

A/C Opening Date	/ /
Client Code :	
BO ID : 12081000	
Client Name :	
Branch Code :	
AP Code :	
Introducer Code :	

App. No. :



CLIENT REGISTRATION APPLICATION FORM

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Non-Individual | <input type="checkbox"/> NRI |
| <input type="checkbox"/> Only Trading | <input type="checkbox"/> Only Demat | <input type="checkbox"/> Trading + Demat |
| <input type="checkbox"/> Offline | <input type="checkbox"/> Online | |

Follow us on : /kslindia /khandwalasecurities www.kslindia.com

khandwala-securities-limited t.me/khandwalasecurities

Wealth Visionaries

Khandwala Securities Limited

Registered and Correspondance Office Address

Vikas Building, Ground Floor, Green Street, Fort, Mumbai 400 023.

Tel : 022 4076 7373 Fax: 022 4076 7377

Exchange Segments	SEBI Registration No.	Date of Enablement	TM Code
NSE Capital Market	INZ000176837	03 November 1994	06000
NSE Future and Options	INZ000176837	12 June 2001	06000
NSE Wholesale debt Market	INZ000176837	30 June 1994	06000
NSE Debt	INZ000176837	13 May 2013	06000
BSE Capital	INZ000176837	14 December 2006	3165
Wholesale debt Segment	Exch.Regd.	19 October 2011	3165
BSE Star Mutual Fund	Exch.Regd.	12 January 2016	3165
Depository Participant	SEBI Registration No.	DP ID	Date of Enablement
Central Depository Services Ltd	IN-DP-55-2015	12081000	24 March 2015
AMFI Member Regn No.	ARN-1673	Khandwala Securities Ltd.	
Compliance Officer / Principle Officer	Email ID	Contact No.	
Abhishek Joshi	compliance@kslindia.com	022 4076 7373	
Wholetime Director	Email ID	Contact No.	
Pranav Khandwala	pranavk@kslindia.com	022 4076 7373	

For any grievance/dispute please contact stock broker (Khandwala Securities Limited) at the above address or email id : investorgrievance@kslindia.com and Phone no. 91-22-40767373. In case not satisfied with the response, please contact the concerned exchange(s) NSE at ignse@nse.co.in and Phone no. 91-22-26598190 / 1800220058, BSE at is@bseindia.com and Phone no.91-22-22728097, as applicable.

GUIDE AND CAUTIONARY NOTES WHILE APPLING FOR OPENING TRADING ACCOUNT:

Many thanks for your interest in opening an account with **Khandwala Securities Limited**. Please note following important points before proceeding to sign the account opening document :

1. Please read all the Rights and Obligations and other documents carefully before signing. Importance of each document is given in index page itself.
2. Kindly fill all the details in your own handwriting only and strike out all blank spaces which are not applicable.
3. Please go through Risk Disclosure Document, Do's and Don'ts carefully. They are for your own benefit.
4. Kindly note that investment decision has to be made by the client and Khandwala Securities Limited (KSL) will not be responsible for any loss arising due to trades carried out by you/consented by you. You are requested to seek independent professional advice before investing.
5. KSL research recommendation is general in nature and does not consider suitability, risk appetite or investment objective of any particular investor on case to case basis. Further, there is no guarantee or assurance about achieving of target of any research recommendation.
6. Please ensure that you provide your mobile number and email id. This will help us in sending you all important communication including your trades details, margin details etc.
7. Minor is not permitted to open Trading account.

INDEX

MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES PART I

Sr. No.	Name of the Document	Brief Significance of the Document	Pages From-To
1.	KYC (Account opening Form)	C KYC & INDIVIDUAL KYC	3-4
		INSTRUCTION / GUIDELINES for filling Individual KYC application form	5-6
		NON - INDIVIDUAL KYC	7-9
		FATCA DECLARATION - INDIVIDUAL / NON -INDIVIDUAL	10
		KYC Form – Document captures the basic information about the Constituent.	11-14
2.	Rights & Obligations	Documents stating the Rights & Obligation of stock broker/trading member/ authorised person and client for the trading on exchanges including additional rights & obligation in case of Internet/Wireless technology based trading.	Provided as a separate booklet to be retained by client
3.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in securities	
4.	Guidance Note	Document detailing DO's and DON'T's for trading on exchange, for the education of the investors.	
5.	Rights & Obligations (DP)	Documents stating the Rights & Obligation of Beneficial Owner and Depository Participant	
6.	Policies and Procedures	Document describing significant policies and procedures of the stock broker.	
7	Tariff Sheet	Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock exchange (s).	15
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER PART II			
8	Running Account Authorization	Authorization to maintain your trading account on running account basis.	16
9	ECN Declaration	Format For Appendix A - Electronic Contract Note [ECN] - Declaration (Voluntary)	16
10	SMS Alerts on & EMAIL Alerts Mobile No and Email ID	SMART Declaration of SMS alerts and EMAIL alerts from trading member.	17-18
11.	Declaration & Confirmation from client	Declaration from the client stating that client is liable to pay the margins which are required by the exchanges & other obligations.	19-20
12.	NOC letter to be obtained from Broker / Exchange employees	Declaration of employment / association with market.	21
13.	Indemnity cum undertaking	Indemnity cum undertaking for name discrepancy in pan card, bank proof & address proof.	21
14.	Verbal Order Acceptance	Authorization by the client for Verbal order acceptance to the trading member	21
15.	HUF Declaration	Format of Declaration for Joint Family Account	22
16.	Power of Attorney	Revocable POA by the client in favour of Stock Broker.	23-24
17.	Demat Account opening Form	Additional form for opening demat account of Individual with Nominee / Non-Individual form	25-29
18.	DP Charges	Schedule of Charges for CDSL - BO Account	30
19.	DIS	Declaration for Opting of DIS book - Voluntary	31
20.	Declaration	Declaration for Common Mobile Number and EMAIL ID in a Family Account.	31
21.	UCC Linking	Unique Client Code (UCC) Details Addition / Deletion Request	32
22.	Acknowledgment	This confirms that client has received all the documents as per Regulators.	32

Khandwala does not accept subscription fee or any other fee-payments in cash.

THIS PAGE IS LEFT INTENTIONALLY BLANK

CKYC & KYC KRA FORM

Know Your Client Application Form (For Individuals only)

(Please fill the form in English and in BLOCK Letters)
Fields marked with "*" are mandatory fields

Application Type* ☐ New ☐ Update KYC Number*
KYC Type* ☐ Normal (PAN is mandatory) ☐ PAN Exempt Investors (Refer instruction K)

1. Identity Details (Please refer instruction A at the end)

PAN Please enclose a duly attested copy of your PAN Card

Prefix First Name Middle Name Last Name

Name* (same as ID proof)

Maiden Name (if any*)

Father / Spouse Name*

Mother Name*

Date of Birth*


Gender* ☐ M- Male ☐ F- Female ☐ T-Trans gender

Marital Status* ☐ Married ☐ Unmarried ☐ Others


Citizenship* ☐ IN- Indian ☐ Others – Country Country Code

Residential Status* ☐ Resident Individual ☐ Non Resident Indian ☐ Foreign National ☐ Person of Indian Origin


Occupation Type* ☐ S-Service ☐ Private Sector ☐ Public Sector ☐ Government Sector ☐ O-Others ☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student ☐ B-Business ☐ X-Not Categorised

(1) 

Photo



Signature/Thumb Impression



2. Proof of Identity (PoI)* (for PAN exempt Investor or if PAN card copy not provided) (Please refer instruction C & K at the end)

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

☐ A- Passport Number Passport Expiry Date

☐ B- Voter ID Card

☐ C- PAN Card

☐ D- Driving Licence Driving Licence Expiry Date

☐ E- Aadhaar Card / Virtual ID * * * * * * * * * * * Please note for Aadhar number only last 4 digit are to be written

☐ F- NREGA Job Card

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

☐ S- Simplified Measures Account - Document Type Code Identification Number

3. Proof of Address (PoA)*

3.1 Current / Permanent / Overseas Address Details (Please see instruction D at the end)

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988

State/UT* Country* Country Code as per ISO 3166

Address Type* ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

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

Proof of Address*

☐ Passport Number Passport Expiry Date

☐ Voter ID Card

☐ Driving Licence Driving Licence Expiry Date

☐ Aadhaar Card / Virtual ID * * * * * * * * * * * Please note for Aadhar number only last 4 digit are to be written

☐ NREGA Job Card

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

3.2 Correspondence / Local Address Details* (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1', Submit relevant documentary proof)

Line 1*

Line 2

Line 3 City / Town / Village*

District* Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988

State/UT* Country* Country Code as per ISO 3166

Instructions/Guidelines for filling Individual KYC Application Form

General Instructions:

1. Self-Certification of documents is mandatory.
2. KYC number of applicant is mandatory for update/change of KYC details.
3. For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
4. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [I].
5. If any proof of identity or address is in a foreign language, then translation into English is required.
6. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
7. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
8. Sole proprietor must make the application in his individual name & capacity.
9. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
10. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
11. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/ Passport of Minor/Birth Certificate must be provided.

A. Clarification / Guidelines on filling 'Identity Details' section

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

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

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

C. Clarification / Guidelines on filling 'Proof of Identity [Pol]' section, if PAN Card copy is not enclosed/For PAN exempt Investors

1. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
2. Mention identification / reference number if 'Z – Others (any document notified by the central government)' is ticked.
3. Others – Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
4. Letter issued by a gazetted officer, with a duly attested photograph of the person.

D. Clarification / Guidelines on filling 'Proof of Address [PoA] section

1. PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
2. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
3. Others includes – Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal Tax receipt.
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

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

1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
2. In case of multiple correspondence / local addresses, Please fill 'Annexure A1'
3. Others includes – Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

F. Clarification / Guidelines on filling 'Contact details' section

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

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

1. Provide KYC number of related person if available.

H. Clarification / Guidelines on filling 'Related Person details – Proof of Identity [Pol] of Related Person' section

1. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

I. List of people authorized to attest the documents after verification with the originals:

1. Authorised officials of Asset Management Companies (AMC).
2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
3. KYD compliant mutual fund distributors.
4. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/ Consulate General in the country where the client resides are permitted to attest the documents.
6. Government authorised officials who are empowered to issue Apostille Certificates.

- J. List of people authorized to perform In Person Verification (IPV):**
- 1. Authorised officials of Asset Management Companies (AMC).
 - 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
 - 3. KYD compliant mutual fund distributors.
 - 4. Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly).
 - 5. In case of NRI applicants, a person permitted to attest documents, may also conduct the In Person Verification and confirm this in the KYC Form.

- K. PAN Exempt Investor Category**
- 1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
 - 2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
 - 3. Investors residing in the state of Sikkim.
 - 4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.

List of Two-Digit state / U.T Codes as per Indian Motor Vehicle Act, 1988					
State / U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 Two-Digit Country Code							
Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		

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

☐ NEW ☐ CHANGE REQUEST (please tick ✓ the appropriate)
(Please tick ✓ the box on the left margin of appropriate row where CHANGE/
CORRECTION is required and provide the details in the corresponding row)

Please fill this form in English and in Block Letters



Acknowledgement No. _____

Khandwala Securities Limited
Vikas Building, Ground Floor,
Green Street, Fort, Mumbai - 400 023

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant

- ☐ **2. a. Date of Incorporation** | d | d | | m | m | | y | y | y | y | **2. a. PAN**

3. Date of commencement of business: | d | d | | m | m | | y | y | y | y

- ☐ 4. a. Place of incorporation:

- ☐
4. b. Registration No. (e.g. CIN):

- ☐ **5. Status** Please tick (✓) any one ☐ Private Limited Co. ☐ Public Ltd. Co ☐ Body Corporate ☐ Partnership

- ☐ Trust ☐ Charities ☐ NGO's ☐ FI ☐ FII ☐ HUF ☐ AOP ☐ Bank ☐ Government Body
☐ Non-Government Organization ☐ Defense Establishment ☐ BOI ☐ Society ☐ LLP
☐ FPI - Category I ☐ FPI - Category II ☐ FPI - Category III ☐ Others (please specify)



PHOTOGRAPH
of Authorised
Person

Please affix
the recent passport
size photograph and
sign across it

B. Address Details

- ☐
1. Address for Correspondence

City/Town/Village										Country										Pin Code									
State																													

- ☐ 2. Registered Address (if different from correspondence address)

City/Town/Village										State										Country										Pin Code									
-------------------	--	--	--	--	--	--	--	--	--	-------	--	--	--	--	--	--	--	--	--	---------	--	--	--	--	--	--	--	--	--	----------	--	--	--	--	--	--	--	--	--

- ☐
3. Contact Details

[illegible]

- ☐ 4. Specify the proof of address submitted for correspondence address.

- ☐ 5. Specify the proof of address submitted for registered address:

C. Other Details

- ☐
- 1.
- Gross Annual Income Details**
- (Please tick (✓))
- ☐
- Below 1 Lakh
- ☐
- 1-5 Lakhs
- ☐
- 5-10 Lakhs
- ☐
- 10-25 Lakhs
- ☐
- 25-1 Crore
- ☐
- > 1 Crore

- ☐ **2. Net-worth in ₹.** (*Net worth should not be older than 1 year) _____ as on (date) | d | d | / | m | m | / | y | y | y | y | **Rs.**

- ☐
3. Detail of Authorised Director / Promoter / Karta / Partner etc.


Name									
PAN									
Registered Address									
City/Town/Village									
State									
Country									
Pin Code									

- ☐ **4. DIN/UID of Promoters/Partners/Karta and whole time directors:** (Please provide details in the enclosed sheets)

- ☐ 5. Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/whole time directors:

- ☐ Politically Exposed Person (PEP) ☐ Related to Politically Exposed Person (PEP)

- ☐ 6. Any other information:

DECLARATION													Name & Signature	
<p>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.</p>														
<p>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"/> Name : <input type="text"/></p>														

FOR OFFICE USE ONLY

IPV Details	Signature	Name of Person who has done IPV	Employee ID	Designation	Date of IPV

KHANDWALA SECURITIES LIMITED

☐ Originals Verified and self attested documents copies received

For KHANDWALA SECURITIES LIMITED

Authorised Signatory

Date:



Attention: Please recheck your Email ID and Mobile Number provided by you.

INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients, including Promoters / Partners / Karta / Trustees and whole time directors and persons authorised to deal in securities on behalf of company/firm/others.
 2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorised for attesting the documents, as per the below mentioned list.
 3. If any proof of identity or address is in a foreign language, then translation into English is required.
 4. Name & address of the applicant mentioned on the KYC form. should match with the documentary proof submitted.
 5. If correspondence & permanent address are different, then proofs for both have to be submitted.
 6. **Sole proprietor must make the application in his individual name & capacity.**
 7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
 8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
 9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
 10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
 11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government / judicial / military officers, senior executives of state owned corporations, important political party officials, etc.
- B. Proof of Identity (POI): -List of documents admissible as Proof of Identity:**
1. Unique Identification Number (UID) (Aadhaar) / Passport/ Voter ID card/ Driving license.
 2. PAN card with photograph.
 3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.
- C. Proof of Address (POA): - List of documents admissible as Proof of Address:**
(*Documents having an expiry date should be valid on the date of submission.)
1. Passport / Voters Identity Card/Ration Card/Unique Identification Number (UID)/Aadhar

- Letter/Registered lease or Sale Agreement of Residence/Driving License/ Flat Maintenance bill/Insurance Copy.
2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill -Not more than 2 months old.
 3. Bank Account Statement/Passbook-Not more than 2 months old.
 4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
 5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks / Scheduled Co-Operative Bank / Multinational Foreign Banks / Gazetted Officer / Notary public / Elected representatives to the Legislative Assembly / Parliament / Documents issued by any Govt. or Statutory Authority.
 6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
 7. For Fil/sub account, Power of Attorney given by Fil/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
 8. The proof of address in the name of the spouse may be accepted.
- D. Exemptions/clarifications to PAN**
(Sufficient documentary evidence in support of such claims to be collected.)
1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
 2. Investors residing in the state of Sikkim.
 3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
 4. SIP of Mutual Funds upto Rs 50, 000/- p.a.
 5. In case of institutional clients, namely, Flis, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act. 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.
- E. List of people authorised to attest the documents:**
1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial / Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
 2. In case of NRIs, authorised officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy /Consulate General in the country where the client resides are permitted to attest the documents.

Types of entity	Documentary Requirements
Corporate	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). <input type="checkbox"/> Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. <input type="checkbox"/> Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly. <input type="checkbox"/> Copies of the Memorandum and Articles of Association and certificate of incorporation. <input type="checkbox"/> Copy of the Board Resolution for investment in securities market. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Partnership firm	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered partnership firms only). <input type="checkbox"/> Copy of partnership deed. <input type="checkbox"/> Authorised signatories list with specimen signatures. <input type="checkbox"/> Photograph, POI, POA, PAN of Partners.
Trust	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered trust only). <input type="checkbox"/> Copy of Trust deed. <input type="checkbox"/> List of trustees certified by managing trustees/CA. <input type="checkbox"/> Photograph, POI, POA, PAN of Trustees.
HUF	<input type="checkbox"/> PAN of HUF. <input type="checkbox"/> Deed of declaration of HUF/ List of coparceners. <input type="checkbox"/> Bank pass-book/bank statement in the name of HUF. <input type="checkbox"/> Photograph, POI, POA, PAN of Karta.
Unincorporated association or a body of individuals	<input type="checkbox"/> Proof of Existence/Constitution document. <input type="checkbox"/> Resolution of the managing body & Power of Attorney granted to transact business on its behalf. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Banks/ Institutional Investors	<input type="checkbox"/> Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Foreign Institutional Investors (FII)	<input type="checkbox"/> Copy of SEBI registration certificate. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Army/ Government Bodies	<input type="checkbox"/> Self-certification on letterhead. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Registered Society	<input type="checkbox"/> Copy of Registration Certificate under Societies Registration Act. <input type="checkbox"/> List of Managing Committee members. <input type="checkbox"/> Committee resolution for persons authorised to act as authorised signatories with specimen signatures.

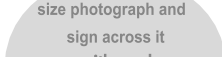
1. Name												
2. Please tick, if applicable :	<input type="checkbox"/> PEP	<input type="checkbox"/> RPEP	<input type="checkbox"/> NPEP	<input type="checkbox"/> NRPEP								
3. Relationship with Applicant <small>(i.e. promoters, whole time directors etc.)</small>												
4a. PAN				4b. DIN								
4c. Aadhar (UID) Number	*	*	*	*	*	*	*	*		Tel/Mobile		
5. Residential/ Registered Address												
City / Town / Village					Country				Pin Code			
State												

Please affix
your recent passport
size photograph and
sign across it
with seal

1. Name											
2. Please tick, if applicable :	<input type="checkbox"/> PEP	<input type="checkbox"/> RPEP	<input type="checkbox"/> NPEP	<input type="checkbox"/> NRPEP							
3. Relationship with Applicant <small>(i.e. promoters, whole time directors etc.)</small>											
4a. PAN				4b. DIN							
4c. Aadhar (UID) Number	*	*	*	*	*	*	*	*	Tel/Mobile		
5. Residential/ Registered Address											
City / Town / Village					Country				Pin Code		
State											

Please affix
your recent passport
size photograph and
sign across it
with seal


1. Name			
2. Please tick, if applicable :		<input type="checkbox"/> PEP	<input type="checkbox"/> RPEP <input type="checkbox"/> NPEP <input type="checkbox"/> NRPEP
3. Relationship with Applicant (i.e. promoters, whole time directors etc.)			
4a. PAN		4b. DIN	
4c. Aadhar (UID) Number	* * * * *	Tel/Mobile	
5. Residential/ Registered Address			
City / Town / Village		Pin Code	
State		Country	


 PHOTOGRAPH

 Please affix
 your recent passport
 size photograph and
 sign across it
 with seal

Please affix
your recent passport
size photograph and
sign across it
with seal

1. Name	
2. Please tick, if applicable :	<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NPEP <input type="checkbox"/> NRPEP
3. Relationship with Applicant <small>(i.e. promoters, whole time directors etc.)</small>	
4a. PAN	4b. DIN
4c. Aadhar (UID) Number	Tel/Mobile
5. Residential/ Registered Address	
City / Town / Village	Pin Code
State	Country



PHOTOGRAPH

Please affix
your recent passport
size photograph and
sign across it
with seal

Please affix
your recent passport
size photograph and
sign across it
with seal

1. Name											
2. Please tick, if applicable :	<input type="checkbox"/> PEP	<input type="checkbox"/> RPEP	<input type="checkbox"/> NPEP	<input type="checkbox"/> NRPEP							
3. Relationship with Applicant (i.e. promoters, whole time directors etc.)											
4a. PAN				4b. DIN							
4c. Aadhar (UID) Number	*	*	*	*	*	*	*	*	Tel/Mobile		
5. Residential/ Registered Address											
City / Town / Village				Pin Code							

Please affix
your recent passport
size photograph and
sign across it
with seal

PAN*										Name																			
Type of address given at KYC KRA										Residential					Residential or Business					Business					Registered Office				
City of incorporation										Country of incorporation																			
Is the entity involved in / providing any of these services:	Foreign Exchange / Money Changer Services		YES	Gaming / Gambling / Lottery Services [e.g. casinos, betting syndicates]		YES	Money Laundering / Pawning		YES	Any other information (if applicable)																			
			NO			NO			NO																				
Entity Constitution Type <i>Please tick as appropriate</i>		<input type="checkbox"/> Partnership Firm <input type="checkbox"/> HUF <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Public Limited Company <input type="checkbox"/> Society <input type="checkbox"/> AOP/BOI <input type="checkbox"/> Trust <input type="checkbox"/> Liquidator <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Artificial Juridical Person <input type="checkbox"/> Others specify _____																											

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India

Yes	<input type="checkbox"/>
-----	--------------------------

No	<input type="checkbox"/>
----	--------------------------

 (If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

Country	Tax Identification Number	Identification Type (TIN or Other, please specify)

*In case Tax Identification Number is not available, kindly provide its functional equivalent or Company Identification Number or Global Entity Identification Number

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

[illegible]

FATCA Declaration

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

[illegible]

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

1.	Is the Entity a <i>publicly traded company</i> (that is, a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded)		
		Name of stock exchange _____		
2.	Is the Entity a <i>related entity</i> of a publicly traded company (a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)		
		Name of listed company _____		
		Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company		
		Name of stock exchange _____		
3.	Is the Entity an <i>active</i> NFE	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Nature of Business _____		
		Please specify the sub-category of Active NFE <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table>		
4.	Is the Entity a <i>passive</i> NFE	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Nature of Business _____		

FATCA Terms and Conditions

Towards compliance with tax information sharing laws, such as FATCA, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Towards compliance with such laws, 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. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

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. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010. Please note that you may receive more than one request for information if you have multiple relationships. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

Certification:

I have understood the information requirements of this Form (read along with the Instructions & Definitions) and hereby confirm that the information provided by us on this Form is true, correct, and complete. I also confirm that I have read and understood the FATCA Terms and Conditions above and hereby accept the same.

Name	
Designation	
Signature	<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 40%; height: 80px; border: 1px solid black; position: relative;"> (3) </div> <div style="width: 55%;"> <p>Place: </p> <p>Date: </p> </div> </div>

CONSTITUENT PROFILE

(A). BANK ACCOUNT DETAILS (THOROUGH WHICH TRANSITIONS WILL GENERALLY BE ROUTED)

1. BANK NAME <input type="text"/> <input type="text"/> ACCOUNT NO : <input type="text"/> BRANCH : <input type="text"/> ADDRESS: <input type="text"/> <input type="text"/> <input type="text"/> PIN CODE: <input type="text"/> 9DIGIT MICR CODE: <input type="text"/> IFSC CODE: <input type="text"/> ACCOUNT TYPE: <input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRI <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> OTHERS: _____	2. BANK NAME <input type="text"/> <input type="text"/> ACCOUNT NO : <input type="text"/> BRANCH : <input type="text"/> ADDRESS: <input type="text"/> <input type="text"/> <input type="text"/> PIN CODE: <input type="text"/> 9DIGIT MICR CODE: <input type="text"/> IFSC CODE: <input type="text"/> ACCOUNT TYPE: <input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRI <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> OTHERS: _____
--	--

For Demat Operations only one Bank Account is acceptable hence please fill in bank details for DP Operation in A-1 above only and also fill the same details on Page No. 26/29

(B). DEPOSITORY ACCOUNT DETAILS

	DP Name	DP ID								BENEFICIARY ID								DEFAULT ID
1.	Khandwala Securities Limited	1	2	0	8	1	0	0	0	0								<input type="checkbox"/>
2.																		
3.																		

(C). NRI (Applicable for NRI/FN Clients only):

RBI Ref. No.
 RBI Approval Date / /

*Please attach copy of permission for dealing in Securities from Authorised Dealer (Bank) /RBI Approval.

(D). PAST ACTIONS

- Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchanges any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years:

(E). DEALINGS THROUGH ANY MEMBER / AUTHORISED PERSONS / OTHER STOCK BROKERS

- If client is dealing through the any member / authorised person, provide the following details:
 Authorised Person's Name:
 SEBI Registration No.:
 Registered office address:

 Ph: Fax: Website:
- Whether dealing with any other stock broker/ authorised person's (if case dealing with multiple stock brokers / authorised person's provide details of all)
 Name of stock broker
 Name of Authorised person, if any:
 Client Code: Exchange:
 Details of disputes/dues pending from/to such stock broker / authorised person

(F). ACCOUNT SETTLEMENT (as per SEBI requirement) once a quarter ☐ once a month ☐

Whether you wish to receive trade confirmation, holding and transaction statement margin call, passwords and ECN.
 through Email / SMS ☐ Yes ☐ No If yes (E-mail ID and Mobile No. mentioned in KRA will be used)
and fill Appendix A & B

Please Tick (✓) SMS Services : By Khandwala : ☐ YES ☐ NO By Exchange : ☐ YES ☐ NO

If not marked, the default option would be 'Yes' for series F to I

(G) SALES TAX REGISTRATION DETAILS (As applicable, State wise)

	Registration No	Validity Date	Name of the State
Local Sales Tax – State			
Central Sales Tax			
Other Sales Tax - State			

(H) VAT Details (As applicable, State wise)

	Registration No	Validity Date	Name of the State
Local VAT			
Other VAT			

(I) INCOME AND OTHER DETAILS (Mandatory)

- Gross Annual Income Details (Please tick (✓)):
☐ Below 1 Lac ☐ 1-5 Lac ☐ 5-10 Lac ☐ 10-25 Lac ☐ 25 Lacs - 1 Crore ☐ >1 Crore
- Net-worth in ` (*Net worth should not be older than 1 year) as on (date) / /
- Occupation (Please tick (✓) any one and give brief details):
☐ Private Sector Service ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional
☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (Please specify) _____
- Qualification (Please tick (✓) any one and give brief details):
☐ Under Highschool ☐ Highschool ☐ Graduate ☐ Doctorate ☐ Professional ☐ Illiterate
☐ Others (Please specify) _____
- Please tick, if applicable : ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (RPEP)
☐ Not a Politically Exposed Person (NPEP) ☐ Not Related to a Politically Exposed Person (NRPEP)

(J) INTERNET TRADING

Whether you wish to avail of facility of Internet Trading/Wireless Technology (please specify) ☒ Yes ☐ No

(K) INVESTMENT / TRADING EXPERIENCE

☐ NO PRIOR INVESTMENT EXPERIENCE YEARS IN EQUITIES
 YEARS IN DERIVATIVES YEARS IN OTHER INVESTMENT RELATED ACTIVITIES

(L) INTRODUCER DETAILS : (Optional)

Introduced by another Client / Employee / Director / Authorised Person / Any Other Person Please Specify _____

NAME OF THE INTRODUCER:

ADDRESS :

PROOF OF IDENTITY : PROOF OF ADDRESS :

CONTACT NO.

SIGNATURE OF
INTRODUCER



DECLARATION

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website
4. I/ We have noted that you trade in OWN/PRO account as per SEBI/MRD/SE/CIR.- 42/2003 dated November 19, 2003 as mandated by the SEBI and on the Exchange(s).
5. I/We hereby confirm that I/We are aware of the Delayed Payment Charges of the Stock Broker.
6. I/We hereby confirm that in case brokerage per exchange per day is less than Rs.10/- then difference will be levied as minimum contract generation charges provided not exceeding 2.5% and also I / We hereby confirm that I/We are aware of the brokerage charges levied to me / us by the broker.

Place -----

Date

(4) 

Signature of Client

FOR OFFICE USE ONLY

UCC Code allotted to the Client _____

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Employee			
Employee Code			
Designation			
Date			
Signature			

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







FOR Khandwala Securities Limited



Signature of the Authorised Signatory

Date

TRADING PREFERENCE OF SECURITIES MARKET

Exchange	Capital	Derivative	WDM
BSE	(5) 	(5) 	
NSE	(5) 	(5) 	(5) 
MF	(5) 		

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

TARIFF SHEET

Cash Market/ Capital Market						
TRADING				DELIVERY		
Brokerage	Min (P)	(%)	Slab No.	Min (P)	(%)	Slab No.
1st Side	5	0.05 %		5	0.50 %	
2nd Side (Same Day 2nd Side)	5	0.05 %		5	0.50 %	
Brokerage for Trade to Trade / ODD Lot / Z Group Scrips /				5	0.50 %	

F & O / Derivative Market / WDM

EQUITY DERIVATIVES			EQUITY OPTION			NIFTY			BANK NIFTY		
Brokerage	Min (P)	(%)	Slab No.	Per Lot	Slab No.	Min (P)	(%)	Options	Min (P)	(%)	Options
1st Side	5	0.05 %		Rs.100/-		5	0.05 %	Rs.100/-	3	0.05 %	Rs.100/-
2nd Side	5	0.05 %		Rs.100/-		5	0.05 %	Rs.100/-	3	0.05 %	Rs.100/-

Other Charges

Stamp Duty ☒ Yes ☐ No
 Turnover Tax ☒ Yes ☐ No
 Service Tax ☒ Yes ☐ No
 STT ☒ Yes ☐ No

OTHER CHARGES

STATUTORY COST ☒ Yes ☐ No

Khandwala Securities Ltd. reserves the right to levy additional charges including the following:

Particular	Amount
Duplicate / Physical Contract Notes (CN) issued	Rs.25/- for 1 month period**
Duplicate Sauda Summery issued	Rs.50/- for 2 month period**
	Rs.100/- for 3 month period**
Bounced Cheque / Stop Payment of Cheque	Rs.50/- per instance / instruments**
Interest on debit balance - Standard Rate per Annum	Upto 24%

* For prevailing rates please refer back office interface

** These charges are subject to revision at the sole discretion of Khandwala Securities Ltd. and shall be informed by ordinary post/ email / quarterly account statements / SMS / Notification on the Back office interface

(6) 

RUNNING ACCOUNT AUTHORISATION
(VOLUNTARY)

 To,
Khandwala Securities Limited

 Date :

--	--	--	--	--	--	--	--

I/We are dealing through you as a client in Security Market and/or Future & Option segment & in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as under:

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing corporation unless I/we instruct you otherwise.
2. I/We request you to retain my/our funds with you for my/our margin / pay-in / other future obligation in the succeeding settlements in the same segments as well as other segments of BSE/NSE where I/We am/are registered with you as clients.
3. I/We request you to settle my fund account, once in every calendar Quarter or once in a calendar Month as given in my/our preferences in KYC form. I/We further instruct that for my/our convenience I/We hereby authorize you to retain an amount of up to Rs.10,000/- cash segment while settling my /our trading accounts.
4. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite collateral /funds towards such obligations and may also retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the exchanges.
5. I/We confirm you that I/We will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 30 days from the date of receipt of funds or statement of account or statement related to it, as the case may be at your registered office.
6. I/We am/are aware that in terms of SEBI Circular CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated June 20, 2019 any excess securities available in your client collateral / collateral account will be release to me / us along with funds settlements after making necessary retention as may be permitted by regulators.
7. I/We confirm you that I/We can revoke the above mentioned authority in writing at any time.
8. I/We understand that there will be no inter client adjustments while settling my accounts even if the other client is related to me.

☐ **Once in a Calendar Quarter** ☐ **Once in a Calendar Month**

Note: The authorization shall be signed by the client only and not by any authorised person on his behalf or any holder of the Power of Attorney.

FORMAT FOR APPENDIX A
ELECTRONIC CONTRACT NOTE [ECN] - DECLARATION (VOLUNTARY)

I/We _____

 a client with Member **M/s.Khandwala Securities Limited** of BSE /NSE Exchange undertake as follows:

- I/We am/are aware that the Member has to provide physical contract note in respect of all the trades placed by me unless I/We myself want the same in the electronic form.
- I/We am/are 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/We find that it is inconvenient for me/us to receive physical contract notes. Therefore, I/We am/are voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out / ordered by me/us.
- I/We have access to a computer and am/are a regular internet user, having sufficient knowledge of handling the email operations.
- I/We undertake to check the information so forwarded, regularly and bring the discrepancies if any to Khandwala Securities Limited notice within reasonable time frame of issuance / receipt for the same.
- My/Our email id is _____
 (The said Email ID must be written in own handwriting.) This has been created by me/us and not by someone else.
- I/We am/are aware that this declaration form should be in English or in any other Indian language known to me/us.
- I/We am/are aware that non-receipt of bounced mail notification by the member shall amount to delivery of the contract note at the above Email ID.

The above declaration and the guidelines on ECN given in the annexure have been read understood by me/us. I/We, am/are aware of the risk involved in dispensing with the Physical Contract Note and do hereby take full responsibility for the same.

1. Client Name _____

2. Unique Client Code _____ 3. PAN _____

I/We also understand that the above instruction will remain valid from the date of signing of this authorization until it is revoked by me/us in writing.

(7) 

I/We agree to the Running Account Facility and ECN facility as per the terms given above.

Terms And Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL

[SMS Alerts will be sent by CDSL to BOs for all debits]

Date :

--	--	--	--	--	--	--	--

Definitions:

in these Terms and Conditions the terms shall have followings 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 Marathon Futurex A-Wing, 25th Floor, N M Joshi Marg, Lower Parel, Mumbai - 400013 and its all branch offices 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 Services”
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 the depository has entered/will 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 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 of 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 delay of loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in ‘ON’ and is made 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 sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the services depend on many 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 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 unauthorised debit to his BO account/ unauthorized transfer of securities from his BO accounts, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorised debit to/transfer of securities from BO account by sending a SMS back to service provider as there is no reverse communication between the service provider and the depository.**
7. The information sent as an alert in the mobile shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of 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 change such fees from time to time as it deems fit the providing this service to the BO

Disclaimer:

The depository shall make reasonable efforts to ensure that the Bo's personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function of their performance or for any loss or damage whenever and howsoever suffered or incurred ny the BO or by ay 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 official 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 in my/our mobile number provided in the registration from subject to the terms and conditions mentioned below. **I/We consent to CDSL providing to the service provider such pertaining to account/transactions in my/our account as is necessary for the purpose 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 maximum four ISINs at a time. If more than four debits take place, the BO would be required to take up the matter with their DP

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

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

BOID

1	2	0	8	1	0	0	0										
---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

(Please write your 8 digit DPID)

(Please write your 8 digit Client ID)

Sole / First Holder's Name: _____

Second Holder's Name: _____

Third Holder's Name : _____

Mobile Number on which messages are to be sent

+91																	
-----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Please write only the mobile number without prefixing country code or zero)

The mobile number is registered in the name of: _____

Email ID: _____

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

(8) 

Signature of First Holder / Karta



Signature of Second Holder / 1st Co-Parceners



Signature of Third Holder / 2nd Co-Parceners

DECLARATION & CONFIRMATION BY CLIENT

Date :

--	--	--	--	--	--	--

To,
Khandwala Securities Limited
 Vikas Building, Ground Floor,
 Green Street, Fort, Mumbai - 400 023

I/ We hereby declare and confirm:

- 1) That I/We hereby agree that the ledger statement in respect of transactions entered into on the Cash, Equity Derivatives & Options, of the Exchanges will be combined for the purpose of convenience of the stock broker. I/We hereby authorize you to transfer, make adjustments and/or to set off a part of whole of the securities placed as margin and/or any surplus funds in any of my/our account(s) maintained with Khandwala Securities Limited against the lawful outstanding dues payable if any, by me/us in any of my/our account(s) maintained with or vice versa. Khandwala Securities Limited shall have right of lien on the credit balance in any of my/our accounts for the dues of any exchange & segments.
- 2) That I/We hereby agree to pay all the amount due to the broker on its due date. The amount due to the broker shall include all types of margin and pay in obligation. In case if I/We do not make payment by due date I/We understand and agree to pay penal interest chargeable on the amount remaining outstanding as levied by the Stock broker and / or sell the securities lying with the stock broker. In case of debit balance in my account, I/We authorize you to charge Debit instruction charges for transfer of securities from your beneficiary account to my beneficiary account.
- 3) That I/We have a trading account as well as a Demat account with Khandwala Securities Limited For the convenience of payment of all the charges, pertaining to my/our demat account, I/We hereby request you to debit my /our trading account with all the DP account charges, as and when the bill is raised by (Depository Participant).
- 4) That I/We hereby declare that there has been no adverse action whatsoever, such as enquiry/adjudication (penalty imposed) / suspension / cancellation / prosecution/de-barring from security market initiated against me/us or against my /our or any of my/our associated entities by SEBI or any other Regulatory authority during last 3 year. I/We undertake to update/inform in case any enquiry or action is initiated by SEBI / regulatory authorities
- 5) That I / We are fully understand and am/are aware that giving false declaration is an offence and can result in certain action including the rejection of application for opening the account and/or deactivation/freezing of my/ our account.
- 6) 'Electronic Payout : I/We hereby, irrevocable, authorise Khandwala Securities Limited to credit my/our bank account electronically i.e. through Net Banking, RTGS, NEFT etc. for all the funds pay out due to me/us. I/We confirm that I/We am/are the first holder and bonafide owner of the given bank account's. I/We am/are enclosing documentary proof in this regard for your reference and record. I/We am/are aware and understand the risks associated with electronic transfer of funds and hereby indemnify Khandwala Securities Limited from all liabilities losses resulting either from delay in crediting of pay out amount and / or non execution of such electronic pay out instruction for any reasons beyond the controlled of Khandwala Securities Limited I/We have provided Cancelled Cheque /Bank Statement with IFSC Code for you to do the needful.'
- 7) I/We hereby further declare that I/We am I are aware of the provisions of the Prevention of Money Laundering Act, 2002 (PMLA) as far as they concern me/us as an investor / client and I/We declare that I am /We are never convicted /barred from dealing in securities market in the past under the said Act.
- 8) I/We confirm that I am / We are in compliance with the "Know Your Client" (KYC) guidelines including conducting due diligence required for Anti Money Laundering (AML) checks as prescribed by the FIU / SEBI. I /We further confirm that all KYC and due diligence process has been followed on a continuous basis as long as our account continues to be held with Trading Member. Further I/ We agree to submit / provide all the statutory documents / other compliance details pertaining to my / our trading account whenever required, to fulfill my / our obligation under PMLA also.
- 9) I / We hereby further declare that I / We will not indulge either directly or indirectly in any of the above mentioned fraudulent or unfair trade practices either individually or in concert with other persons / entities. In the event of any of the above fraudulent or unfair trade practices noticed by the Stock Exchange or Regulatory Authorities, then I/We shall be solely responsible for such acts as noticed and you shall not be responsible for my illegal and fraudulent and unfair trade practices in the securities markets segment and future and Options segment of the exchanges.
- 10) I/We hereby give this declaration to you without any coercion, with sound mind and voluntarily to you herein.
- 11) I / We are aware that I/We will be liable to bear the penalties / imposition of fines and other charges on non-payments of monies, cheque bounce, increase in open position or any order/trades/deals/action of me /our which are contrary to the agreement/rules/regulation/bye-laws of the exchanges or SEBI from time to time.
- 12) All fines/penalties and charges levied due to me / our acts / deeds or transaction will be debited to my/our trading account directly by the trading member.
- 13) I/We 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 contracts issued by you.

- 14) I/We hereby authorise you to undertake any transfer inter-se of funds, securities, debits & credits available between various exchanges.
- 15) Authorization on pay out to pay out basis and to release the funds & or deliveries (if any) due to me/us on my / our specific request only. I / we also agree that you shall not be liable for any claim for loss or profit, or for any consequential, incidental, special or exemplary damages, caused by retention of such deliveries/funds under this agreement or otherwise.
- 16) Pledge / deposit my / our deliveries & / or funds whether deposited as collateral /margin or permitted by us to be retained in the running account etc. by you with any bank or any other institution including but not limited to the Exchanges (s) /Clearing Corporation / Clearing House for the purposes of raising funds, bank guarantees and FDRs etc., or towards Margin / collateral as also to meet shortfall in my / our fund/ deliveries pay in obligation/ auctions or assignment of contracts or any other liability arising out of my/our dealings with you/ through you I/ we authorize you to do all such acts deeds and things as may be necessary and expedient for placing such deliveries with the Exchanges/banks/institutions as margin. You are further authorized to sell/ liquidate these deliveries /FDRs at the time and manner of your choice, as & when deemed fit by you in your absolute discretion to meet any shortfalls in my/our accounts or any other liability of mine/ ours without any reference to me/ us.
- 17) I/We authorise you to liquidate/ close out all or any of my/ our positions for non-payment of margins or other account, outstanding debts etc. I/We agree to bear any and all losses and financial charges on account of such liquidation/ closeout.
- 18) I/We agree that you may refuse to execute any particular transaction without assigning any reason therefor.
- 19) I/We agree not to hold you liable or responsible for delay or default in performance of your obligations due to contingencies beyond your control such as fire, flood, civil commotion, earthquake, riots, war, strikes, failure of systems, failure of internet links, Government/ regulatory actions or any such other contingencies which may be beyond your control.
- 20) I / We the holder of Aadhaar Number or Virtual Id hereby state that I / We have no objection in giving or sharing my Aadhaar number or Aadhaar copy or Virtual Id with Khandwala Securities Limited for opening of trading and demat account and giving my / our consent with a sound mind.
- 21) Further, Khandwala Securities Limited has informed me / us that my / our Aadhaar Number or Aadhaar copy or Virtual Id and KYC information would only be used for KYC verification for Broking / Demat / Mutual Funds / Portfolio Management Services, wherein few of these facilities are provided from their group companies and if I / We want to avail the services of the group companies and I / We do not have any objection on the same.
- 22) I / We am /are aware and accept that Khandwala Securities Limited does not sell or share any personally identifiable information volunteered with Khandwala Securities Limited to any third party (public or private). Any information provided to Khandwala Securities Limited will be protected from loss, misuse, unauthorized access or disclosure, alteration, or destruction.
- 23) Further, I / We agree with the terms / condition of the Khandwala Securities Limited and agree to abide with the same and give Khandwala Securities Limited authority of consent to use the above mentioned information of limited purpose for on boarding of account opening with BSE/NSE exchanges or any other intermediary respectively.

(9) 

FORMAT OF NOC LETTER TO BE SUBMITTED BY BROKER'S/EXCHANGE'S EMPLOYEE

**VOLUNTARY
DOCUMENT**

To,
Khandwala Securities Limited

Date :

--	--	--	--	--	--	--

This is to state that I _____ S/oD/o. _____

R/o _____ is employee with the following Stock Broker / Authorised Person / Remiser / Stock Exchange _____ (please strike out which is not applicable).

Further, I / We hereby declare that I am / We are a Stock Broker / Authorised Person / Remiser of the _____ (name of the Stock Exchange where client is a Stock Broker / Authorised Person / Remiser) and in this regard pursuant to SEBI circular SEBI/MIRSD/CIR-06/2004 dated January 13, 2004.

Further, I / We states that I/We have intimated the said Exchange of my/our intention to open a trading account with Khandwala Securities Limited only for the purpose of my / our proprietary trades (acknowledged the copy of Intimation Letter / Approval Letter / NOC Letter is attached herewith).

INDEMNITY CUM UNDERTAKING

1. That I further undertake to open a bank account in accordance with the name as appearing on the Income Tax website within one week from the date of signing this undertaking.
2. I further undertake that in case my name has been changed after approval from government authorities and notified in official gazette, I shall get the name change effected in PAN, Bank account etc. and furnish immediately to Khandwala Securities Limited.
3. That I further declare that I am responsible and I shall indemnify & keep indemnified Khandwala Securities Limited., its directors, officers, employees and agents from and against any and all losses, claims, liabilities, obligations, damages, deficiencies, judgements, actions, suits, proceedings arising out of or in relation to corporate benefits, IPO refund, Foreign Exchange Management Act (FEMA), share transfer, dematerialization of securities, rematerialization of securities, dividends, interest, etc., that may arise due to name or signature discrepancy or due to non compliance or any liability suffered or incurred or fastened on to Khandwala Securities Limited. due to Khandwala Securities Limited. accepting this Declaration-cum-undertaking and/or acting on this basis.

That the contents of this declaration, Indemnity-cum-undertaking have been explained to me in vernacular and I have understood the same before signing it. That this declaration, Indemnity-cum-undertaking given by me to Khandwala Securities Limited. is by my absolute free will and without any coercion, undue influence, pressure, etc., and at present I am having sound health and mind.

VERBAL ORDER ACCEPTANCE AUTHORISATION

I/We have been / shall be dealing through you as my/ our broker on the Capital Market / Mutual Fund / Futures & Options Segments. As my/our broker, I/We direct and authorize you to carry out trading/dealings in my / our account on my/our behalf. Further, as placing any order for buying or selling in writing is a cumbersome process and in practical, hence I / We request you accept verbal / telephonic trade orders placed by me/us.

I / We shall call on your head office / branch office or any number provided by you or your AP, for placing any order for buying or selling. In case I / We wish to place orders In-Person then I / We shall submit latest format of order instruction hard copy which will be provided to me / us at your branch or at A.P. office.

Further I/We also authorise you to accept our trade request on SMS / Email Id / Whatsapp or any other mode which is feasible or approved by the regulators. I / We understand that Khandwala Securities Limited. may place temporary or permanent restriction on one or more methods of order placement as per their risk analysis and technical constraints.

I/We understand the risk associated with verbal orders and I/We shall be liable for all risks, losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions given above. Further, please note that we shall maintain the records of the trades executed by you whether over the telephone or In-Person or any other mode chosen by you at our premises, as per applicable laws, rules and regulations of SEBI / Exchanges for reasonable time frame. These records may be produced on demand before any Statutory Authority or SEBI or any Regulator Body or Exchanges.

I/We agree to the terms and conditions of the above mentioned declarations.

Thanking you,
Yours Faithfully

(10) 

FORMAT OF DECLARATION FOR JOINT FAMILY ACCOUNT

To,
Khandwala Securities Limited
 Vikas Building, Ground Floor,
 Green Street, Fort, Mumbai - 400 023

Demat Account No.:

1	2	0	8	1	0	0	0	0						
---	---	---	---	---	---	---	---	---	--	--	--	--	--	--


Client Code _____

1. WHEREAS the Hindu Undivided Family of _____
 (hereinafter referred to as 'the said joint family' and / or 'the said HUF') have or desire to have
 Broking A/c. with M/s **Khandwala Securities Limited** (hereinafter to as 'Member') we, the undersigned, hereby declare
 - a) that we are the present adult co-parceners of the said joint family;
 - b) that Mr. _____ is the present **Karta** or Manager of the said Joint Family.
 - c) that we are entitled to trade in shares and open Share Broking of the said Joint Family.
 - d) that each one of us has full and unrestricted authority to act on behalf of, and bind, the said HUF & all the present as well as future members, both adults and minors, of the said joint family, howsoever constituted from time to time.
2. We confirm that the affairs of the said joint family and the business of the said HUF are carried on mainly by the Karta/Manager, on behalf and in the interest and for the benefit of all the co-parceners of the said joint family. We hereby authorize the Karta/ Manager on behalf of the HUF to deal on Cash/Capital market segment (CM) and/or Derivatives/Futures and Options segment (F&O) and the said Trading Member is hereby authorized to honor all instructions oral or written, given by him on behalf of the HUF. The Said Karta is authorized to sell, purchase, transfer endorse, negotiate documents and / or otherwise deal through on behalf of the HUF. He is also authorized 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. to the Member and agree and confirm that any claim due to the Member from the said HUF 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-parcener of the said joint family, including the share of the minor coparceners, if any.
3. We undertake to inform the Member in writing of any change that may occur in the Kartaship / Managership or in the constitution of the said joint family or to the said HUF and until receipt of such notice by the Member, the Member will be entitled to regard each of us as a member of the said joint family and as a partner of the said HUF and all acts, dealings and transactions purporting to have been done on behalf of the said joint family or of the said HUF before the Member shall have received notice in the manner aforesaid, shall be binding on the said joint family and the said HUF and on our respective estates. We shall, however, continue to be liable jointly and severally to the Member for all dues and obligations of the said HUF 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 birth of the present minor co-parceners of the said joint family are given below. We undertake to inform you in writing as and when each of the said members attains the age of majority and is authorized to act on behalf to, and bind, the said HUF

Name of the Minor	Father's Name	Date of Birth

5. We have received and read a copy of the member's rules and regulations for the conduct of Share Broking and we agree to comply with and be bound by the said rules now in force or any changes that may be made therein from time to time.

6. List of Co-Parceners / Karta as on date and our signatures are as follows :

Sr. No.	Name	PAN No.	Date of Birth / Age	Relation	Signature
1				Karta	
2					
3					
4					

Name of HUF _____



Karta signature with seal

POWER OF ATTORNEY

TO ALL TO WHOM THESE PRESENTS SHALL COME.

I/We _____

S/o, D/o, W/o _____

resident of /Regd. Office/Corp. Office _____

SEND GREETINGS. Whereas I/We have a Beneficiary Account Bearing no _____ in the name and Style of _____ (Herein after referred to as the said account) with **Khandwala Securities Limited**, a Company duly incorporated under the Companies Act, 1956 & having its registered and corporate office at Vikas Building, Ground Floor, Green Street, Fort, Mumbai - 400 023. Tel : 022 40767373 Fax: 022 40767377 and I We am/are desirous of appointing an agent/attorney to operate said account on my/our behalf in the manner herein after appearing.

WHEREAS

I/We hold beneficial owner account number 12081000 _____ with Central Depository Services (India) Limited (CDSL), through Khandwala Securities Limited, a Depository Participant bearing **DP-ID-12081000** registered with Securities and Exchange Board of India (SEBI).

And Whereas I/we am/are desirous to buy and sell securities through **Khandwala Securities Limited** who is a stock broker registered with SEBI and member of recognized stock exchange/s.

And Whereas I/ we am/are desirous of appointing **Khandwala Securities Limited** as my/our constituted hereinafter appearing and subject to conditions as provided herein.

NOW KNOW YOU ALL AND THESE PRESENTS WITNESS THAT:

I/We do hereby nominate, constitute and appoint **Khandwala Securities Limited**, a Member of National Stock Exchange of India Limited ("NSE") and BSE Limited ("BSE"), bearing SEBI Single Registration No. INZ000176837, as my true and lawful attorney and authorise it to perform the following functions on my behalf:

I. To transfer securities held in my/our aforementioned beneficial owner account(s) or any other account informed by me in writing to the Khandwala Securities Limited from time to time to the demat account numbers (refer to the Table below) of the Khandwala Securities Limited maintained for the purpose of settlement of trades and margin obligations arising out of trades executed by me/us on any recognized stock exchange through the Khandwala Securities Limited. However, the

said power will be restricted to only transfer of securities to the Clearing Member ID allotted to the Khandwala Securities Limited by any existing or future exchange that the Khandwala Securities Limited has joined/will join as a member or to any demat accounts linked to the said Clearing Member ID provided that I/we have executed a Client Member agreement is not allowed, instead of the same we have to mention word "right and obligation document or any other such relevant documents with mandatory & voluntary client registration documents.

- ii. To pledge the securities in favour of the Khandwala Securities Limited for the limited purpose of meeting my/our margin requirements in connection with the trades executed by me/ us on any recognized stock exchange through the Khandwala Securities Limited. To repledge such securities to the clearing members / clearing corporation as the case may be.
- iii. To return to me/ us, the securities that may have been received by the Khandwala Securities Limited erroneously or those securities that the Khandwala Securities Limited was not entitled to receive from me/us;
- iv. To send consolidated summary of my / our scrip-wise buy and sell positions taken with average rates to me /us by way of SMS/email on a daily basis, notwithstanding any other document to be disseminated as specified by SEBI from time to time.
- iv. To apply to various products like mutual funds, public issues (shares as well as debentures), rights, offer of shares, tendering shares in open offers etc., pursuant to oral / written / electronic instructions given by me / us to the khandwala Securities limited

Signature of Fourth Holder / 3rd Co-Parceners

(11) 

Signature of First Holder / Karta



Signature of Second Holder / 1st Co-Parceners



Signature of Third Holder / 2nd Co-Parceners

Email : compliance@kslindia.com, Website : www.kslindia.com

Additional KYC Form for Individual Opening a Demat Account

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

Application No. <input type="text"/>	Date <input type="text"/>
DP Internal Reference No. <input type="text"/>	
DP ID <input type="text"/>	Client ID <input type="text"/>
	Client ID <input type="text"/>

I/We request you to open a Demat Account in my/our name as per the following details:-

Sole / First Holder's Name <input type="text"/>	PAN <input type="text"/>
Second Holder's Name <input type="text"/>	PAN <input type="text"/>
Third Holder's Name <input type="text"/>	PAN <input type="text"/>
Name * <input type="text"/>	

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

Type of Account (Please tick whichever is applicable)

Status	Sub – Status
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual-Director <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Individual Margin Trading A/C (MANTRA) <input type="checkbox"/> Minor <input type="checkbox"/> Others (specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI – Depository Receipts <input type="checkbox"/> NRI Non-Repatriable Promoter <input type="checkbox"/> Others (specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository Receipts <input type="checkbox"/> Others (specify) _____

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

Guardian's Name <input type="text"/>	PAN <input type="text"/>
Relationship with the applicant <input type="text"/>	

I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
I / We request you to send electronic transaction -cum- holding statement at the Email ID as specified in the KYC form (If not marked, the default option would be "YES")	<input type="checkbox"/> Yes <input type="checkbox"/> No
I/ We would like to share the email ID with the RTA (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report <input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	
I/We, wish to receive dividend / interest directly in to my bank account as given below through ECS? (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Please note that if option of Yes/No not selected, then the default option would be 'Yes')

Bank Details [Dividend Bank Details]




Bank Code (9 digit MICR Code)	
IFS Code (11 Character)	Branch Name
Account Number	
Account Type <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (Specify)	
Bank Name	
Bank Branch Address	
City	State
Country	PIN

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)
- (ii) Photocopy of the Bank Statement having name and address of the BO
- (iii) Photocopy of the Passbook having name and address of the BO, (or)
- (iv) Letter from the Bank.
 - In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

For Gross Annual Income Details / Occupations / For PEP - RPEP / For any other information please refer to Page No.12 of the KYC Form

SMS Alert Facility / CDSL SMART Facility	Mobile No. +91 _____	<input type="checkbox"/> Yes
	[Mandatory, If you are giving Power of Attorney, (POA) (If POA is not granted & you do not wish to avail of this facility, cancel this option) For terms and conditions for CDSL SMART facility please refer to our website : www.kslindia.com	<input type="checkbox"/> No
Account Type : BSDA (If yes please provide declaration) <input type="checkbox"/> Yes <input type="checkbox"/> No		
1) I / We are aware of the BSDA scheme available with DP as per guideline issued by SEBI and I / We further, state that my / our demat account opened under normal scheme or any other scheme as mentioned in the tariff sheet of DP while account opening and without further reference to me/us DP is authorized to levy the said charges as applicable. 2) Further, if I / We want to opt for BSDA scheme at any time then I / We will provide written consent to the said DP for availing the BSDA scheme.		
Easi	To register for easi, please visit our website www.cdslindia.com . <i>Easi</i> allows a BO to view his ISIN balances, transactions and value of the portfolio online.	

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

	First/Sole Holder	Second Holder	Third Holder
Name	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.
Signature	(13) 		

(Signatures should be preferably in blue ink)

 CDSL

*Nomination Details (Nominee 1)

Nomination Registration No.

--	--	--	--	--	--	--	--	--	--	--

 Dated

--	--	--	--	--	--

I/We the sole holder / Joint holders / Guardian (in case of minor) hereby declare that:

- ☐ I/We **do not wish to nominate any one for this Demat account.**
- ☐ I/We **nominate** the following person who is entitle to Security lying in my/our account, particulars whereof are given below, in the event my/our death.

[illegible]

Relationship with BO (If any) | Date of birth (mandatory If nominee is a minor)

Percentage of Allocation of Securities :	Nominee 1	Nominee 2	Nominee 3
Residual Securities (Please tick any one nominee. If tick not Marked default will be the first nominee)	Nominee 1	Nominee 2	Nominee 3

Note: Residual securities: In case of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.

As the nominee is a minor as on date, to receive the securities in this account on behalf of the nominee in the event of the death of the Sole holder / all Joint holders, I/We appoint following person to act as Guardian:

[illegible]

This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.

Name of the First Holder

Name of the Second Holder

Name of the Third Holder

A horizontal number line with 11 equally spaced tick marks. The tick marks are labeled with integers from 0 to 10, starting from the left and increasing to the right. The line is intended for plotting a number line graph.

A horizontal number line with 11 equally spaced tick marks. The first tick mark on the left is labeled 0, and the last tick mark on the right is labeled 10. The line is intended for plotting a number line graph.

(14) 



Signature of First Holder

Signature of Second Holder

Signature of Third Holder

Note : One witnesses shall attest signature(s) / thumb impression(s)

Details of the Witness

Name of Witness | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Address of Witness _____

Signature of Witness


 The University of Michigan is an affirmative action/equal opportunity institution. All persons have the right to participate in its educational programs and activities without regard to race, sex, age, religion, national origin, or handicap.

(Signatures should be preferably in blue ink)

*** A maximum of 3 nominations can be registered / for registering additional nominees (Nominees 2&3) please take copy of the nominee page and use the same.**

Additional KYC Form For Non Individual Clients for Opening a Demat Account

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

Application No. 	Date
DP Internal Reference No. 	
DP ID 1 2 0 8 1 0 0 0	Client ID 0

I/We request you to open a Demat Account in my/our name as per the following details:-

Holder Details

Sole / First Holder's Name 	PAN
 	UID * * * * *
Second Holder's Name 	PAN
 	UID * * * * *
Third Holder's Name 	PAN
 	UID * * * * *
Name * 	

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

Type of Account (Please tick whichever is applicable)

Status	Sub-Status
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> Trust <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify)	To be filled by the DP
Date of Incorporation D D M M Y Y Y Y	
SEBI Registration No. (If applicable) 	SEBI Registration Date D D M M Y Y Y Y
RBI Registration No. (If Applicable) 	RBI Approval Date D D M M Y Y Y Y
Nationality <input type="checkbox"/> Indian <input type="checkbox"/> Others (Specify) 	
I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement <input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly	
I / We request you to send electronic transaction -cum- holding statement at the Email ID 	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to share the email ID with the RTA (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report <input type="checkbox"/> Physical <input checked="" type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	

(Please note that if option of Yes/No not selected, then the default option would be 'Yes')

Clearing Member Details (To be filled by CMS Only)

Name of Stock Exchange

Name of CC/CH

Clearing Member ID Trading Member ID

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

Bank Details [Dividend Bank Details]

Bank Code (9 digit MICR Code) Branch Name

IFS Code (11Character) Account No.

Account Type ☐ Saving ☐ Current ☐ Others (Specify)

Bank Name

Bank Branch Address

City State PIN

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)
(ii) Photocopy of the Bank Statement having name and address of the BO
(iii) Photocopy of the Passbook having name and address of the BO, (or)
(iv) Letter from the Bank.
• In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

Details of Politically Exposed Persons (PEP)/Related to Politically Exposed Person (RPEP).

For the above point please refer to the Non Individual KYC Annexure Page No. 9




Transactions Using Secured Texting Facility (TRUST).	I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I have read and understood the Terms and Conditions prescribed by CDSL for the same. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST		
	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>

SMS Alert Facility / CDSL SMART Facility	Mobile No. +91 <input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	[Mandatory, If you are giving Power of Attorney, (POA) (If POA is not granted & you do not wish to avail of this facility, cancel this option) For terms and conditions for CDSL SMART facility please refer to our website : www.kslindia.com	

Account Type : BSDA (If yes please provide declaration) ☐ Yes ☐ No

Easi	To register for easi, please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.
-------------	---

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

	First/Sole Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.
Designation			
Signatures			

(Signature should be preferably in black ink)

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

Khandwala Securities Limited

SEBI DP Regn. No. IN-DP-55-2015, CDSL DP ID -12081000
Vikas Building, Ground Floor, Green Street, Fort, Mumbai - 400 023
Tel.: 91-22-4076 7373 Fax : 91-22-4076 7377
Email : compliance@kslindia.com, Website : www.kslindia.com

DEPOSITORY PARTICIPANT WITH CDSL

SCHEDULE OF CHARGES FOR CDSL - BENEFICIARY ACCOUNT

DP Scheme	<input type="checkbox"/> BASIC PLAN		<input type="checkbox"/> LIFE TIME PLAN		<input type="checkbox"/> NRI	
Account Category	INDIVIDUAL	CORPORATE	INDIVIDUAL	CORPORATE	INDIVIDUAL	CORPORATE
Annual Maintanance Charege	500	1,000	1,700	5,000	₹ 800/- (₹2,500/- as an account opening charges)	₹ 2,500/- (INR 8000/- as an account opening charges)
Debit Instruction from the account	0.03% of the value of the transaction (Min. ₹ 15/-)	0.03% of the value of the transaction (Min. ₹ 15/-)	0.03% of the value of the transaction (Min. ₹ 15/-)	0.03% of the value of the transaction (Min. ₹ 15/-)	0.03% of the value of the transaction (Min. ₹ 15/-)	0.03% of the value of the transaction (Min. ₹ 15/-)
Demat						
Dematerialisation	₹ 5/- per certificate or Min. 80/- per DRF request	₹ 5/- per certificate or Min. 80/- per DRF request	₹ 5/- per certificate or Min. 80/- per DRF request	₹ 5/- per certificate or Min. 80/- per DRF request	₹ 5/- per certificate or Min. 80/- per DRF request	₹ 5/- per certificate or Min. 80/- per DRF request
Rematerialisation	₹ 50/- per certificate Or INR 50/- per 100 securities	₹ 50/- per certificate Or INR 50/- per 100 securities	₹ 50/- per certificate Or INR 50/- per 100 securities	₹ 50/- per certificate Or INR 50/- per 100 securities	₹ 50/- per certificate Or INR 50/- per 100 securities	₹ 50/- per certificate Or INR 50/- per 100 securities
Pledge						
Creation/closure /Invocation	₹ 50/- or 0.03% whichever is higher	₹ 50/- or 0.03% whichever is higher	₹ 50/- or 0.03% whichever is higher	₹ 50/- or 0.03% whichever is higher	₹ 50/- or 0.03% whichever is higher	₹ 50/- or 0.03% whichever is higher
Defreeze	INR 25/-					
SLBM	INR 100/- or 0.02% whichever is highest					

Notes

1. Power of Attorney (POA) charges Rs. 510 (Rs. 510/- stamp paper one Time only at time of account opening)
2. For availing 'Easiest' facility of CDSL, the charges as levied by CDSL would be collected from clients at actual.
3. In case of every Corporate Account, CDSL AMC of Rs.500/- shall be charged extra.
4. Lifetime Scheme account will be moved to default scheme of BASIC PLAN charges if the lifetime amc fund is not credited within 15 days of application date.
5. Service tax, education cess and other statutory levies (if any) would be charged extra wherever applicable as per the prevailing rates.
6. We reserve the rights to change / add charges with 30 days prior notice.
7. All payments should be in favour of "Khandwala Securities Limited."
8. In case of NRI Clients, separate cheque required for any of the special plan in favour of Khandwala Securities Limited and special plan charges are not refundable

I/We have read the understood the " Schedule of Charges" prescribed above and agree to abide by the same.

(16) 

Signature of First Holder



Signature of Second Holder



Signature of Third Holder

Date :

DECLARATION FOR OPTING OF DIS BOOK- VOLUNTARY

To,
Khandwala Securities Limited
 Vikas Building, Ground Floor,
 Green Street, Fort, Mumbai - 400 023

Date :

--	--	--	--	--	--	--	--

Dear Sir / Madam,




A. ☐ I / We require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA executed in favour of **Khandwala Securities Limited** for executing delivery instructions for setting stock exchange trades [settlement related transactions] and margin purpose effected through Khandwala Securities Limited. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

OR

B. ☐ I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA executed in favour of **Khandwala Securities Limited** for executing delivery instructions for setting stock exchange trades [settlement related transactions] and margin purpose effected through Khandwala Securities Limited. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

Yours faithfully,

DP ID	1	2	0	8	1	0	0	0	CLIENT ID	0						
--------------	---	---	---	---	---	---	---	---	------------------	---	--	--	--	--	--	--

Particulars	First / Sole Holder / Karta	Second Joint Holder	Third Joint Holder
Name			
Signatures	(17) 		

Declaration for Common Mobile Number and EMAIL ID in a Family Account.

To,
Khandwala Securities Limited

Date:

--	--	--	--	--	--	--	--

Dear Sirs,

Re: Opening of Trading and Demat Account.

With reference to my /our application for opening of a Trading and Demat account with you, I / We hereby declare that I / We want all the SMS and E-Mail alerts on the following Email ID and Mobile No. which are mentioned below respectively as per SEBI Circular No. CIR/MIRSD/15/2011 dated August 02, 2011.

☐ Email ID: _____

☐ Mobile No:

--	--	--	--	--	--	--	--	--	--

Further, I / We confirm that the above details which have been provided by us belong to our Family Member whose details have been provided by us as under:

☐ Name of the family Member: _____

☐ Relationship with the Client: _____

☐ Trading account with **Khandwala Securities Limited** (if Any): _____

I / We also confirm that this request has been given to the Stock Broker under exceptional circumstances as I / We am / are dependent on our family member whose details have been mentioned in this declaration (above) and I / We further confirm that I / We don't have any objection to this and I / We give full consent in this regard.

Further, 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.

Thanking You,

Yours Faithfully,

Client Name: _____

(18) 

Signature

Unique Client Code (UCC) Details Addition / Deletion Request

To,
Khandwala Securities Limited

Dear Sir / Madam,

☐ I/ We request to add Unique Client Code (UCC)

OR

☐ I/We request to delink the Unique Client Code (UCC)

Unique Client Code (UCC)	Exchange	Exchange ID	Segment ID	CM ID	TM ID
	BSE	11	01	M50080	3165
	NSE	12	01	M50080	06000
	NSE FNO	12	02	M50080	06000

☐ I/ We like to delink / add the Unique Client Code (UCC) with all beneficial owner's (BOID) linked with _____ mentioned Permanent Account Number (PAN).




OR

☐ I/ We like to delink / add the Unique Client Code (UCC) with below mentioned beneficial owner's (BOID)

Sr. No.	DP Name	DP ID								BENEFICIARY ID							
1.																	

(If additional beneficial owner's need to be added, please continue in same format)

Reason for Add / Modify / Delete Unique Client Code (UCC):

Particulars	First / Sole Holder / Karta	Second Joint Holder	Third Joint Holder
Name			
Signatures	(19) 		

ACKNOWLEDGEMENT

I / We acknowledge with thanks the receipt of a duly executed copy of the KYC kit with supporting documents, as per SEBI guidelines conveyed through BSE Notice No.20080624 dt: 24/06/2008 / NSE Circular No. NSE/INSP/2008/67 dt:23/06/2008.

I / We further acknowledge the receipt of a separate booklet containing all the mandatory documents containing Rights & Obligation of Stock Broker, Authorised Person and Clients / Internet & Wireless Technology Based Trading Facility / Risk Disclosure Document (RDD) / Guidance – DO's and DON'T's / Rights & Obligation of Beneficial Owner and Depository Participant / Policies and Procedures of Trading Member.

The above mentioned documents are also available in the Vernacular languages and on our website at <http://www.kslindia.com/market.php-Account Opening Form - CRF form in vernacular languages equity and can be downloaded>.

Name of Client: _____

Client Code: _____

(20) 

Client's Signature / for Non Individual
 Please affix the seal also

PLEASE NOTE THAT THIS MANDATORY REQUIREMENT TO BE FILLED WITH NAME & CODE OF THE CONCERN PERSON

CLIENT INWARD SHEET			
Level	PARTICULARS	NAME OF EMPLOYEE	EMPLOYEE CODE
1	RO		
2	BR PREFIX		
3	VP / AVP		
4	ASM		
5	TL / SM		
6	SRM		
7	RM		
8	Dealer Terminal ID		
9	REMISIER / DSA		

***Cancel which is not applicable.

Particular	Done By	Date & Signature
Inward		
Telecalling		
Preliminary Audit		
Data Entry		
Data Verified by		
A/c. Opened by		
Remark if any		



Registered Office Address :	Branch Office Address
<p>Vikas Building, Ground Floor, Green Street, Fort, Mumbai - 400 023. Tel.: 91-22-4076 7373 Fax : 91-22-4076 7377 E-mail : equitybackoffice@kslindia.com investorgrievance@kslindia.com Website : www.kslindia.com</p>	<p>Pune Office: C-8/9, Dr. Herekar Park, Near Kamala Nehru Park, Off. Bhandarkar Road, Pune - 411 004. Tel.: 91-20-2567 1404/06; Fax: 91-20-25671405 Email id: operations @ kslindia.com</p>

SEBI REGISTRATION NO

BSE CASH : INZ000176837 / NSE (CASH / F & O / WDM) : INZ000176837 / SEBI Registered Merchant Banking : INM000001899
SEBI Registered Portfolio Management Services : INP000000340 / SEBI Registered Depository Participant : IN-DP-55-2015
AMFI Registered Mutual Fund Distributor : ARN-1673