Lac Rs. 50 - 1 Crore Above 1 Crore
If you are dealing with any other stock broker, please provide following detail
Name of the stock broker
Name of AP (If any)
Client Code (UCC)
Exchange SE MCX NCDEX ICEX
Details of disputes / dues pending from / to such stock broker / AP In case dealing with multiple stock brokers, please provide details of all. (Please Specify)
Past Actions Details of any action / proceedings initiated / pending / taken by SEBI / Stock Exchange / any other authority against the applicant / constituent or its patners / promoters / whole time directors / authorised persons in charge of dealing in securities & commodities during last 3 years. (Please Specify)
INCOME, EDUCATION & OTHER DETAILS
Gross Annual Income Detail Below 1 Lac 1 - 5 Lac 5 - 10 Lac Rs. 10 - 25 Lac 25 Lac - 1 Crore > 1 Crore
Net-worth in ₹(*Net worth should not be older than 1 year)as on (date) D _ D _ M _ M _ 2 _ 0 _ Y _ Y _ (Mandatory for Non-Individual Client)
Occupation Private Sector Service Public Sector Government Service Business Professional Agriculturist Housewife Student Forex Dealer Other (Please Specify)
Educational Details : High School Graduate Post-Graduate Doctorate Professional Degree Under High School Illiterate Other (Please Specify)
Client Non-commercial participant (financial participant/ trader/ arbitrager)
Category for Commercial participant (value chain participant/ exporter/importer/hedger
Commodities Farmers/FPOs Value Chain Participants (VCPs) Other (Please Specify) Other (Please Specify) (Please select anyone. if not selected, default option will be 'Other'. In case of any change in category, inform us immediately in writing)
Please tick, if applicable Politically Exposed Person Related to a Politically Exposed Person
Is the entity involved providing any of the following services - For Foreign Exchange / Money Changer Services
In case of Non-Individual, provide details of persons authorised to deal in stocks of behalf of the company / Firm/ others in Annexure A on page A 11.
Any other information :
GOODS & SERVICE TAX (GST) DETAILS (If applicable)
If you are registered for GST, kindly provide copy of registration certificate
GSTIN
G FSB 6

	DEMAT ACCOUNT OP	PENING FORM - CDSL (DPID 120962	(00)		
TYPE OF ACCOUNT				(Please whicheve	r is applica	ble)
STATUS		SUB-S	TATUS			
Individual	Individual Resident	Individual HUF / AOP	Minor	Other(Plea	se Specify)	
Foreign National	Foreign National	Foreign National - Deposi	tory Receipts	Other (Plea	se Specify)	
Non - Individual	Body Corporate	Trust OCB	Bank	Other (Please Specify)	To be filled	by the DP
NRI	NRI Repartiable	NRI Non-Repartial	ole Othe	ers (Specify)		
+ In case of Sole Proprietor / Partners	hip Firm / Unregistered Trust, Demat	t account should be opened in the nar	ne of Proprietor / Partn	ners / Trustees.		
ACCOUNT HOLDERS DETAILS	3					
Name of sole/1st Holder (Mr. /	Ms. / M/s.) :					
UID:				PAN:		
Name of 2nd Holder (Mr. / Ms. ,	/ M/s.) :					
UID:				PAN:		
Name of 3rd Holder (Mr. / Ms. /	/ M/s.) :					
UID:				PAN :		
Name* :						
*Name of the Sole Proprietor / Partner	ship Firm / Unregistered Trust should	d be mentioned above.				
Nationality : Indian	Other (Please Specify)					
DETAILS OF GUARDIAN	-			In case the accou	int holder is	minor
Name of Guardian (Mr. / Mrs /	Ms.):					
Relationship:				PAN:	P	
ADDITIONAL DETAILS						
Account statement require	ement As per SEBI Reg	ulation Monthly	Fortnig	htly Wee	ekly	Daily
I/We instruct the DP to red	ceive each and every credit	in my / our account		✓ Yes		No
		y/our Bank A/c through EC y for locations notified by SEBI froi		Yes		No
I/We request you to send I		-Holding Statement through	E-mail	Yes		No
	le Number as given in KYC Fo	rm		Vac		No
-	_	on our website under downloa	d section.	Yes		NO
	-	edge instructions in my / ou nd. (If not marked, default o		Yes		No
I/We would like to share th	ne E-mail ID with the RTA.			Yes		No
I/We would like to recieve	the annual report (If not mark	ed, default option will be 'Physical')	Physical	Electronic		Both
+ To register for easi, please	visit website www.cdslindia	.com [easi allows a BO to view his IS	IN balances, transactio	ons and value of the port	folio online.]	
DECLARATION						
 I/We confirm having read/been ex documents. I/We further confirm having read at do hereby agree to be bound by s 	ove information is found to be false or plained and understood the content and understood the contents of the Ri uch provisions as outlined in these	r untrue or misleading or misrepresent ts of the document on policy and pro ghts and Obligations', Policies & Proco documents. I/we have read, understo	ting, I am/we are award occdures of the stock edures document(s) an ood, agreed and receive	e that I/we may be held broker, tariff sheet and Id 'Risk Disclosure Docur red a duly executed copy	liable for it, all voluntary/n ment', 'Do's and of the:- • Acc	non-mandatory d Dont's'. I/We count Opening
by me/us • FATCA & CRS Terms		sure/documents as agreed by me/us ter • Other disclosure/documents a	s agreed by me/us sp	, ,		, ,

	Sole / First Holder/ Authorised Signatory	Second Holder/ Authorised Signatory	Third Holder/ Authorised Signatory
Signature			
Oignature	4 🗷	S	Ø.

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



NOMI	NATION FORM						FOR INDIVIDUAL ONLY
Nomi	nation Details	Nomination Reg	jistration l	No			Date
I/We w	ish to make a nominatio assets held in my / our	on. [As per details give account in the event o	en below] l/ of my / our	'We wish to make a nominat death.	ion and do hereby nomin	ate the follow	ving person(s) who shall receive
	nation can be made nees in the account.	upto three	De	etails of 1 st Nominee	Details of 2 nd No	minee	Details of 3 rd Nominee
1	Name of the nomine	ee(s) (Mr./Ms.)					
2	Share of each	Equally		%		%	%
	Nominee	[If not equally, specify 9	6]	Any odd lot after division s	hall be transferred to the	he first nomi	nee mentioned in the form.
3	Relationship With t						
4	Address of Nominee	e(s)					
	City / Place: State & Country:						
		PIN Code					
5	Mobile/Telephone N	o. of nominee(s)		<u> </u>			<u>'</u>
6	Email ID of nominee	(s)					
7	Nominee Identificati [Please tick any one of provide details of same of the photograph & Signation of the proof of Identity] Nominee Identification of the provided Additional of the proof of Identity	of following and ne]					
Sr. N	os. 8-14 should be fille	d only if nominee(s)	s a minor:				
8	Date of Birth (in case	of minor nominee(s)}				
9	Name of Guardian (I {in case of minor n						
10	Address of Guardian	ı(s)					
	City / Place: State & Country:	PIN Code					
11	Mobile/Telephone n			I			
12	Email ID of Guardiar	1					
13	Relationship of Guar	rdian with nominee					
14	Guardian Identificat [Please tick any one of provide details of sam Photograph & Sign Aadhaar Sa	of following and ne]					
	Proof of Identity	Demat Account II	,				
				CLIENT SIGNATURE	*		
	Fi	rst / Sole Holder		Second H			Third Holder
Sign Clien	of	,	5 <u>K</u>		Ø.		<u>K</u>
Date :		y y Place :			- 4000		~ 00~~~
			mination n	nade by the account holder	(s), if any	J	
DECI	DECLARATION FORM FOR OPTING OUT OF NOMINATION FOR INDIVIDUAL ONLY						
I / We involve would may a	I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account. NAME AND SIGNATURE OF HOLDER(S)*						
		rst / Sole Holder	— NA	Second H		 [Third Holder
Nom		ior / onig uniget		Second H	oluel		Hilliu noluër
Nam Sign	of		· ~		~		~_
Clien		Ness:	6 🗷	<u> </u>			
Date :	D D M M 2 0	Y Y Place:]	

^{*} Signature of witness, along with name and address are required, if the account holder af fixes thumb impression, instead of signature

TARIFF SHEET

TARIFF SHEET BROKERAGE STRUCTURE EQUITY & COMMODITY						
	% of Turnover	Minimum	Brokerage Slab % of Turnove	Minimum		
Equity Delivery		Per Share	Equity Normal	Per Share		
Equity Options		Rs Per Lot	Equity Futures	Per Share		
Currency Options		Rs Per Lot	Currency Futures	Per Share		
Commodity Options		Rs Per Lot	Commodity Futures	Per Share		
Commodity Delivery		.25	·	Sign here in case of cutting / overwriting		

Important Note: In case of Physical Contract notes or other related documents being dispatched to client, a difference of Rs.25/- +GST in total brokerage booked on a particular contract would be charged to ward minimum processing fee. Delay payment charges @2% per month would be charged for debit/shortage in payin/ margin default, as per exchange requirements. Depository/Pledge charges for the movement of shares between pool/beneficiary/margin account for payinlpayout or margin purpose will be charged. Transaction charges/ Clearing Charges/other statutory charges/ courier/ administration/ processing charges will be charged as applicable. Handling charges for issue of account statement, copy of contract note etc. will be charged as applicable. One time processing fee Rs.50/- per segment.

DP CHARGES

NATURE OF SERVICES	NATURE OF SERVICES				
NATURE OF SERVICES	Regular Scheme	Life Time	SuperSaver	Corporate	
Account Maintenance Cycle Four Quarter (O		Life Time	Life Time	Yearly	
Maintenance Charges (Non-Corporate Account)	s (Non-Corporate Account) ₹499/- for per year		₹499/- for lifetime	₹1999/- for per year	
Delivery Market Transaction	Rs20/- per instruction or 0.02% of transaction value, whichever is higher, subject to maximum of Rs100/-	Rs15/- per instruction or 0.02% of transaction value, whichever is higher, subject to maximum of Rs100/-	Rs10/- per instruction or 0.012% of transaction value, whichever is higher, subject to maximum of Rs50/-	Rs25/- per instruction or 0.02% of transaction value, whichever is higher, subject to maximum of Rs100/-	
Delivery Off Market Transaction Rs25/- per instruction 0.03% of transaction whichever is higher, so to maximum of Rs999		Rs25/- per instruction or 0.03% of transaction value, whichever is higher, subject to maximum of Rs999/-	Rs20/- per instruction or 0.025% of transaction value, whichever is higher, subject to maximum of Rs500/-	Rs25/- per instruction or 0.03% of transaction value, whichever is higher, subject to maximum of Rs999/-	
Pledge Creation/ Closure/ Invocation	Rs20/- per instruction or 0.02% of transaction value, whichever is higher	Rs15/- per instruction or 0.02% of transaction value, whichever is higher	Rs20/- per instruction	Rs25/- per instruction or 0.02% of transaction value, whichever is higher	
Demat Charges	Rs20/- per certificate with min billing of Rs100/-	Rs10/- per certificate with min billing of Rs100/-	Rs10/- per certificate with min billing of Rs50/-	Rs20/- per certificate with min billing of Rs100/-	
Remat Charges	Rs100/- per certificate	Rs100/- per certificate	Rs50/- per certificate	Rs100/- per certificate	
Mutual funds (Destat / Redemption)	Rs50/- per instruction plus courier charges	Rs50/- per instruction plus courier charges	Rs50/- per instruction plus courier charges	Rs50/- per instruction plus courier charges	
Instruction Booklet	Rs50/- per booklet plus courier charges	Rs50/- per booklet plus courier charges	Rs50/- per booklet plus courier charges	Rs50/- per booklet plus courier charges	

Note:

- $The \ Depository \ Participant shall \ reserve the \ right to \ revise the \ charges \ by \ giving \ not \ less \ than 30 \ days \ notice \ in \ writing \ to \ the \ client.$
- Value of Transaction will be in accordance with the Depository formulae.
- Modification in client detail, 40/- per instance. Maintenance charges will be charged in advance at the time of opening the account.
- Rejection charges 50/- per rejection plus courier charges.
- Slip Rejection/Fail charges 20/- per rejection.
- Off-Market Instruction not received prior to 24 hours of execution will be received at client's risk.
- Instruction for Pay-In of securities to transfer from client account to CM Pool account, Inter settlement instruction, CM Pool to CM Pool transfer and delivery instruction will be accepted up till 4:00 PM on working day prior to Pay-in date.

 Periodic statement free on Email and Rs 40 towards courier charges if sent physically.

 Non-periodic statement shall be charged @ 5/- per page and postage/courier charge @ Rs 40 or actual charges whichever is higher. In case of non-payment of bill/dues within 30 days of due date, interest shall be charged @ 2.0% per month on the outstanding dues.

- Rs 100 will be charged to client in case of New Delivery Instruction Booklet is requested without requisition slip.
- All charges are exclusive of GST. Taxes and other Government levies will be charges extra as applicable from time to time.

"AS per SEBI Circular No. CIR/MRD/DP/22/2012 dated 27th August 2012, all clients who are willing to hold only one demat account as first holder and DP holding valuation will be maintained below Rs. 2 Lac. Is eligible to opt for BSDA (Basic Service Demat Account) subject to term and conditions mentioned by SEBI." To opt BSDA scheme please sign a separate scheme sheet which can be obtained from our office."

	vish to avail BSDA our Demat Account ATURES :	☐ I/We wish to ava facility in my/our	il BSDA Demat Account.		
1	<u> </u>	2	<u> </u>	3	Ø.
Sole/First Holder Signature		Second Holde	r Signature	Third Hold	er Signature



DECLARATION BY KARTA & ALL THE CO-PARCENERS (for HUF only)

To

FOCUS STOCK BROKERS LTD.

1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005

Dear Sir/Madam,

- 1. Whereas the Hindu Undivided Family of is carrying on business in the firm name and style of at as given in PAN card of HUF or we intent to deal have or desire to have Securities Trading Account with Focus Stock Brokers Ltd. (hereinafter referred as Member). We undersigned, hereby confirm and declare that we are the present adult coparceners of the said joint family. Name of Karta & Co-parceners are given in below table.
- 2. We confirm that affairs of HUF firm are carried on mainly by the Karta on behalf and in the interest and for the benefits of all the co-parceners. We hereby authorize the Karta on behalf of the HUF to deal with the member and the said trading member is hereby authorized to honor all instructions oral or written, given by him on behalf of the HUF. He is authorized to sell, purchase, transfer, endorse, negotiate documents and/or otherwise deal through the member on behalf of the HUF.
 - He is also authorize to sign execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may be deemed necessary or expedient to open account and give effect to this purpose. We are, however, jointly and severally responsible for all liabilities of the said HUF firm shall be recoverable from the assets of any one or all of us and also from the estate of the said joint family including the interest thereon of every co-parceners of the said joint family, including the share of the minor co parceners, if any.
- 3. We undertake to advise the member in writing of any change that may occur in the Karta ship or in the constitution of the said joint family or of the said HUF firm and until receipt of such notice by the member who shall be binding on the said joint family and the said HUF firm and on our respective estates. We shall, however continue to be liable jointly and severally to the member for all dues obligations f the said HUF firm in the Member's book on the date of the receipt of such notice by the member and until all such dues and obligations shall have been liquidated and discharged.
- 4. The names and dates of the birth of all the present minor & major co-parceners of the said joint family are given below. We also undertake to inform you in writing as and when each of the said members attains the majority and is authorized to act on behalf of, and bind the said HUF firm.

List of Family Members

S. No.	Name of the Co-parceners (Including Minor also)	Relationship with Karta	PAN No.	Address (if other than Karta's address)	Date of Birth	Signature
1.		KARTA				
2.						
3.						
4.						
5.						
6.						

Note: In case of adult family member provide copy of PAN card or any other ID proof (DL/Voter ID/ Passport). In case of Minor Family Member provide copy of age certificate (Birth Certificate/School Leaving Certificate).				
Signature of Karta with Rubber Stamp				



STATEMENT OF ACCOUNT RECEIVING IN ELECTRONIC MODE

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FOCUS STOCK BROKERS LTD.

1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005

I/We had entered into DP BO agreement with you. I/We confirm having opted to receive the statement of accounts pertaining to our BO account in electronic mode in lieu of physical copy of the statement of account.

I/We confirm that the dispatch of statement of account to me/us at the following email address shall constitute full and absolute discharge of your obligation under the above agreement to provide me/us with statement of my/our BO account. But, I/we reserve my/our right to receive the physical copy of statement of accounts despite receiving the same in electronic mode on the given Email Id as per KYC, if such a demand is made in writing on you.

I/We confirm that any change in the aforesaid email address or any other instructions with regard to dispatch/service of my/our statement of account on me/us shall not be binding upon you unless you are intimated in writing by me/us by acknowledged delivery.

Yours faithfully,						
Signatures —				<u> </u>	<u> </u>	
	First Holder Signature ficial owner/s Signature/s		Second Holder Signatur	e T	hird Holder Signature	
Name/3 of the bene	niciai owner/s Signature/s	s (all joint noiders)				
	FATO	CA & CRS DECLARA	TION (FOR INDIVIDUAL)			
Do you have any no	n-indian Country(ies) of B	irth / Citizenship / I	Nationality and Tax Reside	ency?	Yes No	
Sole/First Holder/Guar	dian Yes No	Second Holder	Yes No	Third Holder	☐ Yes ☐ No	
Country of Birth		Country of Birth		Country of Birth		
Country of Citizenship/ Nationality		Country of Citizenship/ Nationality		Country of Citizenship/ Nationality		
Are you a US Specified Person?	Yes No Please provide Tax Payer Id	Are you a US Specified Person?	Yes No Please provide Tax Payer Id	Are you a US Specified Person?	Yes No Please provide Tax Payer Id	
Country of Tax Residency* (Other then India)	Taxpayer Identification No.	Country of Tax Residency* (Other then India)	Taxpayer Identification No.	Country of Tax Residency [†] (Other then India)	* Taxpayer Identification No.	
1.		1.		1.		
2.		2.		2.		
Address		Address		Address		
*Please indicate all o	L countries in which you are a	resident for tax nur	nose and associated Tayna	 over identification nu	 mher	
Tiodoo malouto un c	ocantinoo iii winon you aro t	<u> </u>	erms and Conditions	iyor idonanodalon na	mboi.	
I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Focus Stock Brokers Ltd for any modification to this information promptly.						
I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).						
0'	9	<u> S</u>		Z.	<u> </u>	
Signatures	Sole/First Holder Signature		Second Holder Signature		nird Holder Signature	
*For detail terms & conditions please see Client Copy						

FATCA, CRS & ULTIMATE BENEFICIAL OWNERSHIP (UBO) SELF CERTIFICATION FORM FOR NON-INDIVIDUALS

	FATCA & CRS Declaration							
Please	tick the applicable tax resident declaration -							
	Entity" a tax resident of any country other than India please provide country/ies in which the entity is a residen	[t for tax purpo	Yes No ses and the associated Tax ID number below.)					
Sr. No.	Country		Tax Identification Number *	Identification Type (TIN or Other, please specify)				
1.								
2.								
3.								
	se Tax Identification Number is not available, kindly provide e TIN or its functional equivalent is not available, please pro			tion Number or GIIN, etc.				
In case	e the Entity's Country of Incorporation / Tax residence is U.	S. but Entity is	s not a Specified U.S. Person, mention Entity's ex	cemption code here				
PART A	A (to be filled by Financial Institutions or Di	rect Repor	ting NFEs)					
1.	We are a, Financial institution (Refer Instruction 1 of Part C) or Direct reporting NFE (Refer Instruction 3(vii) of Part C) (please tick as appropriate)	Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below Name of sponsoring entity						
•	GIIN not available (please tick as applicable)	Applied for Not obtained – Non-participating FI						
			ired to apply for - please specify 2 digits sub-cat					
PART	B (please fill any one as appropriate "to be t		Es other than Direct Reporting NF.	Es")				
1.	Is the Entity a publicly traded company (that is, a compar whose shares are regularly traded on an established securities market) (Refer Instruction 2a of Part C)	ıy	Yes (If yes, please specify any one stock exchange or Name of stock exchange	- ,				
2.	Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer Instruction 2b of Pa		Yes (If yes, please specify name of the listed compan Name of listed company Nature of relation: Subsidiary of the Listed Name of stock exchange					
3.	Is the Entity an active NFE (Refer Instruction 2c of Part C)		Yes	(Mention code – refer instruction 2c of Part C)				
4.	Is the Entity a passive NFE (Refer Instruction 3(ii) of Part	C)	Yes Nature of Business					
UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)								
064-	` _							
	lory (Please tick applicable category):	Unlisted C						
	Jnincorporated association / body of individuals	Public Cha	aritable Trust Religious Trust	Private Trust				
	Others (please specify	ALL countries of) of tax residency / permanent residency / citizen:	ship and ALL Tax Identification Numbers for FACH				
contro	Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). (Please attach additional sheets if necessary) Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details (Refer 3(vi) of Part C)							



Details	UB01	UB02	UB03	
Name of UBO				
UBO Code (Refer Instruction 3(iv) (A) of Part (C)				
Country of Tax residency*				
PAN*				
Address				
	Zip	Zip		
	State:	State:		
	Country:	Country:	-	
*** T	☐ Residence ☐ Business	☐ Residence ☐ Business	☐ Residence ☐ Business	
Address Type	Registered Office	☐ Registered Office	☐ Registered Office	
Tax ID [%]				
Tax ID Type				
City of Birth				
Country of Birth				
Occupation Type	☐ Service ☐ Business	☐ Service ☐ Business	☐ Service ☐ Business	
occupation Type	Others	Others	_ Others	
Nationality				
Father's Name				
Gender	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others	
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY	
Percentage of Holding (%) \$				
* To include US, where controlling person is a Us #If UBO is KYC compliant, KYC proof to be enclo		must be attached. Position / Designation like D	irector / Settlor of Trust / Protector of	

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

\$Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary

FATCA - CRS Terms and Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which require Indian financial institutions to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit 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 relationships with us or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the 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.

I/We have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read alongwith the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby agree and confirm to inform Focus Stock Brokers Ltd for any modification to this information promptly. I/We further agree to abide by the provisions of the Scheme related documents inter alia provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI)'.

	First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Designation			
Signature	K	<u>«</u>	Ø.



UNDERTAKING CUM INDEMNITY - IN RESPECT OF FACSIMILE INSTRUCTION FOR OPERATION OF DEPOSITORY ACCOUNT FOCUS STOCK BROKERS LTD. 1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005 I/We execute this UNDERTAKING CUM INDEMNITY in favour of FOCUS STOCK BROKERS LTD. (a company incorporated and registered under the Companies Act, 1956) and having its Registred Office at 1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005 hereinafter called "the DP" (which expression shall unless it be repugnant to the context or meaning thereof mean and include its successors in title) as follows WHEREAS I/We maintain a Beneficial Owner Account (s) ("the said Account") mentioned above, The DP shall not be liable for any losses or damages which I/We may suffer as a consequence of the DP acting in accordance with or in reliance upon, any Fax with the DP at its main/branch office, located at _ Submission or otherwise pursuant to the authority conferred herein, upon the DP. As per the instructions for operation of the said Accounts, the same is allowed to be operated by I/We shall indemnify the DP and CDSL and keep them indemnified and save harmless, at all times against any and all claims, losses, damages, costs liabilities and expenses incurred, suffered or paid or incurred by the DP or required to be incurred, suffered or paid us or the persons authorised, in that behalf (hereinafter referred to as "Authorised Person/s"). AND WHEREAS in the day to day business, I am/we are required to give urgent instructions to the by the DP and also against all demands, actions, suit proceedings made, filed / instituted DP for operation of the said/account: against the DP, in connection with or arising out of or in relation to or as a consequence of : WHEREAS the DP has agreed to accept, the original instruction slip, a fax submission thereof The DP acting pursuant to, in accordance with or relaying upon, any Fax submission signed by the authorised persons to operate the said account under their signatures, subject to or otherwise pursuant to the request and authority conferred herein and/or; the indemnity herein offered by me/us to the DP on the terms and conditions herein mentioned. The DP acting pursuant to in accordance with or relying upon any Fax Submission NOW IN CONSIDERATION OF THE ABOVE, I/We hereby irrevocably agree, confirm and received by the DP which it believes in good faith to be such a fax Submission; undertake to the DP as follows: I/We shall transmit the Fax instructions only to the fax number informed/provided to us by 1 iii. Any unauthorised or fraudulent Fax Submission to the DP. PROVIDED that this the DP. indemnity shall not be available to the DP, if the liabilities for which the DP seeks The Fax submission shall be signed by the Authorised Person/s mentioned in the List of 2. indemnification hereunder, arises directly and completely from its own negligence Authorised Signatories submitted by me/us in the account opening form on behalf of or willful default. me/us and their signatures shall be in the same manner and way as has been informed to The DP not having acted on the Fax submission due to non-receipt of the iv. the DP by me/us and the DP is hereby requested and authorised, (but is not obliged to) transmission or receipt of incomplete or partly / fully unreadable transmission. rely upon and act, in accordance with such Fax Submission which is signed or bonafide believed by the DP to have been signed, by the Authorised Person/s. The DP not having acted on any Fax submission sent by me/us on a number other than the number mentioned by the DP for the purpose of fax transmission The DP is requested by me/us and shall be entitled to treat any fax Submissions as fully The DP shall not be under any obligation at any time to maintain any facility for the and dully authorised by and binding upon me/us and further be entitled (but not bound) to take any steps relying upon the same, believing the Fax Submission, in good faith as receipt of any Fax Submission or to ensure the continued operations or availability of appropriate, regardless, of the amount of money involved and notwithstanding any error in any such facsimile facilities or equipment, and/lwe shall not hold the DP liable for any transmission or reception of such Fax Submission or any misunderstanding or ambiguity loss consequent to non-availabilty of the said facility. lack of clarity in the terms of such fax Submission.4. I/We acknowledge and confirm that I am/we are aware that by the very nature of I/We shall upon making any Telefax Submission hereunder, deliver to the DP without any telecommunications services, the Fax transmissions may not be received properly and delay within two working days, the original hard copy of the Fax Submission (the may be clearly legible. I/We agree to assume and bear all the risks involved in respect of Hardcopy) signed by the Authorised Person's as aforesaid. Each Hardcopy shall bear the such errors and misunderstanding and the DP shall not be responsible in any manner for the following words on the top of the Instruction slip. "This is a Hardcopy Each of Fax same or breach of confidentially thereto and shall also not be liable for any claims, loss, Submission to you, transmitted on ____(Date) day of __ __(month), 20 damage, cost or expense and liability arising therefrom. The DP may, but shall not be obliged to, await receipt of the Hard copy prior to taking any This indemnity is without prejudice to the DP's other rights, privileges, powers, and action in connection with the Fax Submission and shall not be obliged to follow-up with remedies in law and the DP may delay enforcing its rights without at any time losing them me/us for the originals. Further the storage of a photocopy of the Fax transmission sent and any waiver of a right by the Dp hereunder or available to it by law, shall not be deemed by me/us shall be conclusive evidence of instruction to the DP for having acted on such to be a waiver of any other rights or of the same right at another time. instructions and I/We hereby agree and acknowledge the same". The DP may stop/terminate this facility given to me/us by giving seven day prior written I/We hereby agree that in case the DP does not receive the hard copy of the instruction notice to me/us. However, any such termination shall not affect anything done or any within 2 working days, the DP may discontinue the said facility. In such cases the DP will rights or liabilities accrued prior to the termination and all the above indemnities given by do so with immediate effect after informing me orally / in writing / by fax. I/We undertake me/us to the DP hereunder shall survive any such termination. However in case of that I/We shall not hold the DP liable for any loss to me/us in case the DP does not act on termination as mentioned in point 6 above, no such notice need to be given by the DP. fax instruction received by the DP in such a case. The Provisions relating to arbitration contained in the Rights & Obligation document shall be The DP shall not be required to confirm(whether orally, in writing or otherwise) any fax applicable to any dispute or difference that may arise in respect of such fax submission or (verify the Identify of the Authorised person/s or his/her/their signature/s transmission including all disputes with regard to the receipt of the fax Transmission by making or giving the fax submission or purporting to do so. The DP shall be under no duty to set and/or adopt any procedure for the purpose of such I/We specifically agree and confirm that regardless of the place from which the fax transmission in question may have been transmitted to the DP any matter or issue arising confirmation or verification and if at all there is any, the DP shall not be obliged to strictly adopt or comply with the same in any or every instance. hereunder shall be governed by and construed exclusively in accordance with the Indian

Dated at _____(Place) this _____(Date) day of _____(Month) , ____(Year)

		CLIENT SIGNATURE	
	First / Sole Holder	Second Holder	Third Holder
Sign of Client	10 🕊	K	<u> </u>
Date :		Place :	
	ı	WITNESS FOR CLIENT (Mandatory)	
Name			
Address			
Sign of Witness			0-0

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laws and shall be subject to the exclusive jurisdiction of the Courts of Mumbai (India) alone.

TERMS AND CONDITIONS-CUM-REGISTRATION / MODIFICATION FORM FOR RECEIVING SMS ALERTS FROM CDSL

Definitions:

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

- "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.
- 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
- '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.
- "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.
- "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

- I. 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 account holders 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.
- 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.
- 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.

- 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.
- 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.
- If the BO finds that the information such as mobile number etc., has been changed with out 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).

Mobile Number and Email ID is same as per KYC page, on which message are to be sent. The mobile number is registered in the name as given in KYC

Signatures 11 🖋



ANNEXURE - B

TERMS AND CONDITIONS FOR AVAILING TRANSACTION USING SECURED TEXTING (TRUST) SERVICE OFFERED BY CDSL

Definitions:

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

- "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.
- 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
- 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 B0 is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the B0 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 B0 agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
- 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.
- 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.
- 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.

- 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.
- 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.
- 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.
- 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.
- Disclaimer

Depository shall be absolved of any liability in case :-

- 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.
- There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.

Dear Sir/Madam,

I/We wish to avail the following facility/ies provided by the depository on my/our mobile number as provided below subject to the terms and conditions as specified by CDSL.

- a. SMART SMS alert facility
- b. TRUST Transaction using Secured Texting facility.

(please note that SMS alert facility is mandatory if TRUST facility is opted for)

Mobile Number and Email ID is same as per KYC page, on which message are to be sent. The mobile number is registered in the name as given in KYC

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 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.

(Existing users registered for SMS 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.)

	Sole/First Holder Signature	Second Holder Signature	Third Holder Signature
Signatures	12 🗷		



VERBAL ORDER ACCEPTANCE AUTHORISATIONS, FIT AND PROPER PERSON DECLARATION, GENERAL AUTHORITY, RUNNING ACCOUNT AUTHORISATIONS

FOCUS STOCK BROKERS LTD.

1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005

A. VERBAL ORDER ACCEPTANCE AUTHORISATION

I/we am dealing with you as client at NSE/BSE in Capital, Derivative, Segment. As my/our broker i.e. agent I/We direct and authorize you to carry out trading/ dealing on my/ our behalf as per instruction given below.

I/We agree and acknowledge that it is advised by you that I/We should give instruction for order placement/ modification and cancellation in writing and to avoid disputes, I/We must give instruction in exactly the format in duplicate (carbon copy/ photocopy only) and take signatures of at least two authorized officers at the branch along with company stamp on the carbon copy/ photocopy of the instructions in acknowledgment of receipt of my our instructions.

However as I/We shall be dealing by ordering over phone and even if we visit the branch, the fluctuations in market are so rapid the it is not practical to give written instructions for order placement/modification and cancellation, I/We hereby authorize you to accept my/our authorized representative's verbal instructions for order placement/modification and cancellation in person or over phone (fixed line/mobile phone) and execute the same. I/ We understand the risk associated with verbal orders and accept the same, and agree that I/We shall not be entitled to disown orders and consequent trades (if any) by shifting the burden of proof by asking you to prove the placement/modification and cancellation of orders through telephone recording or otherwise.

I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions given above.

B. FIT AND PROPER PERSON DECLARATION

As per Regulation 19(1) of Securities Contracts (Regulation) (Stock Exchanges and Clearing Corporations) Regulations, 2012 (SECC Regulations) which states that no person shall, directly or indirectly, acquire or hold equity shares of a recognised Stock Exchange or recognised Clearing Corporation unless he is a fit and proper person in terms of Regulation 19 and 20 of the said SECC Regulations.

Regulations 19 and Regulations 20 as prescribed by SEBI (herein referred as "Board") are reproduced below:

A. Eligibility for acquiring or holding shares.

- (1) No person shall, directly or indirectly, acquire or hold equity shares of a recognised stock exchange or recognised clearing corporation unless he is a fit and proper person.
- (2) Any person who, directly or indirectly, either individually or together with persons acting in concert, acquire equity shares such that his shareholding exceeds two per cent of the paid up equity share capital of a recognised stock exchange or recognised clearing corporation shall seek approval of the Board within fifteen days of the acquisition.
- (3) A person eligible to acquire or hold more than five per cent of the paid up equity share capital under sub-regulation (2) of regulation 17 and sub-regulation (2) of regulation 18 may acquire or hold more than five per cent of the paid up equity share capital of a recognized stock exchange or a recognised clearing corporation only if he has obtained prior approval of the Board.
- (4) Any person holding more than two per cent. of the paid up equity share capital of the recognised stock exchange or the clearing corporation on the date of commencement of these regulations, shall ensure compliance with this regulation within a period of ninety days from the date of such commencement.
- (5) If approval under sub-regulation (2) or (3) is not granted by the Board to any person, such person shall forthwith divest his excess shareholding.
- (6) Any person holding more than two per cent. of the paid up equity share capital in a recognised stock exchange or a recognised clearing corporation, as the case may be, shall file a declaration within fifteen days from the end of every financial year to the recognised stock exchange or recognised clearing corporation, as the case may be, that he complies with the fit and proper criteria provided in these regulations.

B. Fit and proper criteria.

- (1) For the purposes of these regulations, a person shall be deemed to be a fit and proper person if—
 - (a) such person has a general reputation and record of fairness and integrity, including but not limited to-



- (ii) good reputation and character; and
- (iii) honesty:
- (b) such person has not incurred any of the following disqualifications-
 - (i) the person, or any of its whole time directors or managing partners, has been convicted by a court for any offence involving moral turpitude or any economic offence or any offence against the securities laws;
 - (ii) an order for winding up has been passed against the person;
 - (iii) the person, or any of its whole time directors or managing partners, has been declared insolvent and has not been discharged;
 - (iv) an order, restraining, prohibiting or debarring the person, or any of its whole time directors or managing partners, from dealing in securities or from accessing the securities market, has been passed by the Board or any other regulatory authority, and a period of three years from the date of the expiry of the period specified in the order has not elapsed;
 - (v) any other order against the person, or any of its whole time directors or managing partners, which has a bearing on the securities market, has been passed by the Board or any other regulatory authority, and a period of three years from the date of the order has not elapsed;
 - (vi) the person has been found to be of unsound mind by a court of competent jurisdiction and the finding is in force; and
 - (vii) the person is financially not sound.
- (2) If any question arises as to whether a person is a fit and proper person, the Board's decision on such question shall be final.

I/we hereby declare that, I/we am/are fit & Proper person as per the above rules & Regulations of the SEBI.

C. GENERAL AUTHORITY

Sub: Letter of Authority

I/we dealing with you as client at NSE/BSE in Capital, Derivative, Segment and in order to facilitate ease of operations, I/We authorise you as under :

- 1. I/We authorise you to set off outstanding in any of my/our accounts against credits available or arising in any other accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the Exchange or in any other exchange and/or against the value of cash margin or collateral shares provided to you by me/us.
- 2. I/We hereby authorise you not to provide me/us Order Confirmation/ Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We shall get the required details from contract notes issued by you.
- 3. I/We request you to retain credit balance in any of my/our account and to use the unused funds towards my/our margin/future obligation at any or all the Exchanges unless I/We instruct you otherwise. I/We also authorize you to debit the necessary demat charges from time to time, for keeping the shares/commodities in your client demat beneficiary account on my behalf. I/We also authorise you to debit the financial charges @2% p.m., for the debit balances or delay payment charges at the rate prescribed by exchange for shortage in margin/debit balances, if any, in my account and not settled as per the exchange requirements.
- 4. I/We request you to consider my/our telephonic instructions for order placing/order modification/order cancellation as a written instruction and give me/us all the confirmation on telephonic unless instructed otherwise in writing. I/We am/are getting required details from contracts issued by you.
- 5. We request that you/exchange/other regulatory authority may send/dispatch us contract notes/e-mail alert/other documents through e-mail on my/our designated e-mail address mentioned by me/us in KYC. I/We will completely rely on the log reports of you dispatching software as a conclusive proof of dispatch of e-mail to me/us and will not dispute on the same. I/We note that non-receipt of bounced mail notification by the stock broker shall amount to delivery of the contract note at my/our e-mail ID.
- 6. I/We will inform you the change of my/our demographic detail and other detail like Bank, DP etc.
- I/We are aware and acknowledge that trading of all exchanges is in Electronic mode, based on Vsat, lease line, ISDN, Modem, VPN, Internet and/or combination of technologies and computer system to place and route order and also involves many uncertain factors and complex hardware, software, systems, communication lines, peripherals, pay in payout of funds & securities, commodities online & offline banking etc. these are susceptible to interruptions, delay, mistake and dislocations; and your services may at any time be unavailable without further notice and I/we understand that there exists a possibility of communication failure or system problems or slow or delay response from system or trading half, or any such other problem/glitch whereby not been able to establish access to the trading system/network or delay in execution of trades, which may be beyond your control any may result in delay in processing or not processing of any orders either in part or in full. I understand that you are not making any representation or warranty that your service will be available to the Client at all times without any interruption. I/We agree that I/We shall not have any claim for any loss incurred by me/us against you on account of any suspension, delay, interruption, nonavailability or malfunctioning of your System or Service for any reason whatsoever.
- 8. I/We confirm that I/We never sublet the trading terminal on any term of connectivity from my place to any other place without your prior approval.

- 9. I/We am/are agreeable for inter-settlement transfer of securities/commodities towards settlement.
- 10. I/we am/are agreeable for & authorise you to with hold funds pay-out towards all the applicable margins and debits.
- 11. All fines/penalties and charges levied upon you due to my acts / deeds or transaction may be recovered by you from my account.
- 12. I have a Trading As well as depository relationship with FOCUS STOCK BROKERS LTD. Please debit the charges relevant with depository services to my trading account. I also agree to maintain the adequate balance in my trading account/ pay adequate advance fee for the said reason.
- 13. I authorise you to send me the physical Contract notes/Margin statement/Ledger/Other documents through postal/courier and to charge administrative/postal/other charges if the contract notes sent to me get bounced more than 5 times.
- 14. For the purpose of providing quality and transparent services to its clients, the Company may record your conversation while interacting with you."

D. LETTER OF AUTHORISATION TO PLEDGE THE SECURITIES WITH CLEARING MEMBER/ CLEARING CORPORATION

I/We are dealing through you as a client registered in NSE/BSE in Capital Market/ Future & Options/ Segments. I have pledged/provided you the securities as margin. I hereby confirm and declare that:

- (i) The Securities/Commodities are in existence, owned by me/us and are and shall be free from any charge, lien or encumbrance, whether prior or otherwise
- (ii) The Securities will be subject to the creation of pledge in favour of or for the benefit of Trading Member and further that the Securities over which pledge may be created in future would be in existence and owned by me/us at the time of creation of such pledge and that the Said Securities to be given in future as security to Trading Member would likewise be unencumbered, absolute and disposable property of me/us.
- (iii) I authorise you to do all such acts and things, sign such documents and pay and incur any such costs, debts and expenses as may be necessary from time to time.
- (iv) I/ we agree that the securities shall be subject to the first priority and lien in favour of Trading Member to secure, my/ our obligations and that the rights or interests of me/ us with respect to the Said Securities shall be subject and subordinate to the rights, claims and interests of Trading Member in respect of the Said Securities
- (v) You may invoke the pledge without any reference to or permission of me/ us and upon receipt of the Said Securities Trading Member may utilize the proceeds in meeting my/our obligations in such manner as it may deem fit and that such invocation of pledge will be final and irrevocable against me/us.
- (vi) I/we shall not make any claims or demands for refund or any reimbursement in relation to the Said Securities.

	Sole/First Holder Signature	Second Holder Signature	Third Holder Signature
Signatures	13 🗷	Ø	Ø



RUNNING ACCOUNT AUTHORISATION

I/we am/are/shall be maintaining a trading account with you for the purpose of doing trading transactions through youas my/our broker i.e. agent. W.r.t. the same, I/we hereby state and authorize you as under:

- 1. My/our trading account w.r.t. funds transactions may please be maintained on a running basis i.e. the funds pay-out due to me/us on the date of pay-out may be retained with your good selves and adjusted towards my/our future margin obligationsand/or funds pay-in obligations;
- Only by way of 'margin pledge' created in the Depository system. You may need not unpledged our shares
 forsettlement of our accounts. SEBI, vide circular no. SEBI/HO/MIRSD/DOP/CIR/P/2020/28 dated February 25,
 2020, discontinued title transfer of securities to the demat account of TM for margin purposes and TM shall accept
 collateral from the clients in the form of securities.
- 3. While settling my/our trading account on a periodical basis, you may retain my/our funds to such extent, as may be allowed asper applicable directives/guidelines issued by Stock Exchanges/SEBI;
- 4. I/we confirm that I/we shall bring to your notice all the discrepancies / disputes, if any, arising out of statements sent tome/us at the time of my/our periodical settlement, within a period of 7 days from the date of receipt of such statements:
- 5. the details of the pledge, if any. Such periodic seretentiontt provided by me to you is in the form of Bank Guarantee (BG)/Fixed Deposit Receipt (FDRs).funds and displaying all receipt/deliveries of funds/shall also explain the securities.

The statement securities of ading facility as per SEBI circulars, or (b) The margin for funds and an extract from the register of lement of the running account shall not be necessary when (all start availing marginWhile settling the account you will be sending me/us a statement of account' containing an extract from the client ledge

- 6. The credit balance shall be returned to the client by TM, within next three working days irrespective of t he date when the running account was previously settled on account of non trading for 30 days.
- You may withhold our Securities in Client Unpaid Securities Account (CUSA) and r etain it for a period of 5 days only in case we have a debit balance. In case of credit balance you may transfer the same to our demat Account on the payout day.
- 8. I/we reserve my/our right to revoke this authorization at any time without any prior notice by submitting a written r equest with your good selves;
- I/We do understand that our account will always get settled as per the latest guidelines of SEBI or NSE irrespective of the current guidelines.
- 10. I/we would prefer to get my/our trading account actually settled as per periodicity indicated herein after:

Or	nce in every 30 days	Once in every 9	0 days
Thanking you Yours faithfu			
Signature		14 🗷	
Name : _		Client Code:	

[Note: To be signed by person himself / herself not to be signed by his/her attorney/authorized person etc.]



LETTER OF AUTHORITY TO TRADE

FOCUS STOCK BROKERS LTD.

1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005

Sub: Authority to trade	e on my / our behalf.
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Dear Sir/Madam,					
I hereby authorise Mr/Ms				S/d of	
having PAN	,	&	Mobile	No	<u>i</u> s my
husband/wife/son/daughter/brother/sister/pa	arents/other (Ple	ease Speci	fy)		to trade on my
behalf in my trading a/c No	and to per	form all or	any of the	following acts, c	deeds and things for and or
my /our behalf and in my/our interest.					

I/we confirm that the aforementioned Authorised Person is well aware of risks associated with trading.

- 1. To operate the Account on my/our behalf.
- 2. To issue necessary instructions to you, for purchase, sale or transfer of shares and commodities from or to the Account as per Representative own judgment, and to sign necessary documents, wherever required effectuating such instructions of purchase, sale or transfer of securities and commodities from or to the Account.
- To make or cause to make payments to FOCUS STOCK BROKERS LTD (FSBL). whenever necessary, and in accordance with my/our obligations in accordance with the terms and conditions of various agreements executed between me/us and FSBL.
- 4. To duly honour all my/our contractual obligations under various agreements executed between me/us and FSBL. including but not limited to the "Member Constituent Agreement" and/or any other undertaking, commitment issued by my/us in favour of FSBL.
- 5. To accept and give valid discharges for acceptance and submission of contract notes, bills, ledger statements, transaction statements and all correspondence on my behalf and report any discrepancy therein to FSBL.
- 6. To receive & accept necessary telephonic calls pertaining to margin &/or trade confirmation or any other call including verification call from FSBL. at designated mobile no. & undertake to update this contact detail in writing with FSBL. in the event of any such change, taking place at any time in future.
- 7. To sincerely abide by the Statutes, Rules, Regulations and Guidelines prescribed for the purpose and in relation to the operation of the Account.
- A. I/we hereby agree and undertake that all such acts, deeds and things done by the Representative shall be deemed to be binding upon me/us as the same has been done by me/us only and I/we shall hereby ratify all and such acts, deeds, or things done by Representative in any manner whatsoever in discharge of the duties conferred upon him/her under the present instrument.
- B. I/we hereby agree and undertake to indemnify and keep FSBL. including its directors, officers and employees indemnified against any loss, claims, liabilities, obligations, damages, deficiencies, actions, suits, or proceedings aroused / accrued or caused to the FSBL. for any wrong act, deed or thing done by the Representative in any manner whatsoever in exercise of the powers conferred upon him.
- C. I/we further undertake and agree not to challenge any act, deed or things done by said Representative in any manner.
- D. I/we hereby agree and acknowledge that this letter of Authority shall be effective and operational until FSBL. received and acknowledged revocation letter at its registered office.

Sign here :		
	15 🗷	×



ELECTRONIC CONTRACT NOTE (ECN) DECLARATION (VOLUNTARY)

FOCUS STOCK BROKERS LTD.

NSE & BSE

1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005

Dear Sir.

I/We a client with Member M/s. Focus Stock Brokers Limited of NSE & BSE Exchange undertake as follows:

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

The above declaration and the guidelines on ECN given in the Annexure have been read and understood by me. I am aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same.

* (The email id must be written in Own handwriting of the client.)

Signature of the Client	
	16 🗷

AUTHORITY LETTER

With respect to the client - member relationship with you, we authorize you to do the following:

- 1) Adjustment of account between exchanges and segments: I/we hereby inform you that I have executed/intend to execute an agreement with you for trading on different exchanges in CM, F&O, segments. I/We request you to transfer, make adjustments and/or set off a part or whole of the stocks placed as collaterals and/or any surplus funds in any of the accounts maintained with you against the outstanding dues payable if any, by me/us to any of my/our account(s) maintained with you. You will have lien on the credit balance in any of my/our account for meeting the debit or obligations in progress in any other of my/our account. Any entries passed by you in accordance with this authorization will be binding on me/us.
- 2) Authorization to debit Demat Account charges: I/We opened/ have a Beneficiary account with you and I/we have a trading account with you for investment and trading purpose. It will be very difficult for me/us to issue separate cheques against your depository bills. Hence, I authorize you to debit the trading account for the debit charges payable to you as Depository Participant for providing depository services. Any such sum debited to my/our account shall be binding on me/us.
- 3) Authorization For Communication of Financial Products: I/We have opened an account with you and am/are interested in knowing about other financial products. I/We authorize you, your group companies and associates to keep me/us informed with any financial product which Focus Stock Brokers Ltd., its group companies and associates presently issue, deal in, or distribute or may, from time to time, launch, issue, deal in or distribute; through E-mail, SMS, telephone, print media or otherwise. This is without legal obligation on you, your group companies and associates to so inform and you or they may, in their discretion, discontinue sending such information.
- 4) Authorization for verification of information from independent agency(ies): I/We, do hereby certify that the information provided by me/us in this account opening form is true and correct in all respects and Focus Stock Brokers Limited (FSBL) is entitled to verify this directly or through any third party agent. I/We further acknowledge the FSBL's right to seek any information from any other source in this regard. I/We do understand that all the information will form the basis of any facility that FSBL may decide to grant me/us at its sole discretion. I/We consent and authorize FSBL to share or generate subsequently any report through CIBIL or authorized agency/bureau.
- 5) Authorization for not Providing Conformation Slips: I / We authorize you not to provide me / us Order Confirmation / Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I / We shall get the required details from contract notes issued by you.

Please score out wh	natever not accer	oted/ not agree	ed with.
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DECLARATION FOR PROVIDING SMS/E-MAIL ALERTS AND OTHER REPORTS ON RELATIVE EMAIL/MOBILE

I hereby declare that the Mobile Number and/or Email ID given in the account opening form are of my relative. He / She already has a trading account with Focus Stock Brokers Limited under the below mentioned PAN or UCC.

	First / Sole Holder	Second Holder	Third Holder
Relationship with the	☐ Spouse	☐ Spouse	☐ Spouse
person whose Mobile	Dependent parent	□ Dependent parent	☐ Dependent parent
/E-mail Id is provided	☐ Dependent child	☐ Dependent child	Dependent child
	☐ Karta/Authorized Signatory	☐ Karta/Authorized Signatory	☐ Karta/Authorized Signatory
PAN/UCC/Demat of relative		, , ,	
Signature of Client	18 🗷	K	<u> </u>
names as spelt in respective pro	(To be filled if the name at my name is spelt differently in my Ider		of. Please find below the
I hereby confirm that all the said I agree to indemnify and keep F	I names belong to me. I hereby state and SBL indemnified at all times from and agared and/or incurred by FSBL for any act d	confirm that what is stated above is trainst all costs, charges, damages, pena	alties (including
I hereby confirm that all the said I agree to indemnify and keep F	I names belong to me. I hereby state and SBL indemnified at all times from and aga	confirm that what is stated above is trainst all costs, charges, damages, pena	alties (including
I hereby confirm that all the said I agree to indemnify and keep F reasonable attorney fees) suffer	I names belong to me. I hereby state and SBL indemnified at all times from and agared and/or incurred by FSBL for any act dagared and/or incurred by FSBL for any act dagared by FSBL for any act daga	confirm that what is stated above is tr ainst all costs, charges, damages, pena one or omitted to be done on the above GNATURE MISMATCH	alties (including
I hereby confirm that all the said I agree to indemnify and keep F reasonable attorney fees) suffer Signature of Client	I names belong to me. I hereby state and SBL indemnified at all times from and aggred and/or incurred by FSBL for any act d 19 DECLARATION FOR SI (To be filled if client's signature is	confirm that what is stated above is trainst all costs, charges, damages, penaone or omitted to be done on the above GNATURE MISMATCH mismatched from PAN Card and Bank)	alties (including e declaration.
I hereby confirm that all the said I agree to indemnify and keep F reasonable attorney fees) suffer Signature of Client	I names belong to me. I hereby state and SBL indemnified at all times from and agared and/or incurred by FSBL for any act dagared and/or incurred by FSBL for any act dagared by FSBL for any act daga	confirm that what is stated above is trainst all costs, charges, damages, penaone or omitted to be done on the above GNATURE MISMATCH mismatched from PAN Card and Bank)	alties (including e declaration.
I hereby confirm that all the said I agree to indemnify and keep F reasonable attorney fees) suffer Signature of Client	I names belong to me. I hereby state and SBL indemnified at all times from and aggred and/or incurred by FSBL for any act d 19 DECLARATION FOR SI (To be filled if client's signature is	confirm that what is stated above is trainst all costs, charges, damages, penaone or omitted to be done on the above GNATURE MISMATCH mismatched from PAN Card and Bank) Bank and account opening form are	alties (including e declaration.
I hereby confirm that all the said I agree to indemnify and keep F reasonable attorney fees) suffer Signature of Client This is to bring into your not	I names belong to me. I hereby state and SBL indemnified at all times from and agained and/or incurred by FSBL for any act of the state	confirm that what is stated above is trainst all costs, charges, damages, penaone or omitted to be done on the above GNATURE MISMATCH mismatched from PAN Card and Bank) Bank and account opening form are	alties (including e declaration.
I hereby confirm that all the said I agree to indemnify and keep F reasonable attorney fees) suffer Signature of Client This is to bring into your not Signature as per Bank Signature as per Account	I names belong to me. I hereby state and SBL indemnified at all times from and agged and/or incurred by FSBL for any act of 19 DECLARATION FOR SI (To be filled if client's signature is 10 ce that my signature on PAN Card / E 20a 200	confirm that what is stated above is trainst all costs, charges, damages, penaone or omitted to be done on the above GNATURE MISMATCH mismatched from PAN Card and Bank) Bank and account opening form are	alties (including e declaration.
I hereby confirm that all the said I agree to indemnify and keep F reasonable attorney fees) suffer Signature of Client This is to bring into your noti Signature as per Bank Signature as per Account Opening Form Signature as per PAN Card	I names belong to me. I hereby state and SBL indemnified at all times from and again ed and/or incurred by FSBL for any act of the filled if client's signature is ce that my signature on PAN Card / E	confirm that what is stated above is trainst all costs, charges, damages, penaone or omitted to be done on the above GNATURE MISMATCH mismatched from PAN Card and Bank) Bank and account opening form are	alties (including e declaration. as follows:

GFSB

Name of the Applicant : _____

Demat Debit and Pledge Instruction

BO ID	12096200	Date		
BO NAME				

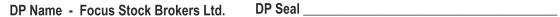
S.No.	Purpose	Signature of Client *
1.	Transfer of securities held in the beneficial	
	owner accounts of the client towards Stock	
	Exchange related deliveries / settlement	
	obligations arising out of trades executed by	
	clients on the Stock Exchange through the same stock broker	
2.	Pledging / re-pledging 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 executedon	
	Stock Exchange order entry platforms	
4.	Tendering shares in open offers through	
	Stock Exchange platforms	

DDPI In Favour Of

THIS DDPI MAY BE USED FOR SETIMENT MARGIN PLEDGE AND TENDER OFFER PURPOSED TO THE FOLLOWING ACCOUNTS				
EARLY PAY IN	1000011000219220			
PAY IN TO NSE	120962000000194			
PAY IN TO NSE	1209620000000272			
MARGIN PLEDGE UNPLEDGE	120932000000161			
PAY IN TO NSE NSDL	IN300966110475812			
MARGIN PLEDGE UNPLEDGE NSDL	IN30066810962793			
CMBP ID NSDL	IN664182			
MUTUAL FUND ACCOUNT				

List of Family Members For HUF

S. No.	Name of the Co-parceners (Including Minor also)	Relationship with Karta	Signature
1.			
2.			
3.			
4.			
5.			







SMART INVESTING							
Broker/Agent Code ARN:			SUB-BROKER		EUIN		
Unit Folder Information							
Name of the First Applicant :							
PAN Number:		KYC:		Date Of Birth:			
Father Name:				Mother Name :			
Name of Guardian:				PAN:			
Contact Address:							
City:	Pincode:		State:		Country:		
Tel.(Off):	Tel.(Res):			Email:			
Fax(Off):	Fax(Res):			Mobile:			
Income Tax Slab/Networth:				Occupation Detail	ils:		
Place of Birth:		Country of Tax R	esidence:				
Tax Id No:							
Politically exposed person /Related	to Politically expo	sed person etc.?			Yes	No	
Mode of Holding: Occupation:							
Name of the Second Applicant :							
PAN Number:	KYC:		Date Of Birth :	Birth :			
Income Tax Slab/Networth:				Occupation Detail	ls:		
Place of Birth:		Country of Tax R	esidence:				
Tax ld No:							
Politically exposed person /Related	to Politically expo	sed person etc.?			Yes	No	
Name of the Third Applicant :							
PAN Number : KYC : Date Of Birth :							
Income Tax Slab/Networth: Occupation Details:							
Place of Birth: Country of Tax Residence:							
Tax ld No:							
Politically exposed person /Related to Politically exposed person etc.?							
Other Details of Sole / 1st Applicant							
Overseas Address (in case of NRI investor):							



City:	Pincode:		Country:				
Bank Mandate 1 Details							
Name of Bank: Branch:							
A/C No.:	A/C Type:		IFSC Code:				
Bank Address:							
City:	Pincode:	State:		Country:			
Bank Mandate 2 Details							
Name of Bank:			Branch:				
A/C No.:	A/C Type:		IFSC Code:				
Bank Address:							
City:	Pincode:	State:		Country:			
Bank Mandate 3 Details							
Name of Bank:			Branch:				
A/C No.:	A/C Type:		IFSC Code:				
Bank Address:							
City:	Pincode:	State:		Country:			
Bank Mandate 4 Details							
Name of Bank:			Branch:				
A/C No.:	A/C Type:		IFSC Code:				
Bank Address:							
City:	Pincode:	State:		Country:			
Bank Mandate 5 Details							
Name of Bank:			Branch:				
A/C No.:	A/C Type:		IFSC Code:				
Bank Address:							
City:	Pincode:	State:		Country:			
Nomination Details							
Nominee Name:			Relationship:				
Guardian Name(If Nominee is Minor):							
Nominee Address:							
City:	Pincode:	State:					
Declaration and Signature I/We confirm that details provided by me/us are true and correct. The ARN holder has disclosed to me/us all the commission (In the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Fund From amongst which the scheme is being recommended to me/us.							
Date :		Place :					
1st applicant Signature :	2nd applicant Signature :		3rd applicant Signature :				

NACH/ECS/AUTO DEBIT UMRN MANDATE INSTRUCTION FORM	Date D D M M Y Y Y Y
Tick (🗸) Sponsor Bank Code	Utility Code
CREATE MODIFY I/We hereby authorize ICCL	to debit (tick 🗸) SB/CA/CC/SB-NRE/SB-NRO/Other
CANCEL Bank a/c number	
with Bank IFSC IFSC	or MICR
an amount of Rupees	₹
FREQUENCY Mthly Qtly H-Yrly Yrly As & when presented	DEBIT TYPE Fixed Amount Maximum Amount
Reference 1 (Mandate Reference No.)	Phone No.
Reference 2 (Unique Client Code-UCC)	Email ID
I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my ac	count as per latest schedule of charges of the bank.
PERIOD From D D M M Y Y Y Y Y	
To DD MM NYYY	
Or Until Cancelled 12.	3
- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user of a law understood that I am authorised to cancel/amend this mandate by appropriately communicating the cancellation / amendm	

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

General Clause

- 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.

FSB

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 Byelaws 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.









		FORMAT OF B	OARD RESOLUTION	IN CASE OF CO	mpany / fii	RM (ON	LETTER HEAD)	
			Resolution passed in at					Ltd. held company)
intro Nati men	oduce onal : nbers	d by the NSE and d Stock Exchange Lin	o enter into agreement nited (NSE), Bombay S	for online investm Stock Exchange (l	ent products 3SE), Central	facility w Deposite	rith Focus Stock B ory Services Ltd. (y other segment that may be rokers Ltd, a member of the CDSL) and the said trading any by any of the under noted
S.No).		Name Designation					
Brok	kers L	td. in Capital Marke		gment, Mutual Fu				se deal through Focus Stock other segments that may be
who	se sp	ecimen signatures a		l are hereby sever	ally / jointly au	thorised	to sign, execute an	Signatory of the Company d submit application, submit
	olved oose.	that authorized sigr	natory be hereby author	ized to open a de	mat account v	vith Focu	ıs Stock Brokers L	td. for trading or investment
								cancelled or modified by the
Di	irector	/ Company Secretary	(along with rubber stamp)	gnatures of the A	uthorised Per	sons		
S.No.	Т	Na	ıme		nation		Specimen S	ignatures
	\perp							
		LIST OF	AUTHORISED SIGNATO	RV (If more than	nne vou may i	nrovide s	ecordinaly)	
				natures of the Au				
S.No.		Na	ime	Desig	nation		Specimen S	ignatures
True Cert		Сору						
			ng with rubber stamp)					
Director /	7 0011		ST OF DIRECTORS (If m	ore than four, you	ı may provide	accordi	nalv)	
S.No.		Name	Addres		DIN		PAN No.	Designation
1.								DIRECTOR
2.								DIRECTOR
3.								DIRECTOR
4.								DIRECTOR
True Cert for		Сору						
			ng with rubber stamp)					
		LI	ST OF SHAREHOLDER	(If more than fou	r, you may pro	vide acc	ordingly)	
S.No.		Name	Addres	s Face	Value	Total	Capital (Rs.)	%age
1.	+							
2. 3.	+			-				
4.	+							
	1	OTAL						
True Cert	i□ed	Сору						

GFSB

Director / Company Secretary (along with rubber stamp)

Most Important Terms and Conditions



- 1. Your trading account has a "Unique Client Code" (UCC), different from your demat account number. Do not allow anyone (including your own stock broker, their representatives and dealers) to trade in your trading account on their own without taking specific instruction from you for your trades. Do not share your internet/mobile trading login credentials with anyone else.
- 2.You are required to place collaterals as margins with the stock broker before you trade. The collateral can either be in the form of funds transfer into specified stock broker bank accounts or margin pledge of securities from your demat account. The bank accounts are listed on the stock broker website. Please do not transfer funds into any other account. The stock broker is not permitted to accept any cash from you.
- 3. The stock broker's Risk Management Policy provides details about how the trading limits will be given to you, and the tariff sheet provides the charges that the stock broker will levy on you.
- 4.All securities purchased by you will be transferred to your demat account within one working day of the payout. In case of securities purchased but not fully paid by you, the transfer of the same may be subject to limited period pledge i.e. seven trading days after the pay-out (CUSPA pledge) created in favor of the stock broker. You can view your demat account balances directly at the website of the Depositories after creating a login.
- 5.The stock broker is obligated to deposit all funds received from you with any of the Clearing Corporations duly allocated in your name. The stock broker is further mandated to return excess funds as per applicable norms to you at the time of quarterly/ monthly settlement. You can view the amounts allocated to you directly at the website of the Clearing Corporation(s).
- 6. You will get a contract note from the stock broker within 24 hours of the trade.
- 7. You may give a one-time Demat Debit and Pledge Instruction (DDPI) authority to your stock broker for limited access to your demat account, including transferring securities, which are sold in your account for pay-in.
- 8.The stock broker is expected to know your financial status and monitor your accounts accordingly. Do share all financial information (e.g. income, networth, etc.) with the stock broker as and when requested for. Kindly also keep your email ID and mobile phone details with the stock broker always updated.
- 9.In case of disputes with the stock broker, you can raise a grievance on the dedicated investor grievance ID of the stock broker. You can also approach the stock exchanges and/or SEBI directly.
- 10.Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. You will not have any protection/recourse from SEBI/stock exchanges for participation in such schemes.







FOCUS STOCK BROKERS LTD

Address - 1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005

Phone No-011-41925330/31/4145/1080/1723/4175/1080

Mob - 9654406688, 8700499422

Website: www.niveshak.com

BSE MEMBER NO: 6778 SEBI REG. NO: INZ000288836 CIN NO: U67|20DL|993PLC0528|4

NSE MEMBER NO: 09203 CDSL MEMBER NO: IN-DP-701-2022















