



FOCUS STOCK BROKERS

ESTD 1993

CLIENT REGISTRATION FORM (EQ-CASH, F&O, DEMAT)

Client Name : _____

Client Code : _____ KYC No : _____ UCI Seg : _____

Client ID : _____ UCI Dt : _____ Sign : _____

DOCUMENTS REQUIRED - CHECKLIST

MANDATORY DETAILS REQUIRED :

| | |
|-------------------|--|
| ● Mother Name | |
| ● Mobile No. | |
| ● E-mail | |
| ● Networth | |
| ● Occupation Type | |

FOR INDIVIDUAL

DOCUMENTS OF INDIVIDUAL

PoI PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c
 (Provide any one proof of each, as per table)

Photograph pasted on page A1 & signed across

DOCUMENTS OF NOMINEE (required, if nomination facility is chosen)

Photograph pasted on page 10

FOR HUF

DOCUMENTS OF HUF

PoI PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c
 (Provide any one proof of each, as per table)

DOCUMENTS OF KARTA (Individual member in whose name HUF is formed)

Photograph pasted on page A4
 PoI PoA (Provide any one proof of each, as per table)

SIGNATURES OF ALL COPARCENERS (family members other than Karta)

Signatures on page A11 / Deed of declaration of HUF (any one)
 Signatures of all major coparceners on Power of Attorney on page 6

FOR CORPORATE

DOCUMENTS OF CORPORATE

PoI 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)

DOCUMENTS OF ALL WHOLE TIME DIRECTORS (WTD) / TWO DIRECTORS IN CHARGE OF DAY TO DAY OPERATION

Photograph pasted on page A4
 PoI PoA (Provide any one proof of each, as per table)

DOCUMENTS / SIGN OF ALL AUTHORISED SIGNATORY(IES)

Photographs on page A10 / on letterhead of company
 Signatures on page A10 / on letterhead of company

DOCUMENTS OF ALL INDIVIDUAL PROMOTERS HOLDING CONTROL EITHER DIRECTLY OR INDIRECTLY

Photograph pasted on page A4
 PoI PoA (Provide any one proof of each, as per table)

FOR PARTNERSHIP FIRM

DOCUMENTS OF PARTNERSHIP FIRM

PoI 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

Balance Sheet for last 2 financial years (to be submitted every year)

DOCUMENTS OF ALL PARTNERS

KYC of all partners (Demat A/c will be opened in the name of partners)

Photograph pasted on page A4

PoI PoA (Provide any one proof of each, as per table)

DOCUMENTS & SIGN OF ALL AUTHORISED SIGNATORY(IES)

Photographs on page A10

SOLE PROPRIET

Sole Proprietor must make the application in his INDIVIDUAL name & capacity only

If you are submitting bank details of Proprietorship firm as bank / income proof, please provide letter from bank certifying name of individual proprietor

CHECK LIST FOR BACK OFFICE

| | | | | | |
|----------------------------|--------------------------|--|--------------------------|-----------------|--------------------------|
| PAN VERIFIED | <input type="checkbox"/> | CKYC | <input type="checkbox"/> | MAPPING | <input type="checkbox"/> |
| ALL DOCUMENT SELF ATTESTED | <input type="checkbox"/> | UCI - NSE <input type="checkbox"/> BSE <input type="checkbox"/> CDSL | <input type="checkbox"/> | DIRECTOR SIGN | <input type="checkbox"/> |
| FORM FILL | <input type="checkbox"/> | BROKERAGE FEED | <input type="checkbox"/> | BENEFICIARY ADD | <input type="checkbox"/> |
| CVL KRA | <input type="checkbox"/> | | | | |

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 |
| INCOME | ITR Acknowledgment, Salary Slip |

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

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MANDATORY DOCUMENTS AS PRESCRIBED BY DEPOSITORIES , EXCHANGES & SEBI

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Name of Stock Broker / Depository Participant :- FOCUS STOCK BROKERS LIMITED
 Registered Office/Correspondence Address/Depository Division : 1C/13 Rajnigandha Building, New Rohtak Road, New Delhi - 110005
 Phone No-011-41925330/31/28711080/4145/4175

Director : Mr. Siddhant Mantry Phone No. : 9654406688, Email id : info@focusstockbroker.com

Compliance Officer Details :

NSE & BSE : Mr. Ramesh Kumar
 Phone : 011-28711080, 011-28714145
 Email id : info@focusstockbroker.com

DP : Mr. Ramesh Kumar
 Phone : 011-28711080, 011-28714145
 Email id : info@focusstockbroker.com

TO BE FILLED BY INTERMEDIARY / 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.

INTRODUCER DETAILS

Name of the Introducer: F I R S T N A M E M I D D L E N A M E S U R N A M E

Status of the Introducer:
 Sub-broker Remisier Authorized Person Existing Client Others: (Please Specify Others)

Address of the Introducer :

Employee Code : Employee E-mail :

Mobile : Phone(with STD Code) : -

Signature of the
 Introducer :

EXCHANGE-WISE INVESTOR GRIEVANCE CELL

| Exchange | Web Address | Contact No. | Email - Id |
|------------|-------------------|--------------|---|
| NSE | www.nseindia.com | 022-26598100 | ignse@nse.co.in |
| BSE | www.bseindia.com | 022-22721233 | is@bseindia.com / iscdelhi@bseindia.com |
| Depository | Web Address | Contact No. | Email - Id |
| CDSL | www.cdslindia.com | 022-22723333 | complaints@cdslindia.com |

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

ACKNOWLEDGEMENT TO FOCUS FROM CLIENT

To,

FOCUS STOCK BROKERS LTD.1C/13 Rajnigandha Building, New Rohtak Road,
New Delhi - 110005

Date : _____

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 regards,

Client Name : _____

For _____

Sign here :

**For Focus Stock Brokers Ltd.**

Authorised Signatory / Director

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 (To be filled by financial institution)

Application Type* New Update

KYC Number (Mandatory for KYC update request)

Account Type* Normal Simplified (for low risk customers) Small

PERSONAL DETAILS

| Prefix | First Name | Middle Name | Last Name |
|---|--|----------------------|----------------------|
| <input type="checkbox"/> Name* (Same as ID proof) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Maiden Name (If any*) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Father / Spouse Name* | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Mother Name* | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Date of Birth* | <input type="text"/> | | |
| Gender* | <input type="checkbox"/> M- Male <input type="checkbox"/> F- Female <input type="checkbox"/> T-Transgender | | |
| Marital Status* | <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Others | | |
| Citizenship* | <input type="checkbox"/> IN- Indian <input type="checkbox"/> Others <input type="text"/> | | |
| Residential Status* | <input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin | | |
| Occupation Type* | <input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector) <input type="checkbox"/> O-Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student) <input type="checkbox"/> B-Business <input type="checkbox"/> X- Not Categorized | | |

PHOTO

(1)

2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

Country of Jurisdiction of Residence*

Tax Identification Number or equivalent (If issued by jurisdiction)*

Place / City of Birth* Country of Birth*

3. PROOF OF IDENTITY (PoI)*

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

| | | | |
|--|----------------------|-----------------------------|----------------------|
| <input type="checkbox"/> A- Passport Number | <input type="text"/> | Passport Expiry Date | <input type="text"/> |
| <input type="checkbox"/> B- Voter ID Card | <input type="text"/> | | |
| <input type="checkbox"/> C- PAN Card | <input type="text"/> | | |
| <input type="checkbox"/> D- Driving Licence | <input type="text"/> | Driving Licence Expiry Date | <input type="text"/> |
| <input type="checkbox"/> E- UID (Aadhaar) | <input type="text"/> | | |
| <input type="checkbox"/> F- NREGA Job Card | <input type="text"/> | | |
| <input type="checkbox"/> Z- Others (any document notified by the central government) | <input type="text"/> | Identification Number | <input type="text"/> |
| <input type="checkbox"/> S- Simplified Measures Account - Document Type | <input type="text"/> | Identification Number | <input type="text"/> |

4. PROOF OF ADDRESS (PoA)*

4.1 CURRENT/PERMANENT/OVERSEAS ADDRESS DETAILS

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Passport Driving Licence UID (Aadhaar)
 Voter Identity Card NREGA Job Card Others please specify

Simplified Measures Account - Document Type

Address

Line 1*

Line 2

Line 3

District* Pin / Post Code* State / U.T City / Town / Village* Country

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS *

Same as Current / Permanent / Overseas Address details

Line 1*

Line 2

Line 3

District* Pin / Post Code* State / U.T City /Town / Village* Country

4.3 ADDRESS IN THE JURISDICTION DEATILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES*(Applicable if section 2 is ticked)

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Line 1*

Line 2

Line 3

State* ZIP / Post Code* City /Town / Village* Country

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID)

Tel. (Off) - Tel. (Res) - Mobile -

FAX - Email ID

6. DETAILS OF RELATED PERSON

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

Prefix First Name Middle Name Last Name

Name*

(If KYC number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY [PoI] OF RELATED PERSON*

A- Passport Number Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date

E- UID (Aadhaar)

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

S- Simplified Measures Account - Document Type Identification Number

7. REMARKS (If any)

8. 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 it.

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

Date : Place :



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. Code

Emp. Designation

Emp. Branch

[Employee Signature]

IN-PERSON VERIFICATION (IPV)

DOCUMENTS VERIFIED WITH ORIGINALS

CLIENT INTERVIEWED BY

Date:

Employee/Sub-Broker/AP Details:

Name: _____

Code: _____

Designation: _____

Signature: _____

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 _____

Date of Birth / / Status _____ PAN _____

Residential Address _____

DIN _____ UID _____ DPIN _____

Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/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)

2. Name _____

Date of Birth / / Status _____ PAN _____

Residential Address _____

DIN _____ UID _____ DPIN _____

Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/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)

3. Name _____

Date of Birth / / Status _____ PAN _____

Residential Address _____

DIN _____ UID _____ DPIN _____

Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/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)

4. Name _____

Date of Birth / / Status _____ PAN _____

Residential Address _____

DIN _____ UID _____ DPIN _____

Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/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)

5. Name _____

Date of Birth / / Status _____ PAN _____

Residential Address _____

DIN _____ UID _____ DPIN _____

Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/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)

Date

Name & Signature of the Authorised Signatory(ies)

TRADING & DEMAT ACCOUNT RELATED ADDITIONAL DETAILS

BANK ACCOUNT DETAILS

(Through which transactions will generally be routed)

Primary Bank Details (for DP and Trading) :

Bank Name :

Account No. : Branch :

Address :

11 Digit RTGS / NEFT / IFS Code : 0 9 Digit MICR Code :

Virtual Payment Address (VPA)

Account Type : Savings Current Others : (Please Specify)

Pay-Out Option : As Per Group Cheque Online Transfer / NEFT / RTGS

Bank/MICR/IFSC proof submitted : Cancelled Cheque (with **Client Name** & A/c No. **pre-printed**)

Bank Passbook* (If hand written, then with stamp of Bank) Bank Verification Letter* (with Rubber Stamp & Sign of Bank Manager)

Bank Statement* (Either on Bank Stationary or with rubber stamp & sign of Bank Manager) *Documents should not be more than 3 months old

Secondary Bank Details (for Trading, if any) :

Bank Name :

Account No. : Branch :

Address :

11 Digit RTGS / NEFT / IFS Code : 0 9 Digit MICR Code :

Virtual Payment Address (VPA)

Account Type : Savings Current Others : (Please Specify)

In case of multiple banks, please provide proof of all banks.

DEPOSITORY ACCOUNT DETAILS

(Through which transactions will generally be routed)

I/We want to open New Demat A/c (Please fill details on Page No. A7/A9 - ANY ONE)

I/We already have Demat A/c (Please Provide following details)

1. Depository Name : CDSL NSDL DP ID : BOID :

Name of Depository Participant :

2. Depository Name : CDSL NSDL DP ID : BOID :

Name of Depository Participant :

Demat A/c Proof submitted : Client Master Transaction or Holding statement

(with Client Name, PAN, DP & Client ID)

TRADING PREFERENCE

Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.

| EXCHANGE | SEGMENT | | | |
|----------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| | CASH | F & O* | CURRENCY* | COMMODITY* |
| NSE | 3a <input type="checkbox"/> | 3b <input type="checkbox"/> | 3c <input type="checkbox"/> | 3d <input type="checkbox"/> |
| BSE | 3e <input type="checkbox"/> | 3f <input type="checkbox"/> | 3g <input type="checkbox"/> | 3h <input type="checkbox"/> |
| | | | | |
| | | | | |

* If you wish to trade in derivatives (F&O/Currency/Commodity) segments, submit income proof (Mandatory)

FACILITIES

SMS and E-mail alerts from stock exchanges : SMS Alert E-mail Alert Both None

Please mention Mobile & E-mail ID in KYC form (Page A1 - Individual / A3 - Non-Individual)

Whether you wish to receive Contract Note: Electronic Physical

Whether you wish to receive Standard documents*: Electronic Physical

*Standard Documents –Rights & Obligations, Risk Disclosure Document, Guidance Note and Policies & Procedures

Please mention E-mail ID in KYC form (Page A1 - Individual / A3 - Non-Individual)

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 | <input type="checkbox"/> NSE <input type="checkbox"/> BSE <input type="checkbox"/> MCX <input type="checkbox"/> NCDEX <input type="checkbox"/> 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 partners / 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
 Retired 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 Category for Commodities Derivatives

Non-commercial participant (financial participant/ trader/ arbitrage)

Commercial participant (value chain participant/ exporter/importer/hedger)

Farmers/FPOs Value Chain Participants (VCPs) 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 Yes No

- Gaming / Gambling / Lottery Services (e.g. casinos, betting syndicates) Yes No

- Money Lending / Pawning Yes No

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 _____

DEMAT ACCOUNT OPENING FORM - CDSL (DPID 12096200)

TYPE OF ACCOUNT (Please whichever is applicable)

| STATUS | SUB-STATUS | | | | |
|---|---|---|--------------------------------|--|---|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Individual Resident | <input type="checkbox"/> Individual HUF / AOP | <input type="checkbox"/> Minor | <input type="checkbox"/> Other <small>(Please Specify)</small> | |
| <input type="checkbox"/> Foreign National | <input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository Receipts | | | | |
| <input type="checkbox"/> Non - Individual | <input type="checkbox"/> Body Corporate | <input type="checkbox"/> Trust | <input type="checkbox"/> OCB | <input type="checkbox"/> Bank | <input type="checkbox"/> Other <small>(Please Specify)</small> To be filled by the DP |

In case of Sole Proprietor / Partnership Firm / Unregistered Trust, Demat account should be opened in the name of Proprietor / Partners / Trustees.

ACCOUNT HOLDERS DETAILS

Name of sole/1st Holder (Mr. / Ms. / M/s.) : PAN :

Name of 2nd Holder (Mr. / Ms. / M/s.) : PAN :

Name of 3rd Holder (Mr. / Ms. / M/s.) : PAN :

Name* :

*Name of the Sole Proprietor / Partnership Firm / Unregistered Trust should be mentioned above.

Nationality : Indian Other (Please Specify)

DETAILS OF GUARDIAN

In case the account holder is minor

Name of Guardian (Mr. / Mrs / Ms.) :

Relationship : PAN : P

ADDITIONAL DETAILS

Account statement requirement As per SEBI Regulation Monthly Fortnightly Weekly Daily

I/We instruct the DP to receive each and every credit in my / our account Yes No

I/We wish to receive dividend/interest directly into my/our Bank A/c through ECS
(If not marked, the default option would be 'Yes'. ECS is mandatory for locations notified by SEBI from time to time.) Yes No

I/We request you to send Electronic Transaction-Cum-Holding Statement through E-mail Yes No
Please mention E-mail ID in KYC form (Page A1-Individual / A3-Non-Individual)

SMS Alert Facility on Mobile Number as given in KYC Form Yes No
Refer to T&C given in Annexure 'CDSL SMS Alert facility' on our website under download section.

I/We would like to instruct the DP to accept all the Pledge instructions in my / our account without any other further instruction from my / our end. (If not marked, default option will be 'No') Yes No

I/We would like to share the E-mail ID with the RTA. Yes No

I/We would like to receive the annual report (If not marked, 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 ISIN balances, transactions and value of the portfolio online.]

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.
- I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker, tariff sheet and all voluntary/non-mandatory documents.
- I/We further confirm having read and understood the contents of the Rights and Obligations', Policies & Procedures document(s) and 'Risk Disclosure Document', 'Do's and Don'ts'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/we have read, understood, agreed and received a duly executed copy of the:
 - Account Opening Form, Trading Account Related Details and Tariff Sheet
 - Other disclosure/documents as agreed by me/us specifically in voluntary segment.
 - Terms & Conditions as mutually agreed by me/us
 - FATCA & CRS Terms
 - Conditions
 - Option Consent Letter
 - Other disclosure/documents as agreed by me/us specifically in voluntary segment.
 I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website, if any.

| | Sole / First Holder/ Authorised Signatory | Second Holder/ Authorised Signatory | Third Holder/ Authorised Signatory |
|-----------|---|-------------------------------------|------------------------------------|
| Signature | 4 | | |

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

NOMINATION FORM
FOR INDIVIDUAL ONLY
Nomination Details

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

| Nomination can be made upto three nominees in the account. | | Details of 1 st Nominee | Details of 2 nd Nominee | Details of 3 rd Nominee |
|---|--|------------------------------------|------------------------------------|------------------------------------|
| 1 | Name of the nominee(s) (Mr./Ms.) | | | |
| 2 | Share of each Nominee Equally <input type="checkbox"/> [If not equally, specify %] | % | % | % |
| Any odd lot after division shall be transferred to the first nominee mentioned in the form. | | | | |
| 3 | Relationship With the Applicant (If Any) | | | |
| 4 | Address of Nominee(s) City / Place: State & Country: PIN Code | | | |
| 5 | Mobile/Telephone No. of nominee(s) | | | |
| 6 | Email ID of nominee(s) | | | |
| 7 | Nominee Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID | | | |
| Sr. Nos. 8-14 should be filled only if nominee(s) is a minor: | | | | |
| 8 | Date of Birth (in case of minor nominee(s)) | | | |
| 9 | Name of Guardian (Mr./Ms.) {in case of minor nominee(s) } | | | |
| 10 | Address of Guardian(s) City / Place: State & Country: PIN Code | | | |
| 11 | Mobile/Telephone no. of Guardian | | | |
| 12 | Email ID of Guardian | | | |
| 13 | Relationship of Guardian with nominee | | | |
| 14 | Guardian Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID | | | |

CLIENT SIGNATURE *

| | First / Sole Holder | Second Holder | Third Holder |
|---|---------------------|---------------|--------------|
| Sign of Client | 5 | | |
| Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Place : | | |

Note: This nomination shall supersede any prior nomination made by the account holder(s), if any.

DECLARATION FORM FOR OPTING OUT OF NOMINATION
FOR INDIVIDUAL ONLY

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)*

| | First / Sole Holder | Second Holder | Third Holder |
|--|---------------------|---------------|--------------|
| Name | | | |
| Sign of Client | 6 | | |
| Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Place : | | |

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

TARIFF SHEET

TARIFF SHEET - BROKERAGE STRUCTURE - EQUITY & COMMODITY

| | % of Turnover | Minimum | Brokerage Slab | % of Turnover | 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 payin/payout 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 | CHARGES | |
|---|-------------------------|----------------|
| | Regular Scheme | Life Time |
| Account Maintenance Cycle | Four Quarter (One Year) | Life Time |
| Maintenance Charges (Non-Corporate Account) | ₹499/- for per year | ₹1499/- |
| Maintenance Charges (Corporate Account) | ₹1000/- for per year | Not Applicable |

TRANSACTION CHARGES - MONTHLY

| | | |
|----------|--------------------------------------|--|
| Delivery | Market Transaction | ₹20/- per instruction or 0.025% of transaction value, whichever is higher, subject to maximum of `100/- |
| | Off Market Transaction | ₹ 25/- per instruction or 0.035% of transaction value, whichever is higher, subject to maximum of ₹1000/- |
| | Pledge Creation/ Closure/ Invocation | ₹50/- per instruction or 0.02% of transaction value, whichever is higher |
| | Demat Charges | ₹50/- for up to first hundred and after first hundred ₹10/- for every hundred securities or part thereof or a flat fee ₹10/- per certificate whichever is higher plus courier charges of ₹40/- for every 25 certificate and part thereof |
| | Remat Charges | 100/- for up to first hundred and after first hundred ₹0/- for every hundred securities or part thereof or a flat fee `30/- per certificate whichever is higher |
| | Mutual funds (Destat / Redemption) | ₹50/- per instruction plus courier charges |
| | Instruction Booklet | ₹2/- per leaf plus courier charges (Delhi / NCR ₹ 50/-, all over India ₹ 100/-) |

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 `40/- towards courier charges if sent physically.
- Non-periodic statement shall be charged @ `5/- per page and postage/courier charge @ `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.
- `100/- will be charged to client in case of New Delivery Instruction Booklet is requested without requisition slip.
- All charges are exclusive of Service Tax. 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.

- I/We wish to avail BSDA facility in my/our Demat Account.
 I/We do not wish to avail BSDA facility in my/our Demat Account.

HOLDER'S SIGNATURES

7

First Holder Signature

Second Holder Signature

Third Holder Signature

Focus Stock Brokers Ltd

(Authorised Signatory)

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 co-parceners 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

To,

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

_____ 8 
First Holder Signature

_____ 
Second Holder Signature

_____ 
Third Holder Signature

Name/s of the Beneficial owner/s Signature/s (all joint holders)

FATCA & CRS DECLARATION (FOR INDIVIDUAL)

Do you have any non-indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency? Yes No

| Sole/First Holder/Guardian | <input type="checkbox"/> Yes <input type="checkbox"/> No | Second Holder | <input type="checkbox"/> Yes <input type="checkbox"/> No | Third Holder | <input type="checkbox"/> Yes <input type="checkbox"/> 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? | <input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id | Are you a US Specified Person? | <input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id | Are you a US Specified Person? | <input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id |
| Country of Tax Residency* (Other than India) | Taxpayer Identification No. | Country of Tax Residency* (Other than India) | Taxpayer Identification No. | Country of Tax Residency* (Other than India) | Taxpayer Identification No. |
| 1. | | 1. | | 1. | |
| 2. | | 2. | | 2. | |
| Address | | Address | | Address | |

*Please indicate all countries in which you are a resident for tax purpose and associated Taxpayer identification number.

FATCA - CRS Terms and Conditions

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).

Signatures

_____ 9 
Sole/First Holder Signature

_____ 
Second Holder Signature

_____ 
Third 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 -

1. Is "Entity" a tax resident of any country other than India Yes No
(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

| Sr. No. | Country | Tax Identification Number* | Identification Type (TIN or Other,* please specify) |
|---------|---------|----------------------------|--|
| 1. | | | |
| 2. | | | |
| 3. | | | |

* In case Tax Identification Number is not available, kindly provide its functional equivalent.
In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here

PART A (to be filled by Financial Institutions or Direct Reporting NFEs)

| | |
|---|--|
| <p>1. We are a, Financial institution <input type="checkbox"/> (Refer Instruction 1 of Part C) or Direct reporting NFE <input type="checkbox"/> (Refer Instruction 3(vii) of Part C) (please tick as appropriate)</p> | <p>GIIN <input style="width: 80%;" type="text"/></p> <p>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</p> <p>Name of sponsoring entity _____</p> |
| <p>GIIN not available (please tick as applicable)</p> | <p><input type="checkbox"/> Applied for <input type="checkbox"/> Not obtained – Non-participating FI</p> <p><input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <input style="width: 30px;" type="text"/> (Refer Instruction 1 A of Part C)</p> |

PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")

| | |
|--|---|
| <p>1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer Instruction 2a of Part C)</p> | <p>Yes <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded)</p> <p>Name of stock exchange _____</p> |
| <p>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 Part C)</p> | <p>Yes <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)</p> <p>Name of listed company _____</p> <p>Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company</p> <p>Name of stock exchange _____</p> |
| <p>3. Is the Entity an active NFE (Refer Instruction 2c of Part C)</p> | <p>Yes <input type="checkbox"/></p> <p>Nature of Business _____</p> <p>Please specify the sub-category of Active NFE <input type="checkbox"/> (Mention code – refer instruction 2c of Part C)</p> |
| <p>4. Is the Entity a passive NFE (Refer Instruction 3(ii) of Part C)</p> | <p>Yes <input type="checkbox"/></p> <p>Nature of Business _____</p> |

UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)

Category (Please tick applicable category):

| | | | |
|---|--|---|--|
| <input type="checkbox"/> Unincorporated association / body of individuals | <input type="checkbox"/> Unlisted Company | <input type="checkbox"/> Partnership Firm | <input type="checkbox"/> Limited Liability Partnership Company |
| <input type="checkbox"/> Others (please specify _____) | <input type="checkbox"/> Public Charitable Trust | <input type="checkbox"/> Religious Trust | <input type="checkbox"/> Private Trust |

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 | UBO1 | UBO2 | UBO3 |
|--|--|--|--|
| Name of UBO | | | |
| UBO Code (Refer Instruction 3(iv) (A) of Part (C)) | | | |
| Country of Tax residency* | | | |
| PAN* | | | |
| Address | Zip <input type="text"/> State: _____ Country: _____ | Zip <input type="text"/> State: _____ Country: _____ | |
| Address Type | <input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office | <input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office | <input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office |
| Tax ID [§] | | | |
| Tax ID Type | | | |
| City of Birth | | | |
| Country of Birth | | | |
| Occupation Type | <input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____ | <input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____ | <input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____ |
| Nationality | | | |
| Father's Name | | | |
| Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> 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 citizen or green card holder

#If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.

%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.

Certification

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 |  |  |  |

**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

BO ID | 1 | 2 | 0 | | | | | | | | | | | | | | | | | | | | | |

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 Registered 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 the DP's successors and assigns).
WHEREAS I/we are the sole Owner Account (s) ("the said Account") mentioned above, with the DP at its main/branch office, located at _____

As per the instructions for operation of the said Accounts, the same is allowed to be operated by 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 DP for operation of the said/account :

WHEREAS the DP has agreed to accept, the original instruction slip, a fax submission thereof signed by the authorised persons to operate the said account under their signatures, subject to the indemnity herein offered by me/us to the DP on the terms and conditions herein mentioned.

NOW IN CONSIDERATION OF THE ABOVE, I/We hereby irrevocably agree, confirm and undertake to the DP as follows :

- I/We shall transmit the Fax instructions only to the fax number informed/provided to us by the DP.
- The Fax submission shall be signed by the Authorised Person/s mentioned in the List of Authorised Signatories submitted by me/us in the account opening form on behalf of me/us and their signatures shall be in the same manner and way as has been informed to the DP by me/us and the DP is hereby requested and authorised, (but is not obliged to) 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 is requested by me/us and shall be entitled to treat any fax Submissions as fully 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 appropriate, regardless, of the amount of money involved and notwithstanding any error in transmission or reception of such Fax Submission or any misunderstanding or ambiguity or lack of clarity in the terms of such Fax Submission.4. I/We shall upon making any Telefax Submission hereunder, deliver to the DP without any delay within two working days, the original hard copy of the Fax Submission (the Hardcopy) signed by the Authorised Person/s as aforesaid. Each Hardcopy shall bear the following words on the top of the Instruction slip. "This is a Hardcopy Each of Fax Submission to you, transmitted on ___(Date) day of ___(month), 20 ___(Year)
- The DP may, but shall not be obliged to, await receipt of the Hard copy prior to taking any action in connection with the Fax Submission and shall not be obliged to follow-up with me/us for the originals. Further the storage of a photocopy of the Fax transmission sent by me/us shall be conclusive evidence of instruction to the DP for having acted on such instructions and I/We hereby agree and acknowledge the same".
- I/We hereby agree that in case the DP does not receive the hard copy of the instruction within 2 working days, the DP may discontinue the said facility. In such cases the DP will do so with immediate effect after informing me orally / in writing / by fax. I/We undertake that I/We shall not hold the DP liable for any loss to me/us in case the DP does not act on fax instruction received by the DP in such a case.
- The DP shall not be required to confirm(whether orally, in writing or otherwise) any fax submission or (verify the Identify of the Authorised person/s or his/her/their signature/s 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 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.

- 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 Submission or otherwise pursuant to the authority conferred herein, upon the DP.
- 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 by the DP and also against all demands, actions, suit proceedings made, filed / instituted against the DP, in connection with or arising out of or in relation to or as a consequence of :
 - The DP acting pursuant to, in accordance with or relying upon, any Fax submission or otherwise pursuant to the request and authority conferred herein and/or;
 - The DP acting pursuant to in accordance with or relying upon any Fax Submission received by the DP which it believes in good faith to be such a fax Submission; and/or;
 - Any unauthorised or fraudulent Fax Submission to the DP. PROVIDED that this indemnity shall not be available to the DP, if the liabilities for which the DP seeks indemnification hereunder, arises directly and completely from its own negligence or willful default.
 - The DP not having acted on the Fax submission due to non-receipt of the transmission or receipt of incomplete or partly / fully unreadable transmission.
 - 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 shall not be under any obligation at any time to maintain any facility for the receipt of any Fax Submission or to ensure the continued operations or availability of any such facsimile facilities or equipment, and/Iwe shall not hold the DP liable for any loss consequent to non-availability of the said facility.
- I/We acknowledge and confirm that I am/we are aware that by the very nature of telecommunications services, the Fax transmissions may not be received properly and may be clearly legible. I/We agree to assume and bear all the risks involved in respect of such errors and misunderstanding and the DP shall not be responsible in any manner for the same or breach of confidentiality thereto and shall also not be liable for any claims, loss, damage, cost or expense and liability arising therefrom.
- This indemnity is without prejudice to the DP's other rights, privileges, powers, and remedies in law and the DP may delay enforcing its rights without at any time losing them and any waiver of a right by the Dp hereunder or available to it by law, shall not be deemed to be a waiver of any other rights or of the same right at another time.
- The DP may stop/terminate this facility given to me/us by giving seven day prior written notice to me/us. However, any such termination shall not affect anything done or any rights or liabilities accrued prior to the termination and all the above indemnities given by me/us to the DP hereunder shall survive any such termination. However in case of termination as mentioned in point 6 above, no such notice need to be given by the DP. The Provisions relating to arbitration contained in the Rights & Obligation document shall be applicable to any dispute or difference that may arise in respect of such fax transmission including all disputes with regard to the receipt of the fax Transmission by the DP.

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 hereunder shall be governed by and construed exclusively in accordance with the Indian laws and shall be subject to the exclusive jurisdiction of the Courts of Mumbai (India) alone.

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

| CLIENT SIGNATURE | | | |
|--------------------------------|---------------------|---------------|--------------|
| | First / Sole Holder | Second Holder | Third Holder |
| Sign of Client | 10 | | |
| Date : | Place : | | |
| WITNESS FOR CLIENT (Mandatory) | | | |
| Name | | | |
| Address | | | |
| Sign of Witness | | | |

ANNEXURE - A

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:

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

Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those 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.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

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

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

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

Fees:

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

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warrant 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

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Sole/First Holder Signature

Second Holder Signature

Third Holder Signature

Sole / First Holder's Name : _____ Second Holder's Name _____ Third Holder's Name _____

ANNEXURE - B

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

1. **Definitions:**
In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:
 - i. "Depository" means Central Depository Services (India) Limited (CDSL)
 - ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.
 - iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
 - iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
 - v. "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time. Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository
3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depository shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure of the service provider or network.
4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
6. The BO shall be responsible for submitting response to the 'Responsive SMS' within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for deregistration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.
9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP .
10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.
11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP.
13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.
17. **Indemnity:** In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.
18. **Disclaimer:**
Depository shall be absolved of any liability in case :-
 - a. There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
 - b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such service provider.
 - c. There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.

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.)

Signatures

12 





Sole/First Holder Signature

Second Holder Signature

Third Holder Signature

Sole / First Holder's Name : _____ Second Holder's Name _____ Third Holder's Name _____

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.
7. 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.

Signatures

_____ 13 
Sole/First Holder Signature

_____ 
Second Holder Signature

_____ 
Third Holder Signature

RUNNING ACCOUNT AUTHORISATION

I/we am/are/shall be maintaining a trading account with you for the purpose of doing trading transactions through you as 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 obligations and/or funds pay-in obligations;
2. Only by way of 'margin pledge' created in the Depository system. You may need not unpledged our shares for settlement 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 as per 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 to me/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 retention 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 trading facility as per SEBI circulars, or (b) The margin for funds and an extract from the register of movement of the running account shall not be necessary when (all start availing margin While settling the account you will be sending me/us a statement of account' containing an extract from the client ledger
6. The credit balance shall be returned to the client by TM, within next three working days irrespective of the date when the running account was previously settled on account of non trading for 30 days.
7. You may withhold our Securities in Client Unpaid Securities Account (CUSA) and retain 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 request with your good selves;
9. 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:

Once in every 30 days

Once in every 90 days

Thanking you,
Yours faithfully,

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 on my / our behalf.


Dear Sir/Madam,

I hereby authorise Mr/Ms. _____ S/d of _____
having PAN _____, & Mobile No _____ is my
husband/wife/son/daughter/brother/sister/parents/other (Please Specify) _____ to trade on my
behalf in my trading a/c No _____ and to perform all or any of the following acts, deeds and things for and on
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.
 3. 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.
- ? I 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

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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 Confirmation 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 whatever not accepted/ not agreed with.

17 

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.

"I request you to please accept his/her mobile number and/or E-mail ID for the purpose of sending SMS/Email alerts/ ECN and/or any other reports by the Stock Exchange/Depository/FSBL to me."

| | First / Sole Holder | Second Holder | Third Holder |
|--|---|---|---|
| Relationship with the person whose Mobile /E-mail Id is provided | <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent parent <input type="checkbox"/> Dependent child <input type="checkbox"/> Karta/Authorized Signatory | <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent parent <input type="checkbox"/> Dependent child <input type="checkbox"/> Karta/Authorized Signatory | <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent parent <input type="checkbox"/> Dependent child <input type="checkbox"/> Karta/Authorized Signatory |
| PAN/UCC/Demat of relative | | | |
| Signature of Client | 18  |  |  |

DECLARATION FOR NAME MISMATCH
(To be filled if the name on documents is different)

This is to bring to your notice that my name is spelt differently in my Identity proof, Address proof and Bank proof. Please find below the names as spelt in respective proofs:

Name as per PAN CARD _____

Name as per Address Proof _____

Name as per Bank Proof _____

I hereby confirm that all the said names belong to me. I hereby state and confirm that what is stated above is true and correct information.

I agree to indemnify and keep FSBL indemnified at all times from and against all costs, charges, damages, penalties (including reasonable attorney fees) suffered and/or incurred by FSBL for any act done or omitted to be done on the above declaration.

Signature of Client 19 

DECLARATION FOR SIGNATURE MISMATCH
(To be filled if client's signature is mismatched from PAN Card and Bank)

This is to bring into your notice that my signature on PAN Card / Bank and account opening form are as follows:

Signature as per Bank 20a 

Signature as per Account Opening Form 20b 

Signature as per PAN Card 20c 

I hereby confirm that all the above signatures are mine. I hereby state and confirm that what is stated above is true and correct information.

I agree to indemnify and keep FSBL indemnified at all times from and against all costs, charges, damages, penalties (including reasonable attorney fees) suffered and/or incurred by FSBL for any act done or omitted to be done on the above declaration.

Name of the Applicant : _____

| 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. | |

FORMAT OF BOARD RESOLUTION IN CASE OF COMPANY / FIRM (ON LETTER HEAD)

1. Certified True Copy of the Resolution passed in the meeting of Board of Directors of.....Ltd. held on.....(DATE) at.....(Regd Address of the company)
2. "RESOLVED THAT the Company is empowered to deal in Capital Market / Derivatives/Currency Derivatives and any other segment that may be introduced by the NSE and do enter into agreement for online investment products facility with Focus Stock Brokers Ltd, a member of the National Stock Exchange Limited (NSE), Bombay Stock Exchange (BSE), Central Depository Services Ltd. (CDSL) and the said trading members be and is hereby authorised to deal for trading or instruction, oral or written, given on behalf of the Company by any of the under noted authorised signatories.

| S.No. | Name | Designation |
|-------|------|-------------|
| | | |
| | | |

who is/are authorised to sell, purchase, trading, transfer, endorse, and negotiate document and / or / otherwise deal through Focus Stock Brokers Ltd. in Capital Market, Derivatives (F & O) Segment, Mutual Fund, Investment in securities market and other segments that may be introduced by the trading member of the Exchange time to time.

3. RESOLVED FURTHER THAT Mr.....and/ or Mr....., Authorised Signatory of the Company whose specimen signatures are attested below be and are hereby severally / jointly authorised to sign, execute and submit application, submit such online investment products facility registration open account and give effect to this resolution.
4. Resolved that authorized signatory be hereby authorized to open a demat account with Focus Stock Brokers Ltd. for trading or investment purpose.
5. "Further resolved that the above resolution be communicated to FSBL and shall remain in force until the same is cancelled or modified by the Board of Directors, by another resolution that is communicated to Focus Stock Brokers Ltd. True Certified Copyfor.....

Director / Company Secretary (along with rubber stamp)

| Specimen Signatures of the Authorised Persons | | | |
|---|------|-------------|---------------------|
| S.No. | Name | Designation | Specimen Signatures |
| | | | |
| | | | |

LIST OF AUTHORISED SIGNATORY (If more than one you may provide accordingly)

| Specimen Signatures of the Authorised Persons | | | |
|---|------|-------------|---------------------|
| S.No. | Name | Designation | Specimen Signatures |
| | | | |
| | | | |

True Certified Copy

for.....

Director / Company Secretary (along with rubber stamp)

LIST OF DIRECTORS (If more than four, you may provide accordingly)

| S.No. | Name | Address | DIN No. | PAN No. | Designation |
|-------|------|---------|---------|---------|-------------|
| 1. | | | | | DIRECTOR |
| 2. | | | | | DIRECTOR |
| 3. | | | | | DIRECTOR |
| 4. | | | | | DIRECTOR |

True Certified Copy

for.....

Director / Company Secretary (along with rubber stamp)

LIST OF SHAREHOLDER (If more than four, you may provide accordingly)

| S.No. | Name | Address | Face Value | Total Capital (Rs.) | %age |
|-------|-------|---------|------------|---------------------|------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| | TOTAL | | | | |

True Certified Copy

for.....

Director / Company Secretary (along with rubber stamp)



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: U6720DL993PLC05284


NSE MEMBER NO: 09203


CDSL MEMBER NO: IN-DP-701-2022



 [focusstockbrokersltd](https://www.instagram.com/focusstockbrokersltd)

 9654406688

 [focus_stock](https://twitter.com/focus_stock)

 [focusstockbrokers](https://www.facebook.com/focusstockbrokers)