

No.:

# **CLIENT**

# **REGISTRATION**

# **FORM DP**

Non Individual

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Join us for a Convenient  
& Valuable Investing Experience!

CDSL

VERSION 24

**MIRAE ASSET**  Sharekhan



# INDEX

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<b>MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI, DEPOSITORY &amp; EXCHANGES</b>			
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2.	Most Important Terms & Conditions (MITC)	The document contains the standard Most Important Terms and Conditions as per SEBI circular.	5-6
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## SHAREKHAN LIMITED

**Registered Office Address :** 1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070, Maharashtra, India.  
Tel.: 022-6750 2000

**Correspondence Office Address :** 10th Floor, Gigaplex Bldg. No. 9, Raheja Mindspace, Airoli Knowledge Park Rd, MSEDCL Staff Colony, TTC Industrial Area, Airoli, Navi Mumbai, Maharashtra 400708, India. | Tel: 022 - 61169000/61150000 | Fax: 022 - 61169699 | Website: www.sharekhan.com

**Processing Office Address:** 3rd Floor, Bay City Centre, 309, Ponnamallee High Road, Above Maruti Kapico Show Room, Near Pachiyappas College, Chennai- 600010 | Tel : 044-49105050 / 28362900 / 28363160 / 49035050 / 49035051 | Website: www.sharekhan.com

For any grievance/dispute, please contact Sharekhan Ltd. at the above mentioned Registered / Correspondence office address or e-mail at myaccount@sharekhan.com/igc@sharekhan.com or contact at 022 - 61151111 / 022- 41523200

**Compliance Officer: Mr. Joby John Meledan; Email ID: complianceofficer@sharekhan.com | Tel.: 022- 4657 3809**

E-mail ID: complianceofficer@sharekhan.com

**CEO Name: Mr. Moon Kyung Kang | Tel No: 022 - 67502000; | E-mail ID: ceo@sharekhan.com**

In case you are not satisfied with the response, please contact the concerned Exchange/regulators as provided below:

- (1) **NSE** - ignse@nse.co.in or contact at 1800 2660058
- (2) **BSE** - dis@bseindia.com or contact at 022-22728517
- (3) **NSDL** - relations@nsdl.co.in or contact at 022 - 2499 4200
- (4) **CDSL** - complaints@cdslindia.com or contact at 1800 225 533
- (5) **MCX** - grievance@mcxindia.com or contact at 022 - 6649 4070
- (6) **SEBI Scores** - https://scores.sebi.gov.in or contact at 18002667575 / 1800227575
- (7) **Smart ODR** - 8105148710

**SEBI Regn. Nos.:** BSE / NSE / (CASH / F&O / CD) / MCX - Commodity: INZ000171337; DP: NSDL/CDSL-IN-DP-365-2018; CIN No. U99999MH1995PLC087498; PMS:INP000005786; RA:INH000006183, AMFI-registered Mutual Fund Distributor, Mutual Fund: ARN 20669, (date of initial registration: 03/07/2004, and valid till 02/07/2026); IRDAI Registered Corporate Agent (Composite) License No. CA0950, valid till June 13, 2027.

## IMPORTANT NOTE

- ✍ Signature of First Holder/Client/Applicant - (3)      ✍ Signature of Second Holder - (2)      ✍ Signature of Third Holder - (2)
- ✍ Signature of Witness - (2)

BRANCH STAMP & DATE	H O STAMP & DATE

## List of Abbreviations

Sr. No.	Short form	Expansion
1	AMC	Asset Management Company
2	AMFI	Association of Mutual Funds in India
3	AML	Anti Money Laundering
4	AP	Authorised Person
5	BSE	BSE Limited
6	CBDT	Central Board of Direct Taxes
7	CDSL	Central Depository Services Limited
8	CIN	Corporate Identification Number or Company Identification Number
9	CRS	Common Reporting Standard
10	DHC	Delivery Handling Charges
11	DIN	Director Identification Number
12	DIS	Delivery Instruction Slip
13	E & C Traders	“Energy & Commodity traders” or “E&C traders” are entities deriving their revenue from the international purchase and sale of physical commodity goods such as oil, natural gas, metals, soft commodities, etc. - excluding entities for which origin and sales of the commodities are exclusively domestic* (directly or indirectly); - excluding industrial groups that buy commodities for their transformation activities, and/or sell commodities that they have produced; - but including the trading affiliates of such industrial groups
14	F&O	Futures and Options
15	FATCA	Foreign Account Tax Compliance Act
16	FEMA	Foreign Exchange Management Act
17	MTF	Margin Trading Funding
18	IFSC	Indian Financial System Code
19	IPV	In-person Verification
20	IRDA	Insurance Regulatory Development Authority
21	ITR	Income Tax Return
22	KRA	KYC Registration Agency
23	KYC	Know Your Client / Know Your Customer
24	MF	Mutual Fund
25	MICR	Magnetic Ink Character Recognition
26	MSEI	Metropolitan Share Exchange of India Limited
27	NRI	Non-Resident Indian
28	NSDL	National Securities Depository Limited
29	NSE	National Stock Exchange of India Limited
30	PAN	Permanent Account Number
31	PEP	Politically Exposed Person
32	POA	Proof of Address
33	POI	Proof of Identity
34	RBI	Reserve Bank of India
35	RDD	Risk Disclosure Document
36	RTA	Registrar and Transfer Agent
37	SEBI	Securities and Exchange Board of India
38	SIP	Systematic Investment Plan
39	SLB	Stock Lending and Borrowing
40	SMO	<b>Senior Managing Official</b> : Senior Managing Officials (SMOs) are the Chairman of the Board of Directors or Supervisory Board*, the CEO*, the CFO*, and possibly other natural persons that have a prominent influence on the client’s decisions – e.g. the COO* or other executives
41	UID	Unique Identification Number
42	UIDAI	Unique Identification Authority of India
43	UPI	Unified Payments Interface
44	VPA	Virtual Payment Address
45	NHB	National Housing Bank
46	PFRDA	Pension Fund Regulatory and Development Authority
47	DDPI	Demat Debit and Pledge Instruction

**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 authorized 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.
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.
12. Fields marked with '\*' are mandatory fields.
13. Tick '✓' wherever applicable.
14. Please fill all dates in DD-MM-YYYY format.
15. KYC number of applicant is mandatory for updation of KYC details.
16. For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
17. Clarification / Guidelines on filling 'Personal 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.

**B. Proof of Identity (POI): - List of documents admissible as Proof of Identity:**

1. Aadhaar Card/Passport/ Voter ID card/ Driving license.  
If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
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.

**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.)**

Officially Valid Document - \*Passport / Voters Identity Card / Aadhaar Card (Aadhaar Number to be masked by the client)/ Driving License/NREGA Job Card/National Population Register Letter.

If the above officially valid documents furnished by the client does not contain updated address, the following documents shall be deemed PoA. The client shall submit updated officially valid document with current address within a period of three months of submitting the below documents to us:

1. Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
2. Property or Municipal Tax receipt.
3. Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
4. 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.  
In case the officially valid document presented by a foreign national does not contain the details of address, in such case the documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India shall be accepted as proof of address.
5. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
6. Aadhaar Letter issued by UIDAI shall be admissible as Proof of address in addition to Proof of Identity.
7. e-KYC service launched by UIDAI shall also be accepted as a valid process for KYC verification. The information containing the relevant client details and photograph made available from UIDAI as a result of e-KYC process shall be treated as a valid proof of address.

**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, FPIs, 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: Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative bank or Multinational Bank (Name, Designation & Seal should be affixed on the copy)**

**1. INSTRUCTIONS / CHECK LIST**

Additional documents in case of trading in derivatives segment (illustrative list):

1. Copy of ITR Acknowledgement	4. Bank Statement (For last 6 months)
2. Copy of Annual Accounts	5. Demat Account Holding Statement along with valuation
3. Net worth Certificate - CA Certified	6. *Any other relevant documents substantiating ownership of Assets

\* Relevant documents as per risk management policy of the stock broker to be provided by the client from time to time

In case of Non-Individuals, following additional documents to be obtained (as applicable)

Types of entity	Documentary requirements
Corporate	<p>Copy of the balance sheets for the last 2 financial years (to be submitted every year).</p> <p>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).</p> <p>List of all Directors with details as Full name, Date &amp; Place of birth</p> <p>Photograph, POI, POA, PAN, DIN numbers of whole time directors/two directors in charge of day to day operations.</p> <p>Photograph, POI, POA, PAN of Authorised Signatories.</p> <p>Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly.</p> <p>Copy of the Memorandum and Articles of Association and certificate of incorporation.</p> <p>Board Resolution for investment in securities market.</p> <p>Declaration from SMO with details as Full name, Date &amp; Place of birth, Nationality, Country of Residence, Position in company.</p> <p>Authorised signatories list with specimen signatures along with authorisation letter</p>
Partnership firm/LLP	<p>Copy of the balance sheets for the last 2 financial years (to be submitted every year).</p> <p>Certificate of registration (for registered partnership firms only).</p> <p>Copy of partnership deed.</p> <p>Authorised signatories list with specimen signatures along with authorisation letter</p> <p>Photograph, POI, POA, PAN of all Partners</p> <p>Resolution/ Authority Letter for investment in securities market.</p>
Trust	<p>Copy of the balance sheets for the last 2 financial years (to be submitted every year).</p> <p>Certificate of registration (for registered trust only).</p> <p>Copy of Trust deed.</p> <p>List of trustees certified by managing trustees/CA.</p> <p>Photograph, POI, POA, PAN of all Trustees.</p>
HUF	<p>PAN of HUF.</p> <p>Deed of declaration of HUF</p> <p>List of coparceners.</p> <p>Bank pass-book/bank statement in the name of HUF.</p> <p>Photograph, POI, POA, PAN of Karta.</p>
Unincorporated association or a body of individuals	<p>Proof of Existence/Constitution document.</p> <p>Resolution of the managing body &amp; Power of Attorney granted to transact business on its behalf.</p> <p>Authorised signatories list with specimen signatures along with photograph</p> <p>Declaration from SMO with details as Full name, Date &amp; Place of birth, Nationality, Country of Residence, Position in company.</p> <p>Copy of balance sheets for the last 2 financial years (to be submitted every year)</p>
Banks/Institutional Investors	<p>Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years.</p> <p>Authorised signatories list with specimen signatures along with authorisation letter</p> <p>Declaration from SMO with details as Full name, Date &amp; Place of birth, Nationality, Country of Residence, Position in company.</p> <p>List of all Directors with details as Full name, Date &amp; Place of birth</p>
Foreign Portfolio Investor(FPI)	<p>Copy of SEBI registration certificate.</p> <p>Authorised signatories list with specimen signatures along with authorisation letter</p> <p>Declaration from SMO with details as Full name, Date &amp; Place of birth, Nationality, Country of Residence, Position in company.</p> <p>List of all Directors with details as Full name, Date &amp; Place of birth</p>
Army/ Government Bodies	<p>Self-certification on letterhead.</p> <p>Authorised signatories list with specimen signatures along with authorisation letter</p>
Registered Society	<p>Copy of Registration Certificate under Societies Registration Act.</p> <p>List of Managing Committee members.</p> <p>Committee resolution for persons authorised to act as authorised signatories with specimen signatures along with authorisation letter</p> <p>True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.</p>

## Most Important Terms and Conditions (MITC)

(For non-custodial settled trading accounts)

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

**Declaration:** I/We hereby confirm that i/we have read and understood the above mentioned contents of the standard 'Most Important Terms and Conditions'.

### Signatures

\_\_\_\_\_  
\*Sole holder/First holder (Individual Account) / \*Authorised signatory (1)  
/Karta/ Partner of the First/Sole holder (Non-Individual)

\_\_\_\_\_  
\*Second holder (Individual) / \*Authorised signatory (2)  
/Co-parcener/Partner (Non-Individual)

\_\_\_\_\_  
\*Third holder (Individual) / \*Authorised signatory (3)  
/Co-parcener/Partner (Non-Individual)

\_\_\_\_\_  
\*Authorised signatory (4)  
/Co-parcener/Partner (Non-Individual)

\_\_\_\_\_  
\*Second holder (Non-Individual)

\_\_\_\_\_  
\*Third holder (Non-Individual)

## Most Important Terms and Conditions (MITC)

[Forming part of the Terms and Conditions for providing research services]

1. These terms and conditions, and consent thereon are for the research services provided by the Research Analyst (RA) and RA cannot execute/carry out any trade (purchase/sell transaction) on behalf of, the client. Thus, the clients are advised not to permit RA to execute any trade on their behalf.
2. The fee charged by RA to the client will be subject to the maximum of amount prescribed by SEBI/ Research Analyst Administration and Supervisory Body (RAASB) from time to time (applicable only for Individual and HUF Clients).

**Note:**

- 2.1. The current fee limit is Rs 1,51,000/- per annum per family of client for all research services of the RA.
- 2.2. The fee limit does not include statutory charges.
- 2.3. The fee limits do not apply to a non-individual client / accredited investor.
3. RA may charge fees in advance if agreed by the client. Such advance shall not exceed the period stipulated by SEBI; presently it is one quarter. In case of pre-mature termination of the RA services by either the client or the RA, the client shall be entitled to seek refund of proportionate fees only for unexpired period.
4. Fees to RA may be paid by the client through any of the specified modes like cheque, online bank transfer, UPI, etc. Cash payment is not allowed. Optionally the client can make payments through Centralized Fee Collection Mechanism (CeFCOM) managed by BSE Limited (i.e. currently recognized RAASB).
5. The RA is required to abide by the applicable regulations/ circulars/ directions specified by SEBI and RAASB from time to time in relation to disclosure and mitigation of any actual or potential conflict of interest. The RA will endeavor to promptly inform the client of any conflict of interest that may affect the services being rendered to the client.
6. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. No scheme of this nature shall be offered to the client by the RA.
7. The RA cannot guarantee returns, profits, accuracy, or risk-free investments from the use of the RA's research services. All opinions, projections, estimates of the RA are based on the analysis of available data under certain assumptions as of the date of preparation/publication of research report.
8. Any investment made based on recommendations in research reports are subject to market risks, and recommendations do not provide any assurance of returns. There is no recourse to claim any losses incurred on the investments made based on the recommendations in the research report. Any reliance placed on the research report provided by the RA shall be as per the client's own judgement and assessment of the conclusions contained in the research report.
9. The SEBI registration, Enlistment with RAASB, and NISM certification do not guarantee the performance of the RA or assure any returns to the client.
10. For any grievances,
  - Step 1: the client should first contact the RA using the details on its website or following contact details:  
(RA to provide details as per 'Grievance Redressal / Escalation Matrix')
  - Step 2: If the resolution is unsatisfactory, the client can also lodge grievances through SEBI's SCORES platform at <https://scores.sebi.gov.in/>
  - Step 3: The client may also consider the Online Dispute Resolution (ODR) through the Smart ODR portal at <https://smartodr.in>
11. Clients are required to keep contact details, including email id and mobile number/s updated with the RA at all times.
12. The RA shall never ask for the client's login credentials and OTPs for the client's Trading Account Demat Account and Bank Account. Never share such information with anyone including RA.

**Declaration:** I/We hereby confirm that i/we have read and understood the above mentioned contents of the standard 'Most Important Terms and Conditions'.

### Signatures

\_\_\_\_\_  
\*Sole holder/First holder (Individual Account) / \*Authorised signatory (1)  
/Karta/ Partner of the First/Sole holder (Non-Individual)

\_\_\_\_\_  
\*Second holder (Individual) / \*Authorised signatory (2)  
/Co-parcener/Partner (Non-Individual)

\_\_\_\_\_  
\*Third holder (Individual) / \*Authorised signatory (3)  
/Co-parcener/Partner (Non-Individual)

\_\_\_\_\_  
\*Authorised signatory (4)  
/Co-parcener/Partner (Non-Individual)

\_\_\_\_\_  
\*Second holder (Non-Individual)

\_\_\_\_\_  
\*Third holder (Non-Individual)

## CENTRAL KYC REGISTRY | KNOW YOUR CUSTOMER (KYC) APPLICATION FORM | LEGAL ENTITY

Registered office address : 1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070,  
Maharashtra, India. | Tel: 022-6750 2000 | Website: www.sharekhan.com

For office use only

Application Type\* ☐ New ☐ Update(To be filled by financial institution) KYC Number  (Mandatory for KYC update request)☐ 1. ENTITY DETAILS\*

☐ Name\*

Entity Constitution Type\*

- ☐ Partnership Firm ☐ Public Sector Banks  
☐ HUF ☐ Central/State Government Department of Agency  
☐ Private Limited Company ☐ Section 8 Companies (Companies Act, 2013)  
☐ Public Limited Company ☐ Artificial Juridical Person  
☐ Society ☐ International Organisation or Agency / Foreign  
☐ Association of Persons (AOP) / Body of Individuals (BOI) Embassy or Consular Office etc.  
☐ Trust ☐ Foreign Portfolio Investors  
☐ Liquidator ☐ Not categorized  
☐ Limited Liability Partnership ☐ Others  Please Specify  
☐ Artificial Liability Partnership

Date of Incorporation / Formation\* Date of Commencement of Business Place of Incorporation / Formation\* Registration No. (e.g. CIN): Country of Incorporation / Formation\* TIN or Equivalent Issuing Country TIN / GST Registration Number PAN\*  ☐ Form 60 furnishedApplicable only for Commodity Segment: ☐ EFE ☐ FPO ☐ AIF ☐ VCP ☐ OTHERS ☐ 2. PROOF OF IDENTITY (POI)\*

- ☐ Officially valid document(s) in respect of person authorised to transact  
☐ Certificate of Incorporation / Formation  ☐ Registration Certificate  Regn Certificate No.  
☐ Memorandum and Articles of Association ☐ Partnership Deed ☐ Trust Deed  
☐ Resolution of Board / Managing Committee ☐ Power of attorney granted to its manager, officers or employees to transact on its behalf

☐ 3. ADDRESS\*

## 3.1 Registered Office Address / Place of Business\*

Proof of Address\* ☐ Certificate of Incorporation / Formation ☐ Registration Certificate ☐ Other Document

Line 1\*

Line 2\*

Line 3\*

Landmark

City / Town / Village\*  District\*

PIN / Post Code\*  State\*  Country\*

## 3.2 Local Address in India (If different from Above)\*

Line 1\*

Line 2\*

Line 3\*

Landmark

City / Town / Village\*  District\*

PIN / Post Code\*  State\*  Country\*

☐ 4. CONTACT DETAILS (All communications will be sent to Mobile number/Email-ID provided may be used)

Tel. (Off)  FAX

Mobile  Email ID

☐ 5. NUMBER OF RELATED PERSONS

## 6. REMARKS (If any)

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## 7. APPLICANT DECLARATION

- I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it.
- I/We hereby consent to receiving information from Central KYC Registry and KRAs through SMS/Email on the above registered number/email address.
- I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRAs, CKYCR and other Intermediaries with whom I have a business relationship for KYC purposes only.

(1) 

Signature of Authorised Person

Date : \_\_\_\_\_

Place : \_\_\_\_\_

## 8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ Equivalent e-document

This is to certify that I have carried out in-person verification in respect of the client mentioned in the KYC form.

### KYC VERIFICATION CARRIED OUT BY

Identity Verification ☐ Done Date  DD -  MM -  YYYY

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

Emp. Branch \_\_\_\_\_

[Employee Signature]

### INSTITUTION DETAILS

Name : SHAREKHAN LIMITED

Code IN0344

[Institution Stamp]

## SHAREKHAN LIMITED

## CENTRAL KYC REGISTRY | KNOW YOUR CUSTOMER (KYC) APPLICATION FORM | RELATED PERSONS

Registered office address : 1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070,  
Maharashtra, India. | Tel: 022-6750 2000 | Website: www.sharekhan.com

**For office use only** Application Type\* ☐ New ☐ Update ☐ Delete  
(To be filled by financial institution) KYC Number  (Mandatory for KYC update and delete request)

**1. DETAILS OF RELATED PERSONS** (Please fill the form in English and in BLOCK letters)

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details  
KYC Number of Related Person (if available\*)  If KYC number is available, only 'Related Person Type' & 'Name' is mandatory

**Related Person Type\*** ☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointment Official  
☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify)

DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)

**1.1 PERSONAL DETAILS** (Please fill the form in English and in BLOCK letters)

**Name\*** (Same as per PAN Card/PAN Site) Prefix  First Name  Middle Name  Last Name   
**Maiden Name (If any)** First Name  Middle Name  Last Name   
**Father / Spouse Name** First Name  Middle Name  Last Name   
**Mother Name** First Name  Middle Name  Last Name   
**Date of Birth\*** DD  MM  YYYY  Place of Birth , Country of Birth   
**Gender\*** ☐ M - Male ☐ F - Female ☐ T-Transgender  
**Marital Status\*** ☐ Married ☐ Unmarried ☐ Others   
**Citizenship** ☐ IN-Indian ☐ Others  **Nationality** ☐ IN-Indian ☐ Others   
**PAN Card\***  ☐ Form 60 furnished

**1.2 PROOF OF IDENTITY AND ADDRESS\***

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

☐ A- Passport Number  ☐ F - Proof of Possession of Aadhaar   
☐ B- Voter ID Card  ☐ G - E-KYC Authentication   
☐ C- Driving Licence  ☐ H- Offline verification of Aadhaar   
☐ D- NREGA Job Card   
☐ E - National Population Register Letter

**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Pin / Post Code\*  State\*   
Country\*  Landmark

**1.3 CURRENT ADDRESS DETAILS**

☐ Same as above mentioned address (in such cases address details as below need not be provided)

Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

☐ A- Passport Number  ☐ F - Proof of Possession of Aadhaar   
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☐ D- NREGA Job Card  ☐ I - Deemed Proof of Address ☐  
☐ E - National Population Register Letter  ☐ J - Self Declaration

**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Pin / Post Code\*  State\*   
Country\*  Landmark

#### 1.4 FATCA Details

Are you a US person? ☐ Yes ☐ No Is your Tax Residency Other than India ☐ Yes ☐ No Any other information \_\_\_\_\_

If any of the above is yes, please indicate all countries in which you are resident for tax purpose and the associated Tax ID number below :

Sr. No	Country of Tax Residency	Tax Identification No (TIN)	Identification Type
1			
2			
3			

Note: # In case of outside tax residency, kindly refer website <https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759> for correct TIN structure. Please note this data is uploaded to KRA and reportable to Income Tax authorities, accuracy is of utmost importance.

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

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

Email ID

#### 1.6 OTHER DETAILS

A. If the following is additionally applicable to you. Please tick (✓) one or more as applicable:

- |   |  |
|---|--|
| <input type="checkbox"/> Politically Exposed Person (PEP)                               | <input type="checkbox"/> Related to a Politically Exposed Person (PEP) |
| <input type="checkbox"/> Civil Servant <input type="checkbox"/> Bureaucrat              | <input type="checkbox"/> Current / Former MP, MLA or MLC               |
| <input type="checkbox"/> Politician <input type="checkbox"/> Not a PEP / Related to PEP | <input type="checkbox"/> Current / Former Head of State                |

B. Whether UBO/SMO of listed entity (Yes or No) \_\_\_\_\_. If yes then Name of Listed company \_\_\_\_\_

#### 1.7 APPLICANT DECLARATION

- I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it.
- I/We hereby consent to receiving information from Central KYC Registry and KRAs through SMS/Email on the above registered number/email address.
- I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRAs, CKYCR and other Intermediaries with whom I have a business relationship for KYC purposes only.

PHOTO

(1) 

Signature of Applicant

Date : \_\_\_\_\_

Place : \_\_\_\_\_

#### 1.8 ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification ☐ Digital KYC Process  
☐ Equivalent e-document ☐ Video Based KYC

This is to certify that I have carried out in-person verification in respect of the client mentioned in the KYC form.

##### KYC VERIFICATION CARRIED OUT BY

Date DD MM YYYY

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

Emp. Branch \_\_\_\_\_

[Employee Signature]

##### INSTITUTION DETAILS

Name : SHAREKHAN LIMITED

Code IN0344

[Institution Stamp]

## SHAREKHAN LIMITED

## CENTRAL KYC REGISTRY | KNOW YOUR CUSTOMER (KYC) APPLICATION FORM | RELATED PERSONS

Registered office address : 1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070,  
Maharashtra, India. | Tel: 022-6750 2000 | Website: www.sharekhan.com

**For office use only** Application Type\* ☐ New ☐ Update ☐ Delete  
(To be filled by financial institution) KYC Number  (Mandatory for KYC update and delete request)

## 1. DETAILS OF RELATED PERSONS (Please fill the form in English and in BLOCK letters)

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details  
KYC Number of Related Person (if available\*)  If KYC number is available, only 'Related Person Type' & 'Name' is mandatory

**Related Person Type\*** ☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointment Official  
☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify)

DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)

## 1.1 PERSONAL DETAILS (Please fill the form in English and in BLOCK letters)

**Name\*** (Same as per PAN Card/PAN Site) Prefix  First Name  Middle Name  Last Name   
**Maiden Name (If any)** First Name  Middle Name  Last Name   
**Father / Spouse Name** First Name  Middle Name  Last Name   
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**Gender\*** ☐ M - Male ☐ F - Female ☐ T-Transgender  
**Marital Status\*** ☐ Married ☐ Unmarried ☐ Others   
**Citizenship** ☐ IN-Indian ☐ Others  **Nationality** ☐ IN-Indian ☐ Others   
**PAN Card\***  ☐ Form 60 furnished

## 1.2 PROOF OF IDENTITY AND ADDRESS\*

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☐ E - National Population Register Letter

**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
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Line 1\*   
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Email ID

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A. If the following is additionally applicable to you. Please tick (✓) one or more as applicable:

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|---|--|
| <input type="checkbox"/> Politically Exposed Person (PEP)                               | <input type="checkbox"/> Related to a Politically Exposed Person (PEP) |
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| <input type="checkbox"/> Politician <input type="checkbox"/> Not a PEP / Related to PEP | <input type="checkbox"/> Current / Former Head of State                |

B. Whether UBO/SMO of listed entity (Yes or No) \_\_\_\_\_. If yes then Name of Listed company \_\_\_\_\_

#### 1.7 APPLICANT DECLARATION

- I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it.
- I/We hereby consent to receiving information from Central KYC Registry and KRAs through SMS/Email on the above registered number/email address.
- I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRAs, CKYCR and other Intermediaries with whom I have a business relationship for KYC purposes only.

PHOTO

(1) 

Signature of Applicant

Date : \_\_\_\_\_

Place : \_\_\_\_\_

#### 1.8 ATTESTATION / FOR OFFICE USE ONLY

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##### KYC VERIFICATION CARRIED OUT BY

Date DD MM YYYY

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

Emp. Branch \_\_\_\_\_

[Employee Signature]

##### INSTITUTION DETAILS

Name : SHAREKHAN LIMITED

Code IN0344

[Institution Stamp]

## SHAREKHAN LIMITED

## CENTRAL KYC REGISTRY | KNOW YOUR CUSTOMER (KYC) APPLICATION FORM | RELATED PERSONS

Registered office address : 1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070,  
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**For office use only** Application Type\* ☐ New ☐ Update ☐ Delete  
(To be filled by financial institution) KYC Number  (Mandatory for KYC update and delete request)

## 1. DETAILS OF RELATED PERSONS (Please fill the form in English and in BLOCK letters)

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details  
KYC Number of Related Person (if available\*)  If KYC number is available, only 'Related Person Type' & 'Name' is mandatory

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☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify)

DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)

## 1.1 PERSONAL DETAILS (Please fill the form in English and in BLOCK letters)

**Name\*** (Same as per PAN Card/PAN Site) Prefix  First Name  Middle Name  Last Name   
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**Mother Name** First Name  Middle Name  Last Name   
**Date of Birth\*** DD MM YYYY Place of Birth , Country of Birth   
**Gender\*** ☐ M - Male ☐ F - Female ☐ T-Transgender  
**Marital Status\*** ☐ Married ☐ Unmarried ☐ Others   
**Citizenship** ☐ IN-Indian ☐ Others  **Nationality** ☐ IN-Indian ☐ Others   
**PAN Card\***  ☐ Form 60 furnished

## 1.2 PROOF OF IDENTITY AND ADDRESS\*

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

☐ A- Passport Number  ☐ F - Proof of Possession of Aadhaar   
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☐ C- Driving Licence  ☐ H- Offline verification of Aadhaar   
☐ D- NREGA Job Card   
☐ E - National Population Register Letter

**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Pin / Post Code\*  State\*   
Country\*  Landmark

## 1.3 CURRENT ADDRESS DETAILS

☐ Same as above mentioned address (in such cases address details as below need not be provided)

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**Address**

Line 1\*   
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#### 1.4 FATCA Details

Are you a US person? ☐ Yes ☐ No Is your Tax Residency Other than India ☐ Yes ☐ No Any other information \_\_\_\_\_

If any of the above is yes, please indicate all countries in which you are resident for tax purpose and the associated Tax ID number below :

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2			
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Tel. (Off) - Tel. (Res) - Mobile -

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#### 1.6 OTHER DETAILS

A. If the following is additionally applicable to you. Please tick (✓) one or more as applicable:

- |   |  |
|---|--|
| <input type="checkbox"/> Politically Exposed Person (PEP)                               | <input type="checkbox"/> Related to a Politically Exposed Person (PEP) |
| <input type="checkbox"/> Civil Servant <input type="checkbox"/> Bureaucrat              | <input type="checkbox"/> Current / Former MP, MLA or MLC               |
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B. Whether UBO/SMO of listed entity (Yes or No) \_\_\_\_\_. If yes then Name of Listed company \_\_\_\_\_

#### 1.7 APPLICANT DECLARATION

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PHOTO

(1) 

Signature of Applicant

Date : \_\_\_\_\_

Place : \_\_\_\_\_

#### 1.8 ATTESTATION / FOR OFFICE USE ONLY

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##### KYC VERIFICATION CARRIED OUT BY

Date DD MM YYYY

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

Emp. Branch \_\_\_\_\_

[Employee Signature]

##### INSTITUTION DETAILS

Name : SHAREKHAN LIMITED

Code IN0344

[Institution Stamp]

## SHAREKHAN LIMITED

## CENTRAL KYC REGISTRY | KNOW YOUR CUSTOMER (KYC) APPLICATION FORM | RELATED PERSONS

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**For office use only** Application Type\* ☐ New ☐ Update ☐ Delete  
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## 1. DETAILS OF RELATED PERSONS (Please fill the form in English and in BLOCK letters)

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details  
KYC Number of Related Person (if available\*)  If KYC number is available, only 'Related Person Type' & 'Name' is mandatory

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DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)

## 1.1 PERSONAL DETAILS (Please fill the form in English and in BLOCK letters)

**Name\*** (Same as per PAN Card/PAN Site) Prefix  First Name  Middle Name  Last Name   
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**Marital Status\*** ☐ Married ☐ Unmarried ☐ Others   
**Citizenship** ☐ IN-Indian ☐ Others  **Nationality** ☐ IN-Indian ☐ Others   
**PAN Card\***  ☐ Form 60 furnished

## 1.2 PROOF OF IDENTITY AND ADDRESS\*

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**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Pin / Post Code\*  State\*   
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## 1.3 CURRENT ADDRESS DETAILS

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PHOTO

(1) 

Signature of Applicant

Date : \_\_\_\_\_

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##### KYC VERIFICATION CARRIED OUT BY

Date

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

##### INSTITUTION DETAILS

Name :

Code

[Institution Stamp]

## SHAREKHAN LIMITED

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**Gender\*** ☐ M - Male ☐ F - Female ☐ T-Transgender  
**Marital Status\*** ☐ Married ☐ Unmarried ☐ Others   
**Citizenship** ☐ IN-Indian ☐ Others  **Nationality** ☐ IN-Indian ☐ Others   
**PAN Card\***  ☐ Form 60 furnished

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☐ A- Passport Number  ☐ F - Proof of Possession of Aadhaar   
☐ B- Voter ID Card  ☐ G - E-KYC Authentication   
☐ C- Driving Licence  ☐ H- Offline verification of Aadhaar   
☐ D- NREGA Job Card   
☐ E - National Population Register Letter

**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Pin / Post Code\*  State\*   
Country\*  Landmark

## 1.3 CURRENT ADDRESS DETAILS

☐ Same as above mentioned address (in such cases address details as below need not be provided)

Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

☐ A- Passport Number  ☐ F - Proof of Possession of Aadhaar   
☐ B- Voter ID Card  ☐ G - E-KYC Authentication   
☐ C- Driving Licence  ☐ H- Offline verification of Aadhaar   
☐ D- NREGA Job Card  ☐ I - Deemed Proof of Address ☐  
☐ E - National Population Register Letter  ☐ J - Self Declaration

**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Pin / Post Code\*  State\*   
Country\*  Landmark

#### 1.4 FATCA Details

Are you a US person? ☐ Yes ☐ No Is your Tax Residency Other than India ☐ Yes ☐ No Any other information \_\_\_\_\_

If any of the above is yes, please indicate all countries in which you are resident for tax purpose and the associated Tax ID number below :

Sr. No	Country of Tax Residency	Tax Identification No (TIN)	Identification Type
1			
2			
3			

Note: # In case of outside tax residency, kindly refer website <https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759> for correct TIN structure. Please note this data is uploaded to KRA and reportable to Income Tax authorities, accuracy is of utmost importance.

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

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

Email ID

#### 1.6 OTHER DETAILS

A. If the following is additionally applicable to you. Please tick (✓) one or more as applicable:

- |   |  |
|---|--|
| <input type="checkbox"/> Politically Exposed Person (PEP)                               | <input type="checkbox"/> Related to a Politically Exposed Person (PEP) |
| <input type="checkbox"/> Civil Servant <input type="checkbox"/> Bureaucrat              | <input type="checkbox"/> Current / Former MP, MLA or MLC               |
| <input type="checkbox"/> Politician <input type="checkbox"/> Not a PEP / Related to PEP | <input type="checkbox"/> Current / Former Head of State                |

B. Whether UBO/SMO of listed entity (Yes or No) \_\_\_\_\_. If yes then Name of Listed company \_\_\_\_\_

#### 1.7 APPLICANT DECLARATION

- I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it.
- I/We hereby consent to receiving information from Central KYC Registry and KRAs through SMS/Email on the above registered number/email address.
- I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRAs, CKYCR and other Intermediaries with whom I have a business relationship for KYC purposes only.

PHOTO

(1) 

Signature of Applicant

Date : \_\_\_\_\_

Place : \_\_\_\_\_

#### 1.8 ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification ☐ Digital KYC Process  
☐ Equivalent e-document ☐ Video Based KYC

This is to certify that I have carried out in-person verification in respect of the client mentioned in the KYC form.

##### KYC VERIFICATION CARRIED OUT BY

Date DD MM YYYY  
Emp. Name \_\_\_\_\_  
Emp. Code \_\_\_\_\_  
Emp. Designation \_\_\_\_\_  
Emp. Branch \_\_\_\_\_

[Employee Signature]

##### INSTITUTION DETAILS

Name : SHAREKHAN LIMITED  
Code IN0344

[Institution Stamp]

# ACCOUNT OPENING FORM FOR DEPOSITORY

1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West),  
Mumbai - 400 070, Maharashtra, India.

**MIRAE ASSET** Sharekhan

CDSL DP ID : 12036000

Client - ID (to be filled by D. P.)

I/We request you to open a Depository Account in my/our Name as per the following details (Please fill all the details in CAPITAL LETTERS only)

## A. TYPE OF ACCOUNT (Please tick whichever is applicable)

☐ Body Corporate ☐ FI ☐ FII/FPI ☐ Foreign Portfolio Investor ☐ Mutual Fund ☐ Trust ☐ Bank ☐ CM ☐ Others \_\_\_\_\_  
☐ HUF ☐ Partnership Firm ☐ Registered Trust ☐ Unregistered Trust ☐ AOP ☐ LLP ☐ Qualified Foreign Investor

## B. DETAILS OF ACCOUNT HOLDERS FOR DEPOSITORY ACCOUNT (In Case of Partnership / AOP/ Trust, the account would be in the name of partner or trustee)

Sole/First Holder/Client

Second Holder

Third Holder

Preferred user ID: (1)  (2)  (3)

## OTHER DETAILS

Trading Name :

Whether registered with SEBI/ RBI/ NHB/ IRDA/ PF RDA/Any Other Financial Authority \_\_\_\_\_ Registration No \_\_\_\_\_

RBI Approval Reference Number \_\_\_\_\_

RBI Approval Date \_\_\_\_\_

Nature of Business \_\_\_\_\_

Any other information \_\_\_\_\_

## C. STANDING INSTRUCTIONS

Sr. No.	Authorisations	Please ✓ Relevant
1.	Consent to receive credits automatically into my/our Account. (If not ticked, the default option would be "Yes")	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Consent to send Electronic Transaction-cum-Holding Statement at Sole/First Holder's email id stated in the KYC	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Consent to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Consent to receive SMS Alerts from CDSL (T & C available on www.sharekhan.com)	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Consent to accept all the pledge instructions in my/our account without any other further instruction from my/our end. (If not ticked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Consent to receive dividend / interest directly in to my bank account given below through ECS (If not ticked, 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
7.	Consent to download records from CKYCR and KRAs and share records and Aadhar data and documents to CKYCR and KRAs'	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Consent to receive standard account opening documents <input type="checkbox"/> Electronic <input type="checkbox"/> Physical	
9.	Mode of receiving Annual Reports & Statement of Accounts <input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical & Electronic (For all online clients or if not ticked, the default option would be Electronic) (Applicable for Demat Account)	
10.	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	
easi	To register for easi, please visit CDSL's website: <a href="http://www.cdslindia.com">www.cdslindia.com</a> . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.	

## D. BANK ACCOUNT DETAILS

Bank Name :

(Through which transactions would be generally routed.) (Default for Payout & DP)

Account No:  Branch:

Branch Address:

Pin Code:

9-Digit MICR code:  IFSC Code :

UPI/VPA

Account Type: ☐ Savings ☐ Current ☐ Others : \_\_\_\_\_

(i) Copy of cancelled cheque leaf/pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.

(ii) Photocopy of the Bank Statement having name & address of the BO. (iii) Photocopy of the Passbook having name & 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)

**E. DP TARIFF SCHEME ("Schedule A") - (Scheme Details on Page 32)**
☐ Scheme A (TC100) ☐ Scheme B (TC108) ☐ Scheme C (TC119) ☐ Scheme D (TC117) ☐ Scheme G (TC123) ☐ Scheme F (TC101)
**F. Mobile No. & Email ID Declaration of Entity:**

<b>I/We hereby declare that the Mobile number as per KRA/CKYC belongs to:</b> <input type="checkbox"/> Director <input type="checkbox"/> Promoter <input type="checkbox"/> Authorised Signatory <input type="checkbox"/> Partner <input type="checkbox"/> Karta <input type="checkbox"/> Trustee <input type="checkbox"/> UBO <input type="checkbox"/> Others _____	<b>I/We hereby declare that the Email ID as per KRA/CKYC belongs to:</b> <input type="checkbox"/> Director <input type="checkbox"/> Promoter <input type="checkbox"/> Authorised Signatory <input type="checkbox"/> Partner <input type="checkbox"/> Karta <input type="checkbox"/> Trustee <input type="checkbox"/> UBO <input type="checkbox"/> Others _____
---	--

**G. DETAILS OF OTHER HOLDERS**

	FIRST HOLDER	SECOND HOLDER	THIRD HOLDER
<b>Gross Income Range Per Annum (Rs. in Lakhs)</b>	<input type="checkbox"/> <1 <input type="checkbox"/> 1-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-25 <input type="checkbox"/> 25-1cr <input type="checkbox"/> > 1cr	<input type="checkbox"/> <1 <input type="checkbox"/> 1-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-25 <input type="checkbox"/> 25-1cr <input type="checkbox"/> > 1cr	<input type="checkbox"/> <1 <input type="checkbox"/> 1-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-25 <input type="checkbox"/> 25-1cr <input type="checkbox"/> > 1cr
<b>Networth : (should not be older than 1 year)</b>	Amount (Rs.) _____ As on date <input type="text"/> d <input type="text"/> d <input type="text"/> m <input type="text"/> m <input type="text"/> y <input type="text"/> y <input type="text"/> y <input type="text"/> y	Amount (Rs.) _____ As on date <input type="text"/> d <input type="text"/> d <input type="text"/> m <input type="text"/> m <input type="text"/> y <input type="text"/> y <input type="text"/> y <input type="text"/> y	Amount (Rs.) _____ As on date <input type="text"/> d <input type="text"/> d <input type="text"/> m <input type="text"/> m <input type="text"/> y <input type="text"/> y <input type="text"/> y <input type="text"/> y
<b>Additional Details, if applicable. (Please tick one or more as applicable)</b>	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Bureaucrat <input type="checkbox"/> Civil Servant <input type="checkbox"/> Politician <input type="checkbox"/> Current/Formal MP, MLA or MLC <input type="checkbox"/> Current/Formal Head of State <input type="checkbox"/> Not PEP / Related to PEP	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Bureaucrat <input type="checkbox"/> Civil Servant <input type="checkbox"/> Politician <input type="checkbox"/> Current/Formal MP, MLA or MLC <input type="checkbox"/> Current/Formal Head of State <input type="checkbox"/> Not PEP / Related to PEP	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Bureaucrat <input type="checkbox"/> Civil Servant <input type="checkbox"/> Politician <input type="checkbox"/> Current/Formal MP, MLA or MLC <input type="checkbox"/> Current/Formal Head of State <input type="checkbox"/> Not PEP / Related to PEP
<b>Mobile Number Declaration</b> (*Family to strictly include spouse, dependent children and dependent parents only. Kindly tick relevant option)	I hereby declare that the Mobile number as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family* (specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Consent for SMS Alert facility <input type="checkbox"/> Yes <input type="checkbox"/> No	I hereby declare that the Mobile number as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family* (specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Consent for SMS Alert facility <input type="checkbox"/> Yes <input type="checkbox"/> No	I hereby declare that the Mobile number as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family* (specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Consent for SMS Alert facility <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Email ID Declaration</b> (*Family to strictly include spouse, dependent children and dependent parents only. Kindly tick relevant option)	I hereby declare that the Email ID as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family* (specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents	I hereby declare that the Email ID as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family* (specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents	I hereby declare that the Email ID as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family* (specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents
<b>Nature of Business</b>	_____	_____	_____
<b>Sources of Wealth / Income</b>	<input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Gift <input type="checkbox"/> Rental Income <input type="checkbox"/> Royalty <input type="checkbox"/> Prize Money <input type="checkbox"/> Ancestral Property <input type="checkbox"/> Others (Please specify) _____	<input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Gift <input type="checkbox"/> Rental Income <input type="checkbox"/> Royalty <input type="checkbox"/> Prize Money <input type="checkbox"/> Ancestral Property <input type="checkbox"/> Others (Please specify) _____	<input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Gift <input type="checkbox"/> Rental Income <input type="checkbox"/> Royalty <input type="checkbox"/> Prize Money <input type="checkbox"/> Ancestral Property <input type="checkbox"/> Others (Please specify) _____
<b>Place of Birth</b>	_____	_____	_____
<b>Country of Birth</b>	<input type="checkbox"/> INDIA <input type="checkbox"/> Other _____	<input type="checkbox"/> INDIA <input type="checkbox"/> Other _____	<input type="checkbox"/> INDIA <input type="checkbox"/> Other _____
<b>Any other information</b>	_____	_____	_____

**H. Clearing Member Details (to be filled up by Clearing Members only)**

NAME OF STOCK EXCHANGE:	<input type="text"/>
NAME OF CLEARING CORPORATION:	<input type="text"/>
CLEARING MEMBER ID:	<input type="text"/>
SEBI REGISTRATION NO.:	<input type="text"/>
TRADE NAME:	<input type="text"/>
CM-BP-ID (TO BE FILLED UP BY PARTICIPANT):	<input type="text"/>

**I. INTRODUCER DETAILS**

Name of The Introducer:

Status of the Introducer: Sub-broker/Remisier/Authorised Person/Existing Client/Director or Employee of any other Person (Please Specify)

Proof of Identity (POI) : ☐ PAN No. ☐ Passport No. ☐ Driving Licence ☐ Voter ID

Residence Address:

Pin Code

Mobile No. / Tel. No. :  Email ID :



Signature of Introducer:

**J. INVESTMENT/TRADING EXPERIENCE & PREFERENCE**

☐ No Prior Investment Experience  Years in Equities  Years In Derivatives  Years in other Investment Related Field

Authorised Signatories (Enclose a Board Resolution for Authorised Signatories)

	Name	Designation	Specimen Signature(s) (with Co. Rubber Stamp)
Sole/First Holder			
First Signatory			(2)
Second Signatory			
Third Signatory			
Other Holders			
Second Holder			(1)
Third Holder			(1)

Mode of Operation For Authorised Signatories (in case of Multiple Signatories, all the holders must sign)

<input type="checkbox"/> Any one singly	<input type="checkbox"/> As per resolution
<input type="checkbox"/> Jointly by	<input type="checkbox"/> Others (please specify)

Date: Place: **DECLARATION**

- I/we hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case of any of the above information is found to be false or untrue or misleading or misrepresenting, I/we am/are aware that I/we may be held liable for it.
- I/We confirm having read, received, explained and understood the contents of policies and procedures, terms & conditions governing Stock Broker, terms & conditions applicable for Margin Trading, Policy on Handling of My Good Till Date Orders, Risk Disclosure Documents & Do's & Don't's for trading on the Exchanges, Rights and Obligations applicable for Stock Brokers, Clients, Rights and Obligations applicable for Margin Trading Facility as well as Rights and Obligations applicable for the Beneficial Owner & Depository Participants & the tariff sheet, as available on the website on the company. I/We am/are further aware that a copy of Terms & Conditions governing Stock Broker, Risk Disclosure Document, Policy on Handling of My Good Till Date Orders, Policies and Procedures, Do's & Don't's for trading on the Exchanges and Rights and Obligations applicable for Stock Brokers, Authorized Persons & Clients, Rights and Obligations of Stock Brokers & Clients for Margin Trading Facility as well as Rights and Obligations applicable for the Beneficial Owner & Depository Participants will be received by me/us in electronic form on the email ID provided by me / us in the KYC Document. This KYC document shall be subject to the jurisdiction of the Courts in Mumbai. Further the conciliation hearing through SEBI ODR mechanism will be confidential and any video/ recording/ statements made related to the same will not be considered as evidence in court of law.

3. I/we have read and agree to be bound by the Rules, Regulations, bye laws, circulars and guidelines issued by SEBI, Exchanges, Stock Broker, AMFI, Mutual Funds, Depository and Depository Participant pertaining to my/our trading and demat account, as are in force from time to time.
4. I/we understand that the Stock Broker is relying on this information for the purpose of determining the status of the applicants named above in compliance with CRS/FATCA. The Stock Broker is not able to offer any tax advice on CRS or FATCA or its impact on the applicants and I/We shall seek advice from professional tax advisor for any tax questions. Further, I/We agree to submit a new form within 30 days if any information or certification on this form gets changed. I/We agree, as may be required by Regulatory authorities, Stock Broker shall be required to comply to report, reportable details to CBDT or close or suspend my/our account.
5. Declaration of Tax Conformity– I/We acknowledge that it is my responsibility to understand and comply with and am / are in full compliance with any tax obligations and requirements and the consequences thereof that apply to me/us under the laws and regulations of my/our country(ies) of residence or any other relevant jurisdiction.

I/We hereby declare that all assets, including cash and securities, deposited in my account(s) with the Sharekhan and the income or proceeds thereof, are currently and will continue to be fully disclosed to the relevant tax and any other authorities in my/our country(ies) of residence and in any other jurisdiction as required by the applicable laws and regulations and also authorize Sharekhan to disclose the same to any domestic / overseas regulators or tax authorities, to enable the authorities to establish my / our tax liability therein and / or to enable Sharekhan to comply with the regulatory requirements it is subject to.

6. I/We hereby declare that I/we had provided Aadhaar Card as proof of Identity and/or proof of address to Sharekhan Ltd even-though there were other documents accepted by Sharekhan and I/we authorize Sharekhan to share the copy and/or details of the Aadhaar card (excluding Aadhaar Number) as per the Regulatory/Exchange/Depository requirement. (Applicable in case Aadhaar card is provided as proof of address and/or identity)
7. I/We hereby confirm that Sharekhan may update my/our name in all Exchanges as per the name available in Income Tax records.
8. I/We, opening demat account with Sharekhan, hereby declare that I/we will submit only those inter depository transfer instructions in respect of Government Securities (G-Sec) which are bonafide and arising out of genuine trade or transfer transaction.
9. I/We hereby confirm that I/We am/are not subject to sanctions nor do I/We form a part of the sanctions lists enforced by the European Union ("EU"), France ("FR"), the United States ("U.S."), United Nations Security Council ("UNSC") or form part of the list of banned organizations, designated entities/individuals listed under the Unlawful Activities (Prevention) Act, 1967.
10. I/We hereby confirm that whenever there will be change of address, I/We will intimate you about the same.
11. I/We, provide consent for the disclosure of information and data relating to me / my accounts with Sharekhan Ltd and its group companies, that in case of any default, if any, committed by me / us, whereby as per Sharekhan Ltd's records there is any amount outstanding/due to be paid to Sharekhan or its group companies then in such circumstance, Sharekhan and or its group companies can lawfully with our full free consent disclose or share mine/our data including any personal information as Sharekhan may deem appropriate and necessary for recovering dues with its Vendors, Contractors, Associates, Advocates, Accountants, Regulatory Agencies, RBI, CIBIL & Third Party Agents. And we hereby agree that Sharekhan is within its rights to use this data by itself or through any authorised representative/ service provider or agent etc to recover the dues, initiate legal proceedings / litigations in dispute resolution forums etc.
12. I/We, confirm that on expiry of the time period for which Annual maintenance Charges (AMC) are levied by Sharekhan, the liability and obligation to renew the same and ensure that the reduced charges continue to apply to my account rests with me as the client of Sharekhan. Further I understand that the trading member reserves the right to extend or discontinue or change in partial/full the Annual Maintenance Charge (AMC) Scheme without any prior notice to me/us. We understand that the revised AMC shall become applicable from such date as may be decided by the trading member and communicated by the TM either on its website/ or by sms/email or any other electronic form as per the TM's discretion.  
I/We, agree that in case of discontinuation in AMC Scheme, default brokerage rate as applicable at relevant time displayed on website of Sharekhan shall be applicable to my/our account.
13. For receiving Statement of Account in electronic form:
  - I. Client must ensure the confidentiality of the password of the email account.
  - II. Client must promptly inform the Participant if the email address has changed.
  - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Stock Broker/Depository Participant may also terminate this facility by giving 10 days prior notice.

**FOR OFFICE PURPOSES:**

UCC Code allotted to the Client: (As mention on page no. 6 on account opening form)

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Staff / Authorised Person			
Staff Code			
Designation of the Staff			
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 terms and conditions and handed over a copy of the same. 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', Terms and Conditions and RDD would be made available on my/ our website, if any, for the information of the clients.

I hereby confirm that, I have not directed, encouraged or assisted client with respect to strategies to their account as US accounts / Other reportable account. I have not given any tax advice to client."

Date: \_\_\_\_\_

Seal/ Stamp of Sharekhan Limited

(Name &amp; Signature of the Authorised Signatory)

Particular	Name	Code
Franchisee / Branch Name		
Remisier Name		
Referring Employee Name		
Name of RM / Executive		
Name of Manager		
Lead Source		

Account opening charges : \_\_\_\_\_

In case of waiver of account opening charges:

Approved by (Name)	Designation	Signature with Stamp

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## MAJOR SANCTIONED COUNTRIES AND REGIONS SELF-DECLARATION

(MSCs- Crimea/Sevastopol, Cuba, Iran, North Korea and Syria)

To the best of your knowledge, please answer the questions below regarding the Company's direct and/or indirect exposure to MSCs.

Does your company or **any member of the Company's Controlled Perimeter**:

- o Have a location in, is incorporated in or reside in or have any offices in an MSC; and/or
- o Have transactions, investments, dealings ("Activities") or Planned Activities in an MSC, or
- o Have any Current Activities or Planned Activities with (or in) any individual located, resident, or entity organized in an MSC or with (or in) any entity directly or indirectly owned or controlled by any entity located, resident, or organized in an MSCs (in each case, including with intermediaries acting on behalf of or engaging in related Activities with MSCs or MSC based entities)?

Please Choose:

☐ YES    ☐ NO

We will promptly notify Sharekhan if we, at any time, are no longer able to comply with any of the representations.

Company hereby represents that the statements above are fully accurate:

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

Authorised Signatory Name & Designation:

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_




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### Declaration by partners

To,  
**Sharekhan Limited**

1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070, Maharashtra, India.

1. I / We, have submitted an application for opening a single / joint account for opening a Beneficial Owner [BO] account in the category "individual" for holding and carrying out transactions in respect of securities belonging to our firm, since as per the clarification issued by the Department of Company Affairs vide its Circular No. 5/75 (8/18/75-CL-V) dated March 31, 1975, Partnership Firm is not capable of being a member within the meaning of Section 41 of The Companies Act, 1956.
2. I / we represent the firm.
3. In consideration of you having agreed to accept the Permanent Account Number [PAN] issued by the Income Tax Department [ITD] to the firm along with our individual identity documents, I / We acknowledge and undertake as under :-
  - a) The acceptance of the PAN number of our firm does not amount to you having taken notice of trust or recognise our firm.
  - b) I / We shall continue to be responsible for complying with the relevant provisions of The Companies Act, 1956 and the Rules made thereunder and other applicable Laws failing which I / we shall be responsible for the consequences thereof.

Yours faithfully, (3)  \_\_\_\_\_ (2)  \_\_\_\_\_ (2)  \_\_\_\_\_  
(Name of the Partner) (Name of the Partner) (Name of the Partner)

### Declaration by Partner(s) to recognize Demat A/c for trading purpose.

To,  
**Sharekhan Limited**

1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070, Maharashtra, India.

Dear Sir,

This is with reference to the trading account opened with you in the name of \_\_\_\_\_ a partnership firm and bearing the code \_\_\_\_\_.

I \_\_\_\_\_, partner of the above mentioned firm hereby declare and authorise you to recognize the beneficiary account No. \_\_\_\_\_.

\_\_\_\_\_ with depository \_\_\_\_\_ opened in my name, for the purposes of completing the share transfer obligations pursuant to the trading operations of the Partnership Firm. I agree and understand that this is to facilitate the operation of the above trading account with you, as a beneficiary account cannot be opened with a depository participant in the name of a partnership firm as per regulations and that transfers made by you to the beneficiary account as complete discharge of obligations by you in respect of trades executed in the above trading account of the firm.

Signature (Please sign with stamp of the Firm)

\_\_\_\_\_  
(Name of the Partner whose beneficiary is used )

We, (please write name of partners)

1. \_\_\_\_\_ 2. \_\_\_\_\_
3. \_\_\_\_\_ 4. \_\_\_\_\_

partners of the firm confirm that any securities due to the Firm's trading account with you, if transferred to the above mentioned Dmat account, will constitute good delivery of your obligation. We further state that Sharekhan will not be responsible, if the shares are transferred to the above-mentioned a/c.

If there is any change in the information given above, same shall be informed to Sharekhan in writing. If any such information not communicated to Sharekhan, than Sharekhan will not be liable for losses suffered by the firm or any of the individual partners.

Signature X Signature X Signature X  
Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

### Declaration By HUF To Recognize Demat A/c For Trading Purpose.

To,  
**Sharekhan Limited**

1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070, Maharashtra, India.

Dear Sir,

This is with reference to the trading account opened with you in the name of \_\_\_\_\_ and bearing the code \_\_\_\_\_, I hereby declare and authorise you to recognize the beneficiary account No. \_\_\_\_\_ with depository \_\_\_\_\_ opened in the name of the undersigned who is the Karta of the HUF. For the purposes of completing the share transfer obligations pursuant to the trading operations. I agree and understand that this is to facilitate the operation of the above trading account. the transfers made by you to the beneficiary account shall be complete discharge of obligations by you in respect of trades executed in the above trading account.

Signature (Please sign with stamp of the HUF)

Signature X \_\_\_\_\_

## PROFILE SHEET

Dear Customer,

Please select product that you wish to avail of:

Also, please answer a few questions to help us serve you better

Sr. No.	Questions	Option					
		A	B	C	D	E	F
1	How would you like to trade with Sharekhan?	Internet	Phone/Branch	Both			
2	Have you been investing or trading in the stock market?	Yes	No				
3	Do you trade in Cash market or Derivative market?	Cash	Derivative	Both	None		
4	What is your frequency of your investing / trading?	Many times a day	Once a day	Many times Week	Once a Week	Once a month or more	None
5	What is your current portfolio size? (Total investment in Shares and Mutual Funds)	Below 5 Lacs	5-25 Lacs	25-50 Lacs	50 Lacs and above	No Portfolio	
6	How much more do you plan to invest in stock market in the next 2 years?	Below 5 Lacs	5-25 Lacs	25-50 Lacs	50 Lacs and above		
7	In which range would your annual income fall in to?	Below 5 Lacs	5-25 Lacs	25-50 Lacs	50 Lacs and above		
8	What is your existing mode of transaction?	Internet based account	Non Internet account	No Broker			
9	Do you have a Relationship Manager allocated to you?	Yes	No	None			
10	Would you like to undergo free education?	<input type="checkbox"/> Investments		<input type="checkbox"/> Trading strategies based on technical analysis			
11	How long have you been investing in stocks?	<input type="checkbox"/> New <input type="checkbox"/> 5 to 10 years		<input type="checkbox"/> 1 to 5 years <input type="checkbox"/> More than 10 years			
12	What is your source of stock market information?	<input type="checkbox"/> TV channels: <input type="checkbox"/> CNBC <input type="checkbox"/> Newspaper: <input type="checkbox"/> Economic Times <input type="checkbox"/> Sharekhan Research Magazines <input type="checkbox"/> Friends/Relatives <input type="checkbox"/> Broker		<input type="checkbox"/> NDTV PROFIT <input type="checkbox"/> Others (Specify) _____ <input type="checkbox"/> Others (Specify) _____ <input type="checkbox"/> Other research magazines <input type="checkbox"/> Others (Specify) _____			
13	What is your marketstock preference?	Market preference <input type="checkbox"/> Speculator <input type="checkbox"/> Regular investor <input type="checkbox"/> Occasional investment <input type="checkbox"/> Trader		Stock preference <input type="checkbox"/> High risk return <input type="checkbox"/> Bluechip <input type="checkbox"/> Stocks valued less than Rs10 <input type="checkbox"/> Stocks recommended by Sharekhan research <input type="checkbox"/> Stocks recommended by other research houses			
Other Brokerage Firm you are trading with please tick the		ICICI Securities	HDFC Securities	Kotak Securities	Reliance Money	Angel Broking	Anand Rathi
		India Infoline	Motilal Oswal	Indiabulls	Geojit	Religare	Any other _____
No Brokerage Firm <input type="checkbox"/>							
Other Product Interest		IPO		PMS	Mutual Fund		Insurance

FOR OFFICE USE

Profiling Code

1	2	3	4	5	6	7	8	9

# SHAREKHAN LIMITED

Registered office address : 1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070,  
Maharashtra, India. | Tel: 022-6750 2000 | Website: www.sharekhan.com

## FATCA, CRS, ULTIMATE BENEFICIAL OWNERSHIP (UBO) AND ADDITIONAL KYC (Details and Self Certification form for Non-Individuals)

Please read all the instructions carefully before filling the form

\*Please fill in ENGLISH and in BLOCK LETTERS with black ink

Please consult your professional tax advisor for further guidance on FATCA & CRS classification

Fields marked with (\*) are mandatory and if not filled, the form is liable for rejection

Request ID

### I. \*Entity Details: (please write complete name as per Certificate of Incorporation / Registration; leaving one box blank between 2 words. Please do not abbreviate the Name)

Client Code

Entity Name

PAN

### II. \* Additional KYC information:

1. Gross Annual Income Details please tick (✓) ☐ Below 1 Lac ☐ 1-5 Lac ☐ > 5 - 10 Lac ☐ > 10- 25 Lac ☐ > 25 Lacs-1 Crore ☐ > 1 crore

2. Net-worth in ₹. as on (date)  /  /  (not older than 1 year)

3. Source of Wealth (please tick (✓) any one) : ☐ Business Income ☐ Gift ☐ Ancestral Property ☐ Rental Income ☐ Prize Money ☐ Royalty ☐ Others (please specify)

4. Occupation (please tick (✓) any one): ☐ Business ☐ Service ☐ Others (please specify)

5. Is the entity involved/providing any of the following services please tick (✓)

-Foreign Exchange / Money Changer Services : ☐ YES ☐ NO

-Money Lending / Pawning : ☐ YES ☐ NO

-Gaming / Gambling/ Lottery Services(e.g. casinos, betting syndicates) : ☐ YES ☐ NO

6. Politically Exposed Person (PEP) Status\* (please tick (✓) anyone : (Also applicable for authorised signatories/Promoters/ Karta/ Trustee/ Wholtime Directors) ☐ I am a PEP ☐ I am related to PEP ☐ Not Applicable

\*PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of Stat military officers, senior executives of state owned corporations, important political party officials, etc.

7. Type of address given at KRA (please tick (✓) any one) : ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

### III. \* FATCA & CRS declaration: (Please tick (✓) the appropriate tax resident declaration)

City of Incorporation  Date of Incorporation  Country of Incorporation

Entity Constitution Type ☐ Sole Proprietorship ☐ Partnership Firm ☐ HUF ☐ Pvt. Ltd. Company ☐ Public Ltd. Company ☐ Society ☐ AOP/BOI ☐ Liquidator

please tick (✓) as appropriate ☐ Trust ☐ Limited Liability Partnership ☐ Artificial Juridical Person ☐ Others

Is 'Entity' a tax resident of any country other than India? ☐ YES ☐ NO

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

S.No	Country of Tax Residency	Tax Identification Number	Identification Type (TIN or Other, please specify)
1.			
2.			
3.			

% - In case Tax Identification Number is not available, kindly provide its functional equivalent<sup>s</sup>

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

In case the Entity's Country of Incorporation/Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here  (refer 3(viii) of Part C)

Account holder type for Us Reportable Person (Refer 3(ix) of Part C)

Account holder type for other Reportable Person (Refer 3(ix) of Part C)

Part A: (to be filled by Financial Institutions or Direct Reporting NFEs) ☐ N.A. (Please tick (✓) if not applicable)

We are a,  
☐ Financial Insitution (Refer 1 of Part C)  
☐ Participating FFI  
☐ Reporting Model 1 FFI (IGA 1 environment)  
☐ Reporting Model 2 FFI (IGA 2 environment)  
or  
☐ Direct reporting NFE (Refer 3(vii) of Part C)  
please tick (✓) as appropriate

GIIN

Note: If you do not have a GIIN but you are sponsored by an other entity, please provide your sponsor's GIIN above and indicate your sponsor's name below:

Name of the Sponsoring entity:

GIIN not available ☐ Applied For ☐ Non participating FFI ☐ Non reporting FFI  
please tick (✓) as appropriate ☐ Not required to apply for - please specify 2 digits of sub-category  (Refer 1A of Part C)

Part B: (Please tick (✓) and fill any one as appropriate, to be filled by NFEs other than Direct Reporting NFEs) ☐ N.A.

<input type="radio"/>	Is the Entity a publicly traded company ? (that is, a company whose shares are regularly traded on an established securities market) (Refer 2A of Part C)	(Please specify any one stock exchange where it is regularly traded) Name of the Stock Exchange <input type="text"/>
<input type="radio"/>	Is the Entity a related entity of a publicly traded company? (a company whose shares are regularly traded on an established securities market) (Refer 2B of Part C)	(Please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of the listed company <input type="text"/> Nature of relation: <input type="checkbox"/> Subsidiary of the listed company (OR) <input type="checkbox"/> Controlled by a Listed Company Name of the Stock Exchange <input type="text"/>
<input type="radio"/>	Is the Entity an Active NFE? (Refer 2C of Part C)	Specify the nature of business and provide UBO form Nature of Business: <input type="text"/> Please specify the sub-category of Active NFE <input type="text"/> (Mention Code - Refer 2C of Part C)
<input type="radio"/>	Is the Entity a Passive NFE? (Refer 3(ii) of Part C)	Specify the nature of business and provide UBO form Nature of Business: <input type="text"/>

# SHAREKHAN LIMITED

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## Declaration Form of Ultimate Beneficial Ownership [UBO] / Controlling Persons

(Applicable for all the non-individual entities)

### I: Investor details:

Investor Name										
PAN*										

\* If PAN is not available, specify Folio No. (s)

### II: Category

☐ Our company is a Listed Company on a recognized stock exchange in India / Subsidiary of a or Controlled by a Listed Company  
[If this category is selected, no need to provide UBO details].

Name of the Stock Exchange where it is listed#. \_\_\_\_\_

Security ISIN# \_\_\_\_\_

Name of the Listed Company (applicable if the investor is subsidiary/associate): \_\_\_\_\_

#mandatory in case of Listed company or subsidiary of the Listed Company

☐ Unlisted Company ☐ Partnership Firm / LLP ☐ Unincorporated association / body of individuals

☐ Public Charitable Trust ☐ Private Trust ☐ Religious Trust ☐ Trust created by a Will.

☐ Others [please specify] \_\_\_\_\_

### UBO / Controlling Person(s) details.

Does your company/entity have any individual person(s) who holds direct / indirect controlling ownership above the prescribed threshold limit? ☐ Yes ☐ No

If 'YES' - We hereby declare that the following individual person holds directly / indirectly controlling ownership in our entity above the prescribed threshold limit. Details of such individual(s) are given below.

If 'NO' - declare that no individual person (directly / indirectly) holds controlling ownership in our entity above the prescribed threshold limit. Details of the individual who holds the position of Senior Managing Official (SMO) are provided below.

	UBO-1 / Senior Managing Official (SMO)	UBO-2	UBO-3
Name of the UBO/SMO#.			
UBO / SMO PAN#. For Foreign National, TIN to be provided]			
Residential Status of UBO	<input type="checkbox"/> Res. Ind. <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others _____	<input type="checkbox"/> Res. Ind. <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others _____	<input type="checkbox"/> Res. Ind. <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others _____
UBO Code			
Customer ID (If any with Sharekhan Limited)			
Percentage of Holding (%)			
% of beneficial interest#.	>10% controlling interest. <input type="checkbox"/> >15% controlling interest. <input type="checkbox"/> >25% controlling interest. <input type="checkbox"/> NA. (for SMO) <input type="checkbox"/>	>10% controlling interest. <input type="checkbox"/> >15% controlling interest. <input type="checkbox"/> >25% controlling interest. <input type="checkbox"/> NA. (for SMO) <input type="checkbox"/>	>10% controlling interest. <input type="checkbox"/> >15% controlling interest. <input type="checkbox"/> >25% controlling interest. <input type="checkbox"/> NA. (for SMO) <input type="checkbox"/>
Are you a US person ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
UBO / SMO Country of Tax Residency#.			
UBO / SMO Taxpayer Identification Number / Equivalent ID Number#.			
UBO / SMO Identity Type			
UBO / SMO Place & Country of Birth#	Place of Birth _____ Country of Birth _____	Place of Birth _____ Country of Birth _____	Place of Birth _____ Country of Birth _____
UBO / SMO Nationality	_____	_____	_____
UBO / SMO Date of Birth [dd-mmm-yyyy] #	_____	_____	_____
UBO / SMO PEP#	Yes – PEP. <input type="checkbox"/> Yes – Related to PEP. <input type="checkbox"/> N – Not a PEP. <input type="checkbox"/>	Yes – PEP. <input type="checkbox"/> Yes – Related to PEP. <input type="checkbox"/> N – Not a PEP. <input type="checkbox"/>	Yes – PEP. <input type="checkbox"/> Yes – Related to PEP. <input type="checkbox"/> N – Not a PEP. <input type="checkbox"/>

	UBO-1 / Senior Managing Official (SMO)	UBO-2	UBO-3
UBO / SMO Address [include City, Pincode, State, Country]	Address: _____ City: _____ Pincode: _____ State: _____ Country: _____	Address: _____ City: _____ Pincode: _____ State: _____ Country: _____	Address: _____ City: _____ Pincode: _____ State: _____ Country: _____
UBO / SMO Address Type	Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office. <input type="checkbox"/>	Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office. <input type="checkbox"/>	Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office. <input type="checkbox"/>
UBO / SMO Email			
UBO / SMO Mobile			
UBO / SMO Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/> _____	Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/> _____	Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/> _____
UBO / SMO Father's Name			
UBO / SMO Occupation	Public Service <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Others <input type="checkbox"/> _____	Public Service <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Others <input type="checkbox"/> _____	Public Service <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Others <input type="checkbox"/> _____
SMO Designation#			
UBO / SMO KYC Complied?	Yes / No. If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.	Yes / No. If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.	Yes / No. If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.

# Mandatory column.

Note: If the given columns are not sufficient, required information in the given format can be enclosed as additional sheet(s) duly signed by Authorized Signatory.

\* Participating Mutual Fund(s) / RTA may call for additional information/documentation wherever required or if the given information is not clear / incomplete / correct and you may provide the same as and when solicited.

#### Declaration

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false, untrue, misleading, or misrepresenting, I/We am/are aware that I/We may be liable for it including any penalty levied by the statutory/legal/regulatory authority. I/We hereby confirm the above beneficial interest after perusing all applicable shareholding pattern and MF/RTA/other registered intermediaries can make reliance on the same. I/We hereby authorize you [RTA/Fund/AMC/Other participating entities] to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries / or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/tax authorities.

Signature with relevant seal:

Authorized Signatory
Name: _____
Designation: _____

Authorized Signatory
Name: _____
Designation: _____

Authorized Signatory
Name: _____
Designation: _____

Place: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

#### Instructions on Controlling Persons / Ultimate Beneficial Owner

As per PMLA guidelines and relevant SEBI circulars issued from time to time, non-individuals and trusts are required to provide details of controlling persons [CP] / ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such CPs/ UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted and includes a person who exercises ultimate effective control over a legal person or arrangement.

##### A. For Investors other than individuals or trusts:

- (i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:
  - more than 10% of shares or capital or profits of the juridical person, where the juridical person is a company.
  - more than 10% of the capital or profits of the juridical person, where the juridical person is a partnership.
  - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

##### B. For Investors which is a trust:

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 10% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

##### C. Exemption in case of listed companies / foreign investors

The client or the owner of the controlling interest is a company listed on a stock exchange or is a majority-owned subsidiary of such a company, there is no need for identification and verification of the identity of any shareholder or beneficial owner of such companies and hence exempted from UBO declaration provided other requisite information is provided. Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012 and other circulars issued from time to time, for the purpose of identification of beneficial ownership of the client.

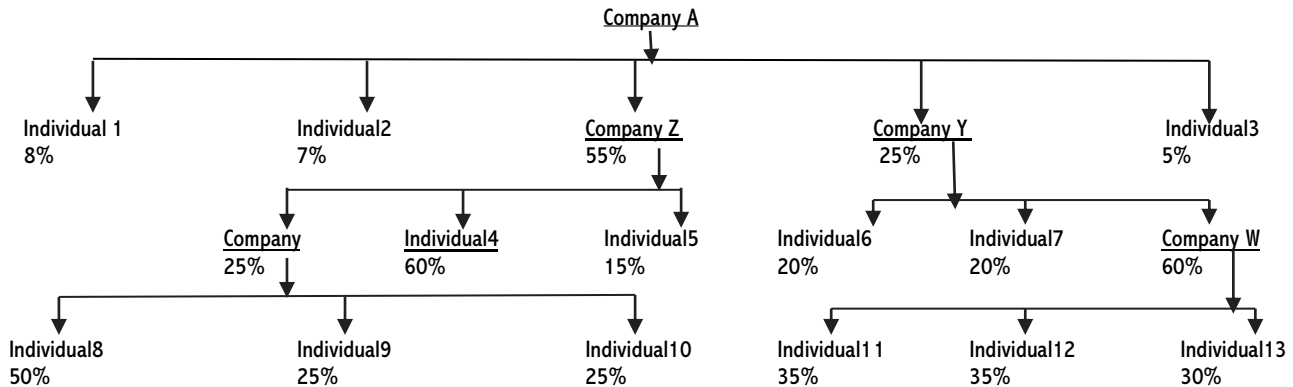
##### D. KYC requirements

Beneficial Owner(s) / Senior Managing Official (SMO) is/are required to comply with the prescribed KYC process as stipulated by SEBI from time to time with any one of the KRA & submit the same to AMC. KYC acknowledgement proof is to be submitted for all the UBO(s) / SMO(s).

## Declaration Form of Ultimate Beneficial Ownership [UBO] / Controlling Persons

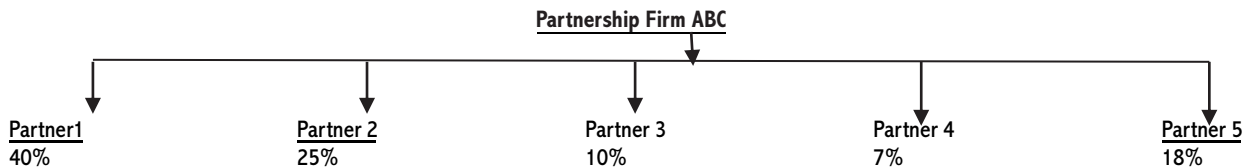
### Sample Illustrations for ascertaining beneficial ownership:

#### Illustration No. 1 – Company A

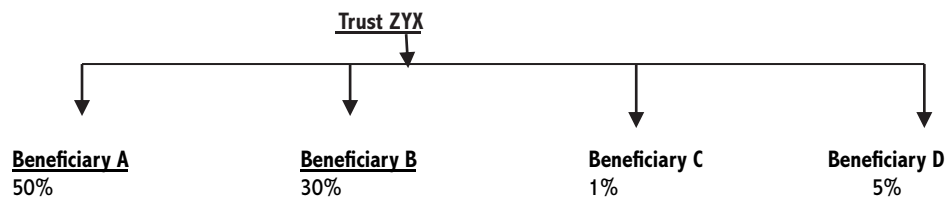


For Applicant A, Individual 4 is considered as UBO as it holds effective ownership of 33% in Company A. Hence details of Individual 4 must be provided with KYC proof, Shareholding pattern of Company A, Z & Y to be provided along with details of persons of Company Y who are senior managing officials and those exercising control.

#### Illustration No. 2 – Partner ABC



#### Illustration No. 3 – Trustee ZYX



For Trust ZYX, Beneficiaries A, B and C are considered as UBO as they are entitled to get benefitted for  $\geq 10\%$  of funds used. KYC proof for these beneficiaries needs to be submitted. Additionally, if they have nominated any person or group of persons as Settlor of Trust / Protector of Trust, relevant information to be provided along with the proof indicated.

## PART C: FATCA Instructions & Definitions

### 1. Financial Institution

The term FI means any financial institution that is a Depository Institution, Custodial Institution, Investment Entity or Specified Insurance company, as defined.

- Depository institution: is an entity that accepts deposits in the ordinary course of banking or similar business.
- Custodial institution is an entity that holds as a substantial portion of its business, holds financial assets for the account of others and where its income attributable to holding financial assets and related financial services equals or exceeds 20 percent of the entity's gross income during the shorter of-

(i) The three financial years preceding the year in which determination is made; or

(ii) The period during which the entity has been in existence, whichever is less.

- Investment entity is any entity:

✓ That primarily conducts a business or operates for or on behalf of a customer for any of the following activities or operations for or on behalf of a customer

(i) Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading; or

(ii) Individual and collective portfolio management; or

(iii) Investing, administering or managing funds, money or financial asset or money on behalf of other persons;

or

✓ The gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, if the entity is managed by another entity that is a depository institution, a custodial institution, a specified insurance company, or an investment entity described above.

An entity is treated as primarily conducting as a business one or more of the 3 activities described above, or an entity's gross income is primarily attributable to investing, reinvesting, or trading in financial assets of the entity's gross income attributable to the relevant activities equals or exceeds 50 percent of the entity's gross income during the shorter of :

(i) The three-year period ending on 31 March of the year preceding the year in which the determination is made; or

(ii) The period during which the entity has been in existence.

The term "Investment Entity" does not include an entity that is an active non-financial entity as per codes 03, 04, 05 and 06 (refer point 2C.)

- Specified Insurance Company: Entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash Value Insurance Contract or an Annuity Contract.

- FI not required to apply for GIIN:

#### A. Reasons why FI not required to apply for GIIN:

Code	Sub-Category
01	Governmental Entity, International Organization or Central Bank
02	Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental Entity, International Organization or Central Bank
03	Non-public fund of the armed forces, an employees' state insurance fund, a gratuity fund or a provident fund
04	Entity is an Indian FI solely because it is an investment entity
05	Qualified credit card issuer
06	Investment Advisors, Investment Managers & Executing Brokers
07	Exempt collective investment vehicle
08	Trustee of an Indian Trust
09	FI with a local client base
10	Non-registering local banks
11	FFI with only Low-Value Accounts
12	Sponsored investment entity and controlled foreign corporation
13	Sponsored, Closely Held Investment Vehicle
14	Owner Documented FFI

### 2. Non-financial entity (NFE) - Foreign entity that is not a financial institution

Types of NFEs that are regarded as excluded NFE are:

#### A. Publicly traded company (listed company)

A company is publicly traded if its stock are regularly traded on one or more established securities markets

(Established securities market means an exchange that is officially recognized and supervised by a governmental authority in which the securities market is located and that has a meaningful annual value of shares traded on the exchange)

#### B. Related entity of a publicly traded company

The NFE is a related entity of an entity of which is regularly traded on an established securities market;

#### C. Active NFE : (is any one of the following):

Code	Sub-Category
01	Less than 50 percent of the NFE's gross income for the preceding financial year is passive income and less than 50 percent of the assets held by the NFE during the preceding financial year are assets that produce or are held for the production of passive income;
02	The NFE is a Governmental Entity, an International Organization, a Central Bank, or an entity wholly owned by one or more of the foregoing;
03	Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity shall not qualify for this status if the entity functions as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes;
04	The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE shall not qualify for this exception after the date that is 24 months after the date of the initial organization of the NFE;
05	The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganizing with the intent to continue or recommence operations in a business other than that of a Financial Institution;
06	The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution;
07	<p>Any NFE that fulfills all of the following requirements:</p> <ul style="list-style-type: none"><li>• It is established and operated in India exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in India and it is a professional organization, business league, chamber of commerce, labor organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare;</li><li>• It is exempt from income tax in India;</li><li>• It has no shareholders or members who have a proprietary or beneficial interest in its income or assets;</li></ul> <p>The applicable laws of the NFE's country or territory of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and The applicable laws of the NFE's country or territory of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organization, or escheat to the government of the NFE's country or territory of residence or any political subdivision thereof.</p> <p>Explanation:- For the purpose of this sub-clause, the following shall be treated as fulfilling the criteria provided in the said sub-clause, namely:-</p> <p>(I) an Investor Protection Fund referred to in clause (23EA);</p> <p>(II) a Credit Guarantee Fund Trust for Small Industries referred to in clause 23EB; and</p> <p>(III) an Investor Protection Fund referred to in clause (23EC), of section 10 of the Act;</p>

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## SHAREKHAN LIMITED

Registered office address : 1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (West), Mumbai - 400 070, Maharashtra, India. | Tel: 022-6750 2000 | Website: www.sharekhan.com

### Declaration Form of Non-Profit Organization (NPO)

(Mandatory for Trusts/Society)

Investor Name										
PAN										

☐ I/We hereby confirm that above stated entity / organization is falling under “**Non-profit organization**” [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).

☐ Enclosed relevant documentary proof evidencing the above definition.

We further confirm that we have registered with DARPAN Portal of NITI Aayog as NPO and registration details are as follows:

Registration Number of DARPAN portal	
--------------------------------------	--

If not, please register immediately and confirm with the above information. In absence of receipt of the Darpan portal registration details, MF/AMC/RTA will be required to register your entity on the said portal and/or report to the relevant authorities as applicable.

☐ I/We hereby confirm that the above stated entity / organization is **NOT** falling under Non-profit organization as defined above or in PMLA Act/Rules thereof.

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be liable for it for any fines or consequences as required under the respective statutory requirements and authorize you to deduct such fines/charges under intimation to me/us or collect such fines/charges in any other manner as might be applicable. I/We hereby authorize you [RTA/Fund/AMC/Other participating entities] to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries or any other statutory authorities to facilitate single submission / update & for regulatory purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities.

Signature with relevant seal:

Authorized Signatory
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Authorized Signatory
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Authorized Signatory
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Place: \_\_\_\_\_

Date: \_\_\_\_/ \_\_\_\_/ \_\_\_\_

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"Schedule A" effective from November 1, 2020							
Client ID:	Scheme Chosen						Remarks
	Scheme A <input type="checkbox"/> AMC 400	Scheme B <input type="checkbox"/> AMC 500	Scheme C <input type="checkbox"/> AMC 350	Scheme D <input type="checkbox"/> One Time 2999	Scheme G <input type="checkbox"/> (Pvt. Ltd./Ltd./LLP)	Scheme F <input type="checkbox"/> (Plain DP)	
Transaction type	Scheme A (TC100)	Scheme B (TC108)	Scheme C (TC119)	Scheme D (TC117)**	Scheme G (TC123)	Scheme F (TC101)	
Deposit	Trading Client Code / Trading Application No. { _____ }						
	Nil	Nil	Nil	Rs. 2999 (refund of deposit Rs. 2000 on closure)	Nil	Nil	
Account Opening	Nil						KRA charges as applicable
Annual Maintenance Charges	Rs. 400 p.a (DP Account, DDPI & Dig. Contract Notes Mandatory) (Not Applicable for BSDA clients)	Rs. 500 p.a (without DDPI & Dig. Contract Notes) (Not Applicable for BSDA clients)	Rs. 350 p.a (DP Account, DDPI & Dig. Contract Notes Mandatory) (Not Applicable for BSDA clients)	Nil (DP Account, DDPI & Dig. Contract Notes Mandatory) (Not Applicable for BSDA clients)	Rs. 1000 p.a (DP Account, DDPI & Dig. Contract Notes Mandatory) (Not Applicable for BSDA clients)	Rs. 500 p.a (Not Applicable for BSDA clients)	
Sales - Through Sharekhan	Nil	Nil	Rs. 6 Per transaction	Rs. 6 Per transaction	Nil	0.03% of the value of transaction. (Min.Rs.30)	
Purchases	Nil						
Delivery Handling Charges (DHC)#	Min Rs.21/- (on sale only)..Delivery Handling Charges (DHC) would be levied in case value of the brokerage levied is less than Rs. 21/- per scrip.	Min Rs.21/- (on sale only)..Delivery Handling Charges (DHC) would be levied in case value of the brokerage levied is less than Rs. 21/- per scrip.	N.A	N.A	N.A		
Sales - Not through Sharekhan/ Offmarket transfer/IDT	0.03% of the value of transaction on. (Min.Rs.30)	0.03% of the value of transaction. (Min.Rs.30)	0.03% of the value of transaction. (Min.Rs.30)	0.03% of the value of transaction. (Min.Rs.30)	0.03% of the value of transaction. (Min.Rs.30)	0.03% of the value of transaction. (Min.Rs.30)	Per transaction
Dematerialisation	Rs.5 per certificate	Rs.5 per certificate	Rs.5 per certificate	Rs.5 per certificate	Rs.5 per certificate	Rs.5 per certificate	Min. Rs.50 per request
Rematerialisation /Repurchase	Rs. 50 per certificate or Rs. 50 for every hundred securities						Per request
Margin Pledge Creation	A : Securities Margin Pledge			Rs. 20/- Per Transaction			
	B : Securities Pledge under Margin Funding			Rs. 30/- Per Transaction			
Pledge Creation	0.03% of the value of the transaction (Min Rs.100)						Per transaction
Freeze/De-freeze	Rs.25						Per request
Stock Lending & Borrowing	0.02% of the value of the transaction (Min Rs.100)						Per request
Advance	Rs.500				Rs.1000		Advance which will be adjusted Against billing (Optional)

**\*\*This Scheme is valid for 10 years from the date of execution and then would be converted to TC 100.**

**Note:** 1. Sharekhan reserves the right to revise the tariff by providing 30 days notice & this will be binding on all. 2. Any service not quoted above will be charged separately. 3. Transaction statement : Will be sent as per CDSL requirements at no extra cost. Every extra Statement shall be charged at Rs.10. If the number of pages exceeds 10 then every additional page will be charged at the rate of Rs.3 per page. 4. All charges are exclusive of GST. 5. In case of non payment of DP charge, Sharekhan may levy interest@18% p.a.

Other Charges

**SHAREKHAN LIMITED**

1<sup>st</sup> Floor, Tower No. 3, Equinox Business Park, LBS Marg, Off BKC, Kurla (W), Mumbai - 400 070,  
Maharashtra, India. | Tel: 022-6750 2000 | Website: www.sharekhan.com

Date : \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**MIRAE ASSET** Sharekhan

Application No. \_\_\_\_\_

**Acknowledgment Slip**

Received the application from the following holder/s for opening a trading &amp; depository account. Please quote the Client Code, DP ID &amp; Client ID allotted to you in all your future correspondence.

Name of 1st Holder	Name of 2nd Holder	Name of 3rd Holder

Received Cheque No. \_\_\_\_\_ Amount \_\_\_\_\_ Bank Name \_\_\_\_\_

Received Cheque No. \_\_\_\_\_ Amount \_\_\_\_\_ Bank Name \_\_\_\_\_

Executive Name : \_\_\_\_\_ Executive Sign : \_\_\_\_\_

Outlet Name : \_\_\_\_\_ Outlet Code : \_\_\_\_\_

For all queries, please call 022 69920600 (Local Call Charges) / 022 - 6115 0000 (If you are in Mumbai)

For DP Inquires &amp; Queries email at dpcall@sharekhan.com &amp; Broking Queries email at myaccount@sharekhan.com

Note : "Kindly DO NOT handover Cash / Shares to the sales executive for any reason whatsoever.

Sharekhan  
Seal and Signature

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## 1. **VISION**

To follow highest standards of ethics and compliances while facilitating the trading by clients in securities in a fair and transparent manner, so as to contribute in creation of wealth for investors.

## 2. **MISSION**

- i) To provide high quality and dependable service through innovation, capacity enhancement and use of technology.
- ii) To establish and maintain a relationship of trust and ethics with the investors.
- iii) To observe highest standard of compliances and transparency.
- iv) To always keep 'protection of investors' interest' as goal while providing service.
- v) To ensure confidentiality of information shared by investors unless such information is required to be provided in furtherance of discharging legal obligations or investors have provided specific consent to share such information.

## 3. **Services provided to Investors by stockbrokers include**

- I. Execution of trades on behalf of investors.
- II. Issuance of Contract Notes.
- III. Issuance of intimations regarding margin due payments.
- IV. Facilitate execution of early pay-in obligation instructions.
- V. Periodic Settlement of client's funds.
- VI. Issuance of retention statement of funds at the time of settlement.
- VII. Risk management systems to mitigate operational and market risk.
- VIII. Facilitate client profile changes in the system as instructed by the client.
- IX. Information sharing with the client w.r.t. relevant Market Infrastructure Institutions (MII) circulars.
- X. Provide a copy of Rights & Obligations document to the client.
- XI. Communicating Most Important terms and Conditions (MITC) to the client.
- XII. Redressal of Investor's grievances.

## 4. **Rights of Investors**

- I. Ask for and receive information from a firm about the work history and background of the person handling your account, as well as information about the firm itself (including website providing mandatory information).
- II. Receive complete information about the risks, obligations, and costs of any investment before investing.
- III. Receive a copy of all completed account forms and rights & obligation document.
- IV. Receive a copy of 'Most Important Terms & Conditions' (MITC).
- V. Receive account statements that are accurate and understandable.
- VI. Understand the terms and conditions of transactions you undertake.
- VII. Access your funds in a prescribed manner and receive information about any restrictions or limitations on access.
- VIII. Receive complete information about maintenance or service charges, transaction or redemption fees, and penalties in form of tariff sheet.
- IX. Discuss your grievances with compliance officer / compliance team / dedicated grievance redressal team of the firm and receive prompt attention to and fair consideration of your concerns.
- X. Close your zero balance accounts online with minimal documentation
- XI. Get the copies of all policies (including Most Important Terms and Conditions) of the broker related to dealings of your account
- XII. Not be discriminated against in terms of services offered to equivalent clients
- XIII. Get only those advertisement materials from the broker which adhere to Code of Advertisement norms in place
- XIV. In case of broker defaults, be compensated from the Exchange Investor Protection Fund as per the norms in place
- XV. Trade in derivatives after submission of relevant financial documents to the broker subject to brokers' adequate due diligence.
- XVI. Get warnings on the trading systems while placing orders in securities where surveillance measures are in place
- XVII. Get access to products and services in a suitable manner even if differently abled
- XVIII. Get access to educational materials of the MIIs and brokers
- XIX. Get access to all the exchanges of a particular segment you wish to deal with unless opted out specifically as per Broker norms
- XX. Deal with one or more stockbrokers of your choice without any compulsion of minimum business
- XXI. Have access to the escalation matrix for communication with the broker
- XXII. Not be bound by any clause prescribed by the Brokers which are contravening the Regulatory provisions.

## 5. Various activities of Stock Brokers with timelines

S.No.	Activities	
1.	KYC entered into KRA System and CKYCR	3 working days of account opening
2.	Client Onboarding	Immediate, but not later than one week
3.	Order execution	Immediate on receipt of order, but not later than the same day
4.	Allocation of Unique Client Code	Before trading
5.	Copy of duly completed Client Registration Documents to clients	7 days from the date of upload of Unique Client Code to the Exchange by the trading member
6.	Issuance of contract notes	24 hours of execution of trades
7.	Collection of upfront margin from client	Before initiation of trade
8.	Issuance of intimations regarding other margin due payments	At the end of the T day
9.	Settlement of client funds	First Friday/Saturday of the month / quarter as per Exchange pre-announced schedule
10.	'Statement of Accounts' for Funds, Securities and Commodities	Monthly basis
11.	Issuance of retention statement of funds/commodities	5 days from the date of settlement
12.	Issuance of Annual Global Statement	30 days from the end of the financial year
13.	Investor grievances redressal	21 calendar days from the receipt of the complaint

## 6. DOs and DON'Ts for Investors

Dos	DON'Ts
<ol style="list-style-type: none"> <li>1. Read all documents and conditions being agreed before signing the account opening form.</li> <li>2. Receive a copy of KYC, copy of account opening documents and Unique Client Code.</li> <li>3. Read the product / operational framework / timelines related to various Trading and Clearing &amp; Settlement processes.</li> <li>4. Receive all information about brokerage, fees and other charges levied.</li> <li>5. Register your mobile number and email ID in your trading, demat and bank accounts to get regular alerts on your transactions.</li> <li>6. If executed, receive a copy of Demat Debit and Pledge Instruction (DDPI) However, DDPI is not a mandatory requirement as per SEBI / Stock Exchanges. Before granting DDPI, carefully examine the scope and implications of powers being granted.</li> <li>7. Receive contract notes for trades executed, showing transaction price, brokerage, GST and STT/CTT etc. as applicable, separately, within 24 hours of execution of trades.</li> <li>8. Receive funds and securities/ commodities on time, as prescribed by SEBI or exchange from time to time.</li> <li>9. Verify details of trades, contract notes and statement of account and approach relevant authority for any discrepancies. Verify trade details on the Exchange websites from the trade verification facility provided by the Exchanges.</li> <li>10. Receive statement of accounts periodically. If opted for running account settlement, account has to be settled by the stock broker as per the option given by the client (Monthly or Quarterly).</li> <li>11. In case of any grievances, approach stock broker or Stock Exchange or SEBI for getting the same resolved within prescribed timelines.</li> <li>12. Retain documents for trading activity as it helps in resolving disputes, if they arise.</li> </ol>	<ol style="list-style-type: none"> <li>1. Do not deal with unregistered stock broker.</li> <li>2. Do not forget to strike off blanks in your account opening and KYC.</li> <li>3. Do not submit an incomplete account opening and KYC form.</li> <li>4. Do not forget to inform any change in information linked to trading account and obtain confirmation of updation in the system.</li> <li>5. Do not transfer funds, for the purposes of trading to anyone other than a stock broker. No payment should be made in name of employee of stock broker.</li> <li>6. Do not ignore any emails / SMSs received with regards to trades done, from the Stock Exchange and raise a concern, if discrepancy is observed.</li> <li>7. Do not opt for digital contracts, if not familiar with computers.</li> <li>8. Do not share trading password.</li> <li>9. Do not fall prey to fixed / guaranteed returns schemes.</li> <li>10. Do not fall prey to fraudsters sending emails and SMSs luring to trade in stocks / securities promising huge profits.</li> <li>11. Do not follow herd mentality for investments. Seek expert and professional advice for your investments</li> </ol>

Additionally, Investors may refer to Dos and Don'ts issued by MILs on their respective websites from time to time.

## 7. Grievance Redressal Mechanism

1	Investor complaint/Grievances	<p>Investor can lodge complaint/grievance against stock broker in the following ways:</p> <p><b><u>Mode of filing the complaint with stock broker</u></b></p> <p>Investor can approach the Stock Broker at the designated Investor Grievance e-mail ID of the stock broker. The Stock Broker will strive to redress the grievance immediately, but not later than 21 days of the receipt of the grievance</p> <p><b><u>Mode of filing the complaint with stock exchanges</u></b></p> <p>i. SCORES 2.0 (a web based centralized grievance redressal system of SEBI) (<a href="https://scores.sebi.gov.in">https://scores.sebi.gov.in</a>)</p> <p><b><u>Two level review for complaint/grievance against stock broker:</u></b></p> <ul style="list-style-type: none"> <li>• First review done by Designated body/Exchange</li> <li>• Second review done by SEBI</li> </ul> <p>ii. Emails to designated email IDs of Exchange</p>
2	Online Dispute Resolution (ODR) platform for online Conciliation and Arbitration	If the Investor is not satisfied with the resolution provided by the Market Participants, then the Investor has the option to file the complaint/ grievance on SMARTODR platform for its resolution through online conciliation or arbitration.
3	Steps to be followed in ODR for Review, Conciliation and Arbitration	<ol style="list-style-type: none"> <li>1. Investor to approach Market Participant for redressal of complaint</li> <li>2. If investor is not satisfied with response of Market Participant, he/she has either of the following 2 options: <ol style="list-style-type: none"> <li>i. May escalate the complaint on SEBI SCORES portal.</li> <li>ii. May also file a complaint on SMARTODR portal for its resolution through online conciliation and arbitration.</li> </ol> </li> <li>3. Upon receipt of complaint on SMARTODR portal, the relevant MII will review the matter and endeavor to resolve the matter between the Market Participant and investor within 21 days.</li> <li>4. If the matter could not be amicably resolved, then the matter shall be referred for conciliation.</li> <li>5. During the conciliation process, the conciliator will endeavor for amicable settlement of the dispute within 21 days, which may be extended with 10 days by the conciliator with consent of the parties to dispute.</li> <li>6. If the conciliation is unsuccessful, then the investor may request to refer the matter for arbitration.</li> <li>7. The arbitration process to be concluded by arbitrator(s) within 30 days, which is extendable by 30 days with consent of the parties to dispute.</li> </ol>

## 8. **Handling of Investor's claims / complaints in case of default of a Trading Member / Clearing Member (TM/CM)**

### **Default of TM/CM**

Following steps are carried out by Stock Exchange for benefit of investor, in case stock broker defaults:

- Circular is issued to inform about declaration of Stock Broker as Defaulter.
- Information of defaulter stock broker is disseminated on Stock Exchange website.
- Public Notice is issued informing declaration of a stock broker as defaulter and inviting claims within specified period.
- Intimation to clients of defaulter stock brokers via emails and SMS for facilitating lodging of claims within the specified period.

Following information is available on Stock Exchange website for information of investors:

- Norms for eligibility of claims for compensation from IPF.
- Claim form for lodging claim against defaulter stock broker.
- FAQ on processing of investors' claims against Defaulter stock broker.
- Provision to check online status of client's claim.
- Standard Operating Procedure (SOP) for handling of Claims of Investors in the Cases of Default by Brokers
- Claim processing policy against Defaulter/Expelled members
- List of Defaulter/Expelled members and public notice issued

**Format for Investor Complaints Data to be displayed by Stock Brokers on their respective websites****Data for every month ending**

S N	Received from	Carried forward from previous Month	Received during the Month	Total Pending	Resolved*	Pending at the end of the month**		Average Resolution time^ (in days)
						Pending for less than 3 months	Pending for more than 3 months	
1	2	3	4	5	6	7		8
1	Directly from Investors							
2	SEBI (SCORES 2.0)							
3	Stock Exchanges							
4	Other Sources (if any)							
5	Grand Total							

**Trend of monthly disposal of complaints**

SN	Month	Carried forward from previous Month	Received	Resolved*	Pending**
1	2	3	4	5	6
1	April -YYYY				
2	May-YYYY				
3	June-YYYY				
4	July-YYYY				
	....				
	.....				
	March-YYYY				
	Grand Total				

\*Should include complaints of previous months resolved in the current month, if any.

\*\*Should include total complaints pending as on the last day of the month, if any.

^ Average resolution time is the sum total of time taken to resolve each complaint in the current month divided by total number of complaints resolved in the current month.

Trend of annual disposal of complaints

SN	Year	Carried forward from previous year	Received during the year	Received during the year	Pending at the end of the year
1	April -YYYY				
2	May-YYYY				
3	June-YYYY				
4	July-YYYY				
	Grand Total				

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## INVESTOR CHARTER IN RESPECT OF RAs

### A. Vision and Mission Statements for investors

- **Vision**

Invest with knowledge & safety.

- **Mission**

Every investor should be able to invest in right investment products based on their needs, manage and monitor them to meet their goals, access reports and enjoy financial wellness.

### B. Details of business transacted by the Research Analyst with respect to the investors

- To publish research report based on the research activities of the RA
- To provide an independent unbiased view on securities.
- To offer unbiased recommendation, disclosing the financial interests in recommended securities.
- To provide research recommendation, based on analysis of publicly available information and known observations.
- To conduct audit annually
- To ensure that all advertisements are in adherence to the provisions of the Advertisement Code for Research Analysts.
- To maintain records of interactions, with all clients including prospective clients (prior to onboarding), where any conversation related to the research services has taken place.

### C. Details of services provided to investors (No Indicative Timelines)

- Onboarding of Clients
  - o Sharing of terms and conditions of research services
  - o Completing KYC of fee paying clients
- Disclosure to Clients:
  - o To disclose, information that is material for the client to make an informed decision, including details of its business activity, disciplinary history, the terms and conditions of research services, details of associates, risks and conflicts of interest, if any
  - o To disclose the extent of use of Artificial Intelligence tools in providing research services
  - o To disclose, while distributing a third party research report, any material conflict of interest of such third party research provider or provide web address that directs a recipient to the relevant disclosures
  - o To disclose any conflict of interest of the activities of providing research services with other activities of the research analyst.
- To distribute research reports and recommendations to the clients without discrimination.
- To maintain confidentiality w.r.t publication of the research report until made available in the public domain.
- To respect data privacy rights of clients and take measures to protect unauthorized use of their confidential information
- To disclose the timelines for the services provided by the research analyst to clients and ensure adherence to the said timelines
- To provide clear guidance and adequate caution notice to clients when providing recommendations for dealing in complex and high-risk financial products/services
- To treat all clients with honesty and integrity
- To ensure confidentiality of information shared by clients unless such information is required to be provided in furtherance of discharging legal obligations or a client has provided specific consent to share such information.

#### **D. Details of grievance redressal mechanism and how to access it**

1. Investor can lodge complaint/grievance against Research Analyst in the following ways:

##### **Mode of filing the complaint with research analyst**

In case of any grievance / complaint, an investor may approach the concerned Research Analyst who shall strive to redress the grievance immediately, but not later than 21 days of the receipt of the grievance.

##### **Mode of filing the complaint on SCORES or with Research Analyst Administration and Supervisory Body (RAASB)**

i. SCORES 2.0 (a web based centralized grievance redressal system of SEBI for facilitating effective grievance redressal in time-bound manner) (<https://scores.sebi.gov.in>)

Two level review for complaint/grievance against Research Analyst:

- First review done by designated body (RAASB)
- Second review done by SEBI

ii. Email to designated email ID of RAASB

2. If the Investor is not satisfied with the resolution provided by the Market Participants, then the Investor has the option to file the complaint/ grievance on SMARTODR platform for its resolution through online conciliation or arbitration.

With regard to physical complaints, investors may send their complaints to:

**Office of Investor Assistance and Education, Securities and Exchange Board of India,  
SEBI Bhavan, Plot No. C4-A, 'G' Block, Bandra-Kurla Complex, Bandra (E), Mumbai - 400 051**

#### **E. Rights of investors**

- Right to Privacy and Confidentiality
- Right to Transparent Practices
- Right to fair and Equitable Treatment
- Right to Adequate Information
- Right to Initial and Continuing Disclosure
  - Right to receive information about all the statutory and regulatory disclosures
- Right to Fair & True Advertisement
- Right to Awareness about Service Parameters and Turnaround Times
- Right to be informed of the timelines for each service
- Right to be Heard and Satisfactory Grievance Redressal
- Right to have timely redressal
- Right to Exit from Financial product or service in accordance with the terms and conditions agreed with the research analyst
- Right to receive clear guidance and caution notice when dealing in Complex and High-Risk Financial Products and Services
- Additional Rights to vulnerable consumers
  - Right to get access to services in a suitable manner even if differently abled
- Right to provide feedback on the financial products and services used
- Right against coercive, unfair, and one-sided clauses in financial agreements

#### **F. Expectations from the investors (Responsibilities of investors)**

- **Do's**
  - i. Always deal with SEBI registered Research Analyst.
  - ii. Ensure that the Research Analyst has a valid registration certificate.
  - iii. Check for SEBI registration number.

Please refer to the list of all SEBI registered Research Analyst which is available on SEBI website in the following link:  
<https://www.sebi.gov.in/sebiweb/other/OtherAction.do?doRecognisedFpi=yes&intmId=14>)

- iv. Always pay attention towards disclosures made in the research reports before investing.
  - v. Pay your Research Analyst through banking channels only and maintain duly signed receipts mentioning the details of your payments. You may make payment of fees through Centralized Fee Collection Mechanism (CeFCoM) of RAASB if research analyst has opted for the mechanism. (Applicable for fee paying clients only)
  - vi. Before buying/ selling securities or applying in public offer, check for the research recommendation provided by your Research Analyst.
  - vii. Ask all relevant questions and clear your doubts with your Research Analyst before acting on recommendation.
  - viii. Seek clarifications and guidance on research recommendations from your Research Analyst, especially if it involves complex and high risk financial products and services.
  - ix. Always be aware that you have the right to stop availing the service of a Research Analyst as per the terms of service agreed between you and your Research Analyst.
  - x. Always be aware that you have the right to provide feedback to your Research Analyst in respect of the services received.
  - xi. Always be aware that you will not be bound by any clause, prescribed by the research analyst, which is contravening any regulatory provisions.
  - xii. Inform SEBI about Research Analyst offering assured or guaranteed returns.
- **Don'ts**
    - i. Do not provide funds for investment to the Research Analyst.
    - ii. Don't fall prey to luring advertisements or market rumors.
    - iii. Do not get attracted to limited period discount or other incentive, gifts, etc. offered by Research Analyst.
    - iv. Do not share login credential and password of your trading, demat or bank accounts with the Research Analyst.

## COMPLAINT DATA TO BE DISPLAYED BY RAs

**Formats for investors complaints data to be disclosed monthly by RAs on their website/mobile application:**

Data for the month ending - \_\_\_\_\_

Sr. No.	Received from	Pending at the end of last month	Received	Resolved*	Total Pending#	Pending complaints > 3months	Average Resolution time^ (in days)
1	Directly from Investors						
2	SEBI (SCORES)						
3	Other Sources (if any)						
	<b>Grand Total</b>						

Number of complaints received during month against the RA due to impersonation by some other entity:

**Note:** In case of any complaints received against the RA due to impersonation of the RA by some other entity, the RA may adjust the number of such complaints from total number of received/resolved complaints while preparing the above table. Further, RA must close such impersonation related complaints after following the due process as specified by SEBI/ RAASB.

\* Inclusive of complaints of previous months resolved in the current month.

# Inclusive of complaints pending as on the last day of the month.

^ Average Resolution time is the sum total of time taken to resolve each complaint, in days, in the current month divided by total number of complaints resolved in the current month.

### Trend of Monthly Disposal of Complaints

Sr. No.	Month	Carried forward from previous month	Received	Resolved*	Pending#
1	April, YYYY				
2	May, YYYY				
3	June, YYYY				
4	.....				
5	March, YYYY				
	<b>Grand Total</b>				

\* Inclusive of complaints of previous months resolved in the current month.

# Inclusive of complaints pending as on the last day of the month.

### Trend of Annual Disposal of Complaints

Sr. No.	Year	Carried forward from previous year	Received	Resolved*	Pending#
1	2021-22				
2	2022-23				
3	2023-24				
4	20XX-XX				
	<b>Grand Total</b>				

\* Inclusive of complaints of previous years resolved in the current year.

# Inclusive of complaints pending as on the last day of the year.





# Achieve Financial Freedom **SIP by SIP**

**Set up Systematic Investment Plans  
in mutual funds**

**MIRAE ASSET**  Sharekhan