

Form No. :

Client Code :



**Extensive research. Insightful trading.
Intelligent investments.**

Account Opening Form - Trading & Depository (NSDL/CDSL)
(Individual & Non-Individual)

FOR OFFICE USE ONLY

☐ NSDL ☐ CDSL

Branch Code

Client Code

Depository Scheme ☐ Normal ☐ Bandhan ☐ BIMA ☐ BSDA

Depository

Initial Cheque Details (1)

Cheque No. Date Amount

Drawn No.

Initial Cheque Details (2)

Cheque No. Date Amount

Drawn No.

	Name	Employee Code	Signature
Introducer	<div></div>		<div></div>
	<div></div>	<div></div>	
RM	<div></div>		<div></div>
	<div></div>	<div></div>	
Dealer 1	<div></div>		<div></div>
	<div></div>	<div></div>	
Dealer 2	<div></div>		<div></div>
	<div></div>	<div></div>	

S.No.	Name of the Document	Brief Significance of the Document	Page No.
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES			
1.	Account Opening Form	A. KYC form - Document captures the basic information about the constituent and an instruction / check list.	1-7
		B. Document captures the additional information about the constituent relevant to trading & depository account and an instruction / check list.	8-19
2.	Tariff Sheet	A. Schedule of Charges for Depository Services	20
		B. Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock/commodity exchange(s).	21
3.	Rights and Obligations	A. Document stating the Rights & Obligations of stock broker / trading member, authorised person and client for trading on stock/commodity exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	L 1-15
		B. Rights and Obligations of Beneficial Owner and Depository Participant.	L 16-18
4.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities & commodities market.	L 19-26
5.	Guidance Note	Document detailing do's and don'ts for trading on stock/commodity exchange, for the education of the investors.	L 27-30
6.	Policies and Procedure	Document describing significant policies and procedures of the stock broker / trading member.	L 31-47
7.	Most Important Terms and Conditions (MITC)	Document for non-custodial settled trading accounts.	22 & L48
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER / TRADING MEMBER & DEPOSITORY PARTICIPANT			
8.	Request for Trade Alerts through SMS and / or Email	Document requesting trade alerts through SMS & / or Email from Exchanges.	23-25
9.	Authorization For Sharing Personal Information	Document authorizing stock broker to share personal information to receive offers and information on various products/services etc.	
10.	Authority Letter to Pledge the shares / securities / commodities	Document authorizing stock/commodity broker to pledge clients shares / securities / commodities lying towards margin / collateral.	
11.	Verbal Order Acceptance Authorisation	Document authorizing Stock Broker / Trading Member to accept verbal orders in the manner mentioned therein.	
12.	Running Account Authorisation	Document authorizing Stock Broker / Trading Member to maintain the running account of funds, securities & commodities in the manner mentioned therein.	
13.	Format for Client Opting Online Trading Facility	Document for client opting for online trading facility.	
14.	Product Addendum	Intraday products for client enhancing limit / margin facility.	
15.	Option for Issue of Delivery Instruction Booklet (DIS)	Consent for Delivery Instruction Booklet (DIS Booklet)	26
16.	Account Handling Mandate/Letter of Authority/KYC of Related Person	Authorisation for accepting instructions from third person. KYC of Related person (Authorised Representative / Guardian of Minor)	27-29
17.	Categorization of the clients for commodity	Self Declaration - Categorization of the clients for each commodity	30-31
18.	FATCA / CRS Declaration	FATCA / CRS Declaration for Individuals	32-33
19.	Demat Debit and Pledge Instruction (DDPI)	Execution of Demat Debit and Pledge Instruction (DDPI) for transfer of securities towards deliveries / settlement obligations and pledging / re-pledging of securities.	34
20.	Download Consent Form (CKYCR)	Document authorizing stock broker to download client KYC Records from the Central KYC Registry (CKYCR).	35
21.	Voluntary Additional Terms & Conditions for availing depository services	Additional Terms & Conditions for availing depository services.	L49
22.	Product Terms and Conditions	Terms and Conditions for availing Intraday product services.	L50-54
23.	Terms & Conditions-Cum-Registration / Modification Form for Receiving SMS Alert from CDSL		L55-56
24.	Investor Charter and disclosure for Stock Broker and Depository Participant	Investor Charter and disclosure by Stock Broker and Depository Participant for clients.	L57-71
25.	Format for Written Orders	Format for order placement in writing.	L72
26.	NACH Mandate (to be submitted with banker)	Document authorizing to debit depository / other charges electronically from bank.	

Name of Stock Broker / Trading Member / Clearing Member: Religare Broking Limited

Name of Stock Exchange and Depository	Membership Regn.	SEBI Registration Number and Date
National Stock Exchange of India Limited	06537	Cash F&O Currency Derivatives Debt Commodity Derivatives : INZ000174330 May 03, 2018
BSE Limited	3004	
Metropolitan Stock Exchange of India Limited	1051	
National Commodity & Derivatives Exchange Ltd	01276	
Multi Commodity Exchange of India Ltd.	56560	
National Securities Depository Limited		DP ID: IN301774 IN-DP-385-2018 October 16, 2018
Central Depository Services (India) Limited		DP ID: 30200 IN-DP-385-2018 October 16, 2018

<p align="center">Registered Office Address 2nd Floor, P-14, 45/90, P Block, Connaught Place, New Delhi-110001 Ph: +91-11-4987-1000, 4900-7900 Fax: +91-11-4987-1189 Website: www.religareonline.com</p> <p align="center">Correspondence Office Address A-3/4/5, Club 125 (Tower-A), Sector-125, Noida-201301 (U.P.) Ph: 0120-486-6666 Fax: 0120-486-6274 Website: www.religareonline.com CIN : U65999DL2016PLC314319</p>	
<p>Compliance Officer Details Name : Mr. Nilesh Jain Phone No. : 0120-486-6643 Email Id : compliance@religare.com</p>	<p>CEO Details Name : Mr. Gurpreet Singh Sidana Phone No. : 0120-486-6575 Email Id : brokingceo@religare.com</p>

For any grievance/dispute please contact Religare Broking Limited at the above address or email id: igreligare@religare.com and Phone No.: 1860 25 88888. In case not satisfied with the response, please contact the concerned exchange(s) at :

Exchange Name	Email Id	Phone No.
NSE	ignse@nse.co.in	022-26598100 / 1800 266 0050 (Select IVR option 5)
BSE	is@bseindia.com	022-22721233/34
MSE	investorcomplaints@msei.in	022-61129000 Ext. 9028
Senior Manager, Investor Services Centre, Metropolitan Stock Exchange of India Limited, Exchange Square, Suren Road, Chakala, Andheri (East), Mumbai-400 093		
NCDEX	ig@ncdex.com	022-66406789
MCX	grievance@mcxindia.com	022-66494070
NSDL	relations@nsdl.co.in	(022) 2499 4200 / (022) 4886 7000 / (022) 2499 7000
CDSL	complaints@cdslindia.com	1800 22 55 33

ACKNOWLEDGEMENT

I / We acknowledge receipt of the documents at serial 3, 4, 5, 6, 7, 21, 22, 23, 24 and 25 mentioned overleaf under INDEX. I / We have read the contents of these and agree to abide by them. I / We further understand that the copies of rest of the documents mentioned in Index shall be provided to me / us after Verification / Acceptance / Execution by the broker and Depository Participant.



Sole/First Holder Signature



Second Holder Signature



Third Holder Signature

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients, including Promoters / Partners / Karta / Trustees and whole time directors and persons authorised to deal in securities/ commodities derivatives on behalf of company / firm / others.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorised for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If current & 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 along with other statutory approvals required for investment in commodities. (as applicable)
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate / Mark sheet issued by Higher Secondary Board / Passport of Minor / Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government / judicial / military officers, senior executives of state owned corporations, important political party officials, etc.

B Proof of Identity (POI) & Address (POA): - List of documents admissible as Proof of Identity & Address:

1. Passport.
2. Driving license.
3. Unique Identification Number (UID) (Aadhaar).
4. Voter's Identity Card issued by Election Commission of India.
5. Job card issued by NREGA duly signed by an officer of the State Government.
6. Letter issued by the National Population Register containing details of name, address, or any other document as notified by the Central Government in consultation with the Regulator.

C. In case of "Officially Valid Documents (OVD)" listed in Proof of Identity & Address does not contain updated address, the document as prescribed below shall be deemed to be the

OVD for the limited purpose of proof of address for three month under Conditions that welcome letter after KYC should not returned back in reasonable time to start transaction in account:

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 Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.
5. For FII / sub account, Power of Attorney given by FII / subaccount to the Custodians (which are duly notarized and / or apostiled or consularised) that gives the registered address should be taken.

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, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorised to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial / Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorised officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy / Consulate General in the country where the client resides are permitted to attest the documents.

F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, KYC details of all related persons to be provided as per regulatory requirement, as mentioned below:

Types of entity	Documentary requirements
Corporate	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • 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). • Photograph, OVD, PAN and DIN numbers of whole time directors / two directors / person authorised to transact / beneficial owner in charge of day to day operations. • Photograph, OVD, PAN of individual promoters holding control - either directly or indirectly. • Copies of the Memorandum and Articles of Association and certificate of incorporation. • Copy of the Board Resolution for investment in securities market. • Authorised signatories list with specimen signatures.
Partnership Firm	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Certificate of registration (for registered partnership firms only). • Copy of partnership deed. • Photograph, OVD, PAN of Partners. • Authorised signatories list with specimen signatures alongwith KYC.
Trust	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Certificate of registration (for registered trust only). • Copy of Trust deed. • Photograph, OVD, PAN of Trustees. • List of trustees certified by managing trustees / CA.
HUF	<ul style="list-style-type: none"> • PAN of HUF. • Bank pass-book / bank statement in the name of HUF. • Deed of declaration of HUF / List of coparceners. • Photograph, OVD, PAN of Karta.
Unincorporated association or a body of individuals	<ul style="list-style-type: none"> • Proof of Existence / Constitution document. • Resolution of the managing body & Power of Attorney granted to transact business on its behalf. • Authorised signatories list with specimen signatures alongwith KYC.
Banks/ Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution / registration or annual report / balance sheet for the last 2 financial years. • Authorised signatories list with specimen signatures alongwith KYC.
Foreign Institutional Investors (FII)	<ul style="list-style-type: none"> • Copy of SEBI registration certificate. • Authorised signatories list with specimen signatures alongwith KYC.
Army/Government Bodies	<ul style="list-style-type: none"> • Self-certification on letterhead. • Authorised signatories list with specimen signatures alongwith KYC.
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Societies Registration Act. • List of Managing Committee members. • Committee resolution for persons authorised to act as authorised signatories with specimen signatures alongwith KYC. • True copy of Society Rules and Bye Laws certified by the Chairman/Secretary. • Power of Attorney granted to transact business on its behalf.

INSTRUCTIONS/ CHECK LIST (for filling additional information related to trading account)

1. Additional documents in case of trading in derivatives segments - illustrative list:

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income - Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement.	Bank account statement for last 6 months
Any other relevant documents substantiating ownership of assets.	Self declaration with relevant supporting documents.

*In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.

- 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.
- Demat master or recent holding statement issued by DP bearing name of the client.
- For Individuals:
 - Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker / Authorized person.
 - In case of non-resident clients, employees at the stock broker's local office, overseas can do 'in-person' verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
- For non-individuals:
 - Form need to be initialized by all the authorised signatories.
 - Copy of Board Resolution or declaration (on the letterhead) naming the persons authorised to deal in securities on behalf of company / firm / others and their specimen signatures.

KNOW YOUR CLIENT (KYC) / CENTRAL KYC REGISTRY APPLICATION FORM (For Individuals)

Religare Broking Limited
A-3 / 4 / 5, Club 125, (Tower-A)
Sector-125, Noida-201301 (U.P.)

Account Type: ☐ Normal ☐ Minor ☐ Aadhar OTP Based E-KYC

Application Type* ☐ New ☐ Update

CKYC Number _____

(Mandatory for KYC update request)

PHOTOGRAPH

Please affix your recent passport size photograph

2

Signature Across Photograph

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**

A. PERSONAL IDENTITY DETAILS

- Name of the Applicant _____
Maiden Name (if any) _____
- Father's / Spouse Name _____
- Mother Name _____
- a) Gender ☐ Male ☐ Female ☐ Transgender
b) Marital Status ☐ Single ☐ Married c) Date of Birth DDMMYYYY
- a) Nationality ☐ Indian ☐ Others Pls. specify.....
b) Residential Status ☐ Resident Individual ☐ Non Resident ☐ Foreign National ☐ Person of Indian Origin
- a) PAN _____ b) Aadhaar Number, if any XXXXXX XXXX

B. ADDRESS & IDENTITY DETAILS

- Address Type ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified
- Permanent Address _____
(For Non-Resident Applicant Mandatory to specify overseas address) _____
City / Town / Village _____ PIN Code _____
State _____ Country _____
 - Specify the proof of Identity & Address submitted ☐ Aadhaar Card ☐ Any other (please specify).....
 - Contact Tel. (Off.) with STD Code Tel. (Res.) with STD Code
Details Fax No. with STD Code Mobile No. _____
Email ID _____
 - Current Address (If different from above) _____
City / Town / Village _____ PIN Code _____
State _____ Country _____
 - Specify the proof of address submitted for Current Address _____

C. DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I am aware of other modes of KYC which are available and I have chosen Aadhaar based method voluntarily. My Aadhaar record can be used by KRA Registration Agency/Central KYC Registry only for the specific purpose of validating/maintaining / sharing my KYC record and as an audit evidence. I will have an option to request for deletion of my Aadhaar record.
- I hereby consent to receiving information from KRA Registration Agency/Central KYC Registry through SMS/Email on the above registered number/email address.
- I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

3

Signature / Thumb Impression of Applicant

Date DDMMYYYY

ATTESTATION / FOR OFFICE USE ONLY**In person Verification (IPV) Details / KYC Verification Carried out by :**

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of Authorised Person _____

Name of the Organization: **Religare Broking Ltd.** Emp. Branch _____

Date of IPV: DD / MM / YYYY

Signature of the person who has done the IPV

Method of receipt of Document: _____

☐ Original Verified, Self Attested Documents & Certified copies received Date DDMMYYYY

Seal/Stamp of the Intermediary

Signature of the Authorised Signatory

PHOTOGRAPH

Application Type* ☐ New ☐ Update

CKYC Number

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

(Mandatory for KYC update request)

Please affix your recent passport size photograph

Signature Across Photograph

1.	Name of the Applicant																										
2.	Date of incorporation/ formation	D	D	M	M	Y	Y	Y	Y	Place of incorporation/ formation																	
3.	Date of commencement of business	D	D	M	M	Y	Y	Y	Y																		
4.	Country of Incorporation / Formation																										
5.	PAN										Registration No. (e.g. CIN)																
6.	TIN/GST Registration No.																		TIN/Equivalent Issuing Country								
7.	Entity Constitution Type (please tick ✓ any one)		<input type="checkbox"/> Private Limited Co. <input type="checkbox"/> Public Ltd. Co. <input type="checkbox"/> Liquidator <input type="checkbox"/> HUF <input type="checkbox"/> ALP <input type="checkbox"/> FI <input type="checkbox"/> FII <input type="checkbox"/> AJP <input type="checkbox"/> AOP <input type="checkbox"/> BOI <input type="checkbox"/> Government Body <input type="checkbox"/> Section 8 Companies (Company Act, 2013) <input type="checkbox"/> CGD/SGD or Agency <input type="checkbox"/> Defense Establishment <input type="checkbox"/> BOI <input type="checkbox"/> Society <input type="checkbox"/> LLP <input type="checkbox"/> Bank <input type="checkbox"/> FPI-Category I <input type="checkbox"/> FPI-Category II <input type="checkbox"/> FPI-Category III <input type="checkbox"/> Partnership <input type="checkbox"/> Trust <input type="checkbox"/> Others (Please specify)																								

<input type="checkbox"/> Officially valid document(s) in respect of person authorised to transact	
<input type="checkbox"/> Certificate of Incorporation / Formation	<input type="text"/>
<input type="checkbox"/> Registration Certificate No.	<input type="text"/>
<input type="checkbox"/> Memorandum and Articles of Association	<input type="checkbox"/> Partnership Deed <input type="checkbox"/> Trust Deed
<input type="checkbox"/> Resolution of Board / Managing Committee	
<input type="checkbox"/> Power of attorney granted to its manager, officers or employees to transact on its behalf	

1. Registered Office Address/Place of Business	
Proof of Address	<input type="checkbox"/> Certificate of Incorporation/Formation <input type="checkbox"/> Registration Certificate <input type="checkbox"/> Other Document
Line 1	
Line 2	
Line 3	City/Town/Village
District	State
PIN/Post Code	Country
2. Contact Details	
Tel. (Off.)	Tel. (Res.)
Fax No.	Mobile No.
Email ID	
3. Local Address in India (if different from above)	
Line 1	
Line 2	
Line 3	City/Town/Village
District	State
PIN/Post Code	Country
4. Specify the proof of address submitted for Local Address in India	

04

[illegible]

1. DETAILS OF RELATED PERSON	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Addition of Related Person <input type="checkbox"/> Update Related Person Details <input type="checkbox"/> CKYC Number of Related Person (if available) </div> <div style="width: 48%;"> <input type="checkbox"/> Deletion of Related Person </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 48%;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Karta <input type="checkbox"/> Power of Attorney Holder <input type="checkbox"/> Beneficial Owner </div> <div style="width: 48%;"> <input type="checkbox"/> Promoter <input type="checkbox"/> Beneficiary <input type="checkbox"/> Other (Please Specify) </div> </div> <div style="width: 48%;"> <input type="checkbox"/> Trustee <input type="checkbox"/> Partner <input type="checkbox"/> Authorised Signatory <input type="checkbox"/> Court Appointment Official </div> </div> </div> <div style="margin-top: 10px;"> (If CKYC number is available, Only "Related Person Type" & "Name" is mandatory) </div> <div style="margin-top: 10px;"> Related Person Type </div> <div style="margin-top: 10px;"> DIN (Director Identification Number) (Mandatory if related person type is director) </div>
-------------------------------------	---

1.1


PERSONAL DETAILS

	Prefix	First Name	Middle Name	Last Name
Name (Same as ID Proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father/Spouse Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	<input type="checkbox"/> M - Male	<input type="checkbox"/> F - Female	<input type="checkbox"/> T - Transgender	
Nationality	<input type="checkbox"/> IN-Indian	<input type="checkbox"/> Others (Specify) _____		
PAN	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2 PROOF OF IDENTITY AND ADDRESS	
1.	<p>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)</p> <p><input type="checkbox"/> A - Passport Number </p> <p><input type="checkbox"/> B - Voter ID Cardd </p> <p><input type="checkbox"/> C - Driving Licence </p> <p><input type="checkbox"/> D - NREGA Job Card </p> <p><input type="checkbox"/> E - National Population Register Letter </p> <p><input type="checkbox"/> F - Proof of Possession of Aadhaar </p>
2.	<p><input type="checkbox"/> E-KYC Authentication </p>
3.	<p><input type="checkbox"/> Offline verification of Aadhaar </p>
<p>Address</p> <p>Line 1 </p> <p>Line 2 </p> <p>Line 3 City/Town/Village</p> <p>District State </p> <p>PIN/Post Code Country </p>	

1.3 CURRENT ADDRESS DETAILS	
<input type="checkbox"/> Same as above mentioned address (in such cases address details as below need not be provided)	
1.	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)
	<input type="checkbox"/> A - Passport Number
	<input type="checkbox"/> B - Voter ID Card
	<input type="checkbox"/> C - Driving Licence
	<input type="checkbox"/> D - NREGA Job Card
	<input type="checkbox"/> E - National Population Register Letter
	<input type="checkbox"/> F - Proof of Possession of Aadhaar
2.	<input type="checkbox"/> E-KYC Authentication
3.	<input type="checkbox"/> Offline verification of Aadhaar
4.	<input type="checkbox"/> Deemed Proof of Address -
5.	<input type="checkbox"/> Self Declaration
Address	
Line 1	
Line 2	
Line 3	City/Town/Village
District	State
PIN/Post Code	Country

4. CONTACT DETAILS	
Tel. (Off)	Tel. (Resi)
Mobile	Email ID

5. DECLARATION	
<ul style="list-style-type: none"> I/We hereby consent to receiving information from KRA Registration Agency/Central KYC Registry through SMS/Email on the above registered number/email address. I/We hereby declare that the details furnished above are true and correct to the best of my / our knowledge and belief and I / we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am / we are aware that I / we may be held liable for it. 	
Date	
Place	Name & Signature of the Authorised Signatory(ies)

ATTESTATION / FOR OFFICE USE ONLY	
In person Verification (IPV) Details / KYC Verification Carried out by : Name of the person who has done the IPV: _____ Designation: _____ Employee ID: _____ Name of Authorised Person _____ Name of the Organization: Religare Broking Ltd. Emp. Branch _____ Date of IPV: <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Signature of the person who has done the IPV _____ Method of receipt of Document: _____ <input type="checkbox"/> Original Verified, Self Attested Documents & Certified copies received	Seal/Stamp of the Intermediary Signature of the Authorised Signatory

E. INCOME DETAILS		
Gross Annual Income Details (please specify)	Income Range per annum <input type="checkbox"/> Below ₹1 Lac <input type="checkbox"/> ₹1-5 Lac <input type="checkbox"/> ₹5-10 Lac <input type="checkbox"/> ₹10-25 Lac <input type="checkbox"/> ₹25 Lac -1 Crore <input type="checkbox"/> Above 1 Crore	Net- worth Amount (₹) _____ As on (date) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (Net worth should not be older than 1 year)

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

G. BANK ACCOUNT DETAILS (1) [Dividend Bank Details]		
Bank Name		
Branch Address		
City / Town / Village		PIN Code
State	Country	
Bank Account No.		
Bank Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Others _____ In case of NRI : <input type="checkbox"/> NRE <input type="checkbox"/> NRO	
MICR Code	IFSC	
(i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or) (ii) Photocopy of the Bank Statement having name and address of the BO (iii) Photocopy of the Passbook having name and address of the BO, (or) (iv) Letter from the Bank. • In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.		
BANK ACCOUNT DETAILS (2)		
Bank Name		
Branch Address		
City / Town / Village		PIN Code
State	Country	
Bank Account No.		
Bank Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Others _____ In case of NRI : <input type="checkbox"/> NRE <input type="checkbox"/> NRO	
MICR Code	IFSC	

H. (1) DEPOSITORY ACCOUNT(S) DETAILS		
Depository Participant Name		
Depository Name <input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	DP ID	Beneficiary ID (BO ID)
Beneficiary Name		
(2) DEPOSITORY ACCOUNT(S) DETAILS		
Depository Participant Name		
Depository Name <input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	DP ID	Beneficiary ID (BO ID)
Beneficiary Name		
(3) TRADING ACCOUNT DETAILS (applicable for Depository Account only)		
I already have trading account and want to map my/our demat account with my trading account:		
Name of Stock Broker and Depository Participant : Religare Broking Limited		
Trading Code	DP ID - IN301774	Beneficiary ID (BO ID)
	DP ID - 12030200	Beneficiary ID (BO ID)

I. TRADING PREFERENCES

* Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you.

Exchanges	NSE & BSE				MCX & NCDEX
All Segments	Cash / Mutual Fund	F&O	Currency	Debt	Commodity Derivatives
<div>4</div> <div>Please sign here to select all the segments</div>					

If you do not wish to trade in any of segments / Mutual Fund, please mention here _____

J.	CATEGORIZATION OF THE CLIENT FOR COMMODITY
----	--

Category (Please Specify)	<input type="checkbox"/> Farmers/FPOs	<input type="checkbox"/> Value Chain Participants (VCPs)	<input type="checkbox"/> Proprietary Traders
	<input type="checkbox"/> Domestic Financial Institutional investors	<input type="checkbox"/> Foreign Participants	<input type="checkbox"/> Others
Note: Declaration for commodities given on page no. 30 is required to be filled, if not opted "others".			

K.	PAST ACTIONS
----	--------------

Details of any action / proceedings initiated / pending / taken by SEBI / Stock exchange / Commodity exchange any other authority against the applicant / constituent or its Partners / promoters / whole time directors / authorised persons in charge of dealing in securities during the last 3 years, give details (attach annexure if required)

[illegible]

L.	ADDITIONAL DETAILS / STANDING INSTRUCTIONS
----	--

Whether you wish to receive Contract Note, Statement of Account & Transaction-cum-holding statement in Physical or Electronic mode (please specify) [If Opted Electronic Mode, read note 6 and ensure that Email ID is provided in KYC application form.		<input type="checkbox"/> Electronic Mode	<input type="checkbox"/> Physical Mode
Mode of receiving Standard Account Opening Documents (Sr. No. 3, 4, 5, 6 and 7 under INDEX):		<input type="checkbox"/> Electronic Mode	<input type="checkbox"/> Physical Mode
Number of years of Investment/Trading Experience		<input type="checkbox"/> No	<input type="checkbox"/> Yes
_____ Years of Experience		<input type="checkbox"/> _____ Years in Commodities	
I/We authorise you to receive credits automatically into my / our Demat account. (If you do not wish to receive credits automatically please tick <input checked="" type="checkbox"/> on "No" and cross <input checked="" type="checkbox"/> the option "Yes")		[Automatic Credit] <input checked="" type="checkbox"/> Yes	
		<input type="checkbox"/> No	

R. DEALINGS THROUGH OTHER STOCK BROKERS	
If client is dealing through other stock broker, provide the following details:	
Name of Stock Broker	
SEBI Registration Number	
Registered Office Address	
City / Town / Village	PIN Code
State	Country
Phone	Fax
Website	
Whether dealing with any other stock broker (if case dealing with multiple stock brokers provide details of all)	
Name of stock broker	
Client Code (UCC)	Exchange Name & ID
Details of disputes / dues pending from / to such stock broker	

S. IN CASE OF NRIs / FOREIGN NATIONALS / FIIs / OTHERS (As may be applicable)	
RBI Approval Reference Number	RBI Approval Date
SEBI Registration Number (for FIIs)	
SEBI Registration No. (If Applicable)	SEBI Registration Date
RBI Registration No. (If Applicable)	RBI Registration Date

T. INTRODUCER DETAILS (Optional)	
Name of the Introducer	
Status of the Introducer	<input type="checkbox"/> Remisier <input type="checkbox"/> Authorised Person <input type="checkbox"/> Existing Client <input type="checkbox"/> Others (please specify)
Address of the Introducer	
City / Town / Village	PIN Code
State	Country
Phone No. of Introducer	Signature of the Introducer

U. NOMINATION FORM FOR TRADING AND DEMAT ACCOUNTS (To be filled in by individual applying singly or jointly)			
Nomination Registration No. :		Date :	
UCC	DP ID	Client ID	
NOMINATION OPTIONS			
<input type="checkbox"/> I/We wish to make a nomination. [Details are provided in Nomination Form Prescribed by SEBI]		<input type="checkbox"/> I/We wish to opt out of a nomination. [Declaration Form opting out of nomination as Prescribed by SEBI]	
NOMINATION DETAIL			
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my/our account in the event of my/our death.			
Nomination can be made upto three nominees in the account.	Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
Mandatory Details			
1	Name of the nominee(s) (Mr./Ms.)		

2	Share of each Nominee	Equally <input type="checkbox"/> [If not equally, please specify percentage]																								
			Any odd lot after division shall be transferred to the first nominee mentioned in the form.																							
3	Relationship With the Applicant (If Any)																									
4	Date of Birth {in case of minor nominee(s)}		D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y
5	Name of Guardian (Mr. / Mrs.) {in case of minor nominee(s)}																									
Non-mandatory Details																										
6	Address of Nominee(s) / Guardian in case of Minor																									
		City / Place :																								
		State & Country																								
		PIN Code																								
7	Mobile/Telephone No. of Nominee(s) / Guardian in Case of Minor																									
8	Email ID of Nominee(s) / Guardian in case of Minor																									
9	Nominee /Guardian (in case of Minor) Identification details - [Please tick any one of following and provide details of same]																									
		<input type="checkbox"/> Photograph & Signature	<div style="text-align: center;">Photograph of 1st nominee</div> <div style="text-align: center;">Signature of Nominee across photograph</div>				<div style="text-align: center;">Photograph of 2nd nominee</div> <div style="text-align: center;">Signature of Nominee across photograph</div>				<div style="text-align: center;">Photograph of 3rd nominee</div> <div style="text-align: center;">Signature of Nominee across photograph</div>															
		<input type="checkbox"/> Signature																								
		<input type="checkbox"/> PAN																								
		<input type="checkbox"/> Aadhaar																								
		<input type="checkbox"/> Saving Bank Account No.																								
		<input type="checkbox"/> Proof of Identity																								
		<input type="checkbox"/> Demat Account ID																								
Signature of Witness for Nomination*																										
Name of the Witness			Address												Signature of Witness											

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

Note: Residual securities: in case of multiple nominees, remaining after distribution of securities as per percentage of allocation shall be transferred to the first nominee

V	DECLARATION FORM FOR OPTING OUT OF NOMINATION - TRADING AND DEMAT ACCOUNTS																																								
																					Date	D	D	M	M	Y	Y	Y	Y												
	UCC																DP ID														Client ID										
	Sole/First Holder Name																																								
	Second Holder Name																																								
	Third Holer Name																																								
	<p>I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.</p>																																								
	Detail of Witness*																																								
	Name of the Witness										Address										Signature of Witness																				

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

W	MODE OF OPERATIONS FOR JOINT ACCOUNTS																															
	<input type="checkbox"/> Jointly <input type="checkbox"/> Anyone of the holder or survivor(s)																															
	<p>If Mode of Operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations such as transfer of securities including Inter-Depository Transfer, pledge / hypothecation / margin pledge / margin re-pledge (creation, closure and invocation and confirmation thereof as applicable) of securities and freeze/unfreeze of account and / or securities and / or specific number of securities will be permitted</p>																															

DECLARATION																															
<ol style="list-style-type: none"> 1. I/We understand that the Stock / Commodity Broker is relying on this information for the purpose of determining the status of the applicants named above in compliance with FATCA/CRS. The Stock Broker is not able to offer any tax advice on FATCA or CRS 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 regulators / tax authorities / or close or suspend my/our account(s). 2. I / We hereby declare that the details furnished above are true, correct and complete to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am / we are aware that I/we may be held liable for it. 3. I / We confirm having read / been explained and understood the contents of the document on policy and procedures, all voluntary / non-mandatory documents of the stock / commodity broker and the tariff sheet. 4. I / We further confirm having read and understood the contents of the 'Right and Obligations' document(s) and 'Risk Disclosure Document'. I / we do hereby agree to be bound by such provisions as outlined in these documents. I / We have also been informed that the standard set of documents has been displayed for Information on stock/commodity broker's designated website: www.religareonline.com. 5. The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me / us and I / we have understood the same and I / we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. In case non-resident account, I / we also declare that I / we have complied and will continue to comply with FEMA regulations. I / we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant". 6. I/We have received and read the document of 'Rights and Obligation of BO-DP' (DP-CM agreement for BSE Clearing Member Accounts) including the schedules thereto and the terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action. 																															

FOR OFFICE USE ONLY												
UCC Code allotted to the Client <input type="text"/>												
	Documents verified with Originals				Client Interviewed By				In-Person Verification done by			
Name of the Employee / AP	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Employee Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Designation of the Employee / AP	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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 'Right and Obligations' document(s), RDD and Guidance Note. I / We have given / sent him a copy of all the KYC documents. I / We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I / We also undertake that any change in the 'Right and Obligations' and RDD would be made available on my / our website: www.religareonline.com, for the information of the clients.

Seal/Stamp of the stock broker

Signature of the Authorised Signatory

*AP: Authorised Person

Date



COMTRACK ACCOUNT DETAILS OF THE CLIENT

Religare Broking Limited

A-3/4/5, Club 125 (Tower-A), Sector-125,

Noida-201301 (U.P.)

To be filled and submitted by clients holding COMTRACK account to the Member by clients.

1.	Name of Client																									
2.	Client Address																									
	City/Town/Village																PIN Code									
	State											Country														
3.	PAN No.																									
4.	Bank Details:																									
	Bank Name																									
	Branch Address																									
	City/Town/Village																PIN Code									
	State											Country														
	Bank Account No.																									
	Bank Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Others																								
	MICR Number											IFSC Code														
5.	Name of Trading Member																									
6.	Trading Member ID																									
7.	COMTRACK Details of Client :																									
	Sr. No	COMTRACK Participant Name										COMTRACK Participant ID										COMTRACK Account No. of Beneficiary				
	1.																									
	2.																									
	3.																									
	4.																									

DECLARATION

I/We hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I/We undertake to inform you of any change 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.



Place

Date

Signature of Client

NOTE

1. Please provide a certified copy of COMTRACK master or a recent COMTRACK holding statement issued by a COMTRACK Participant bearing name of Client.
2. In case the client has multiple COMTRACK account, Please provide proof and details of the same.
3. In case of PAN provide certified copy of PAN.
4. In case of Bank account provide copy of cancelled cheque as proof for all the bank account details provided.

SCHEDULE – A: SCHEDULE OF CHARGES FOR DEPOSITORY SERVICES (w.e.f. 01-09-2024)

ACCOUNT TYPE	DEMAT ACCOUNT		
	<input type="checkbox"/> NORMAL	<input type="checkbox"/> BANDHAN	<input type="checkbox"/> BIMA
Account Opening Charges	NIL		
Account Maintenance Charges (Choose any one Scheme)	₹400. p.a. (Payable upfront on a monthly basis)	NIL AMC on providing Refundable Interest free Security Deposit of ₹3000/-	NIL AMC with Non- Refundable one time subscription fee of ₹1999/- (Exclusive of Taxes)
	If account tagged as Basic Service Demat Account (BSDA) and Value of Holdings in the Demat Account (Debt as well as other than debt securities combined) Upto ₹4 Lakhs– NIL AMC If Value of Holdings in the Demat Account (Debt as well as other than debt securities combined) More than ₹ 4 lakhs but up to ₹ 10 lakhs ₹ 100/- p.a. AMC. In case of corporate account, AMC (as per scheme selected above) plus applicable statutory charges (currently ₹500/- AMC as charged by NSDL/CDSL) would be additionally levied.		
TRANSACTION CHARGES			
Credit	NIL		
• Debit			
- Delivery Given to Religare Broking Pool Account - Delivery Given to any other Account	₹12/- for Client with POA / DDPI, ₹ 25/- for Client without POA/DDPI ₹30/- per debit or 0.02% of the value of transaction whichever is higher.		
Dematerialization - Demat Processing Charges	₹5/- per certificate		
Demat / Remat / MF Rejection Charges	₹30/- per rejection		
Conversion of Mutual Fund units represented by SOA into Demat	₹20/- per request		
Rematerialisation / Repurchase / Redemption of Mutual Fund / Reconversion of Mutual Fund units into SOA Charges	₹20/- per request + NSDL/CDSL Charges (NSDL/CDSL Remat Charge @ ₹10/- per hundred shares or part thereof or a flat fees of ₹10 per certificate whichever is higher (Maximum upto ₹5 Lac)		
Margin Pledge: Client with POA / DDPI to Religare Broking Limited	1. Margin Pledge Creation - ₹10/- Per Transaction 2. Margin Pledge Release (Religare Broking Limited Initiated) - ₹10/- Per Transaction. 3. Margin Pledge Release (Client-Initiated) - ₹20/- Per Transaction.		
Margin Pledge: Client without POA / DDPI to Religare Broking Limited	1. Margin Pledge Creation - ₹15/- Per Transaction. 2. Margin Pledge Release (Religare Broking Limited Initiated) - ₹15/- Per Transaction. 3. Margin Pledge Release (Client-Initiated) - ₹30/- Per Transaction.		
Pledge creation/closure/invoication in favour of Religare CUSPA account (per transaction)	₹20/- per transaction		
Pledge creation/closure/invoication in favour of Religare MTF account (per transaction)	₹50/- per transaction		
Normal Pledge / Hypothecation (per transaction) Creation/closure / Confirmation / Invoication	₹50/- per request or 0.02% of the value of transaction whichever is higher		
Pledge/Margin Pledge Booklet Issuance/re-issuance	₹5/- per leaf		
Freeze / Unfreeze Instruction	₹50/- per request		
Delivery Instruction Booklet (Re-issuance)	₹3/- per leaf		
Courier Charges for Demat / Remat / Repurchase / Redemption Conversion of Mutual Fund units represented by SOA / Reconversion of Mutual Fund units into SOA / Re-issuance of DIS / Pledge Booklet / Margin Pledge Booklet / Rejection Notification / Re-issuance of Statement of Transaction and Holding. For BSDA ₹ 25 will be charged for additional physical statement.	₹50/- per request or as per actuals whichever is higher		

TERMS & CONDITIONS :

- Clients are required to maintain ₹500/- as security amount towards depository charges, except for clients under BIMA / BANDHAN scheme.
- Changes in Client Master Details, ₹50/- per modification request shall be charged.
- An amount of ₹100/- shall be charged if DIS reissuance request is received on plain paper and DIS booklet is reported lost.
- All charges are payable on a monthly basis and any additional charges / taxes / statutory levies, charged by statutory authority and/or NSDL/CDSL as and when applicable will be levied. Delayed payment will be liable for interest @18% per annum, charged on monthly basis for NSDL/CDSL.
- Depository charges of Broking Client will be debited to their trading account.
- Any other service, which is not mentioned above, will be charged separately as per the rates applicable from time to time. Out of pocket expenses including courier charges for consignment will be charged extra.
- The value of transactions will be in accordance with rates provided by NSDL/CDSL.
- I/We have read and understood the Securities and Exchange Board of India's guidelines for facility for a BSDA. I/We are aware that if I/we are eligible to open a depository account as a BSDA, the account shall be opened as a BSDA. I/We also understand that in case, I/We at any point of time do not meet the eligibility criteria as a BSDA holder, my / our demat account is liable to be converted to regular account. I/We also state that if at any time choose to opt out of BSDA i.e. avail the facility of regular account the same will be communicated to the Participant from Sole / First Holder registered email ID.

Any other specific charges structure : Religare _____

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 Sole / First Holder Signature	 Second Holder Signature	 Third Holder Signature
---	---	--

Note : NSDL & CDSL

1. It is hereby informed that with the issuance of CAS from Depositories, RBL have discontinued dispatching mandatory annual physical statement.
2. Further, it should also be noted that the dispatch of annual CAS statements shall be discontinued if the account continuous to remain zero balance even after one year and /or if no Annual Maintenance Charges (AMC) is received by the DP.

TARIFF SHEET

PRODUCT PLAN* / BROKERAGE

Religare _____ (*Scheme details as per executed addendum)

CASH SEGMENT Brokerage	in% (subject to max. of 2.5%)	Minimum Paise (subject to max. 25 paise)	Tick (✓) any one
Delivery Based			<input type="checkbox"/> One Side <input type="checkbox"/> Both Side
Daily Square up			<input type="checkbox"/> One Side <input type="checkbox"/> Both Side

Minimum brokerage charge for trading in illiquid / high risk scrips in cash segment will be .50% on delivery and .05% on intraday turnover with minimum 5 paise (Scrip list available under client login).

DERIVATIVE SEGMENT Brokerage	in% (subject to max. 2.5% / ₹100/- Per Lot)	Minimum Paise/ Per Lot	Tick (✓) any one
Future			<input type="checkbox"/> One Side <input type="checkbox"/> Both Side
Option			<input type="checkbox"/> One Side <input type="checkbox"/> Both Side

CURRENCY DERIVATIVES & INTEREST RATE FUTURES SEGMENT	
--	--

Brokerage	Brokerage per lot (in ₹)	Tick (✓) any one
Future		<input type="checkbox"/> One Side <input type="checkbox"/> Both Side
Option		<input type="checkbox"/> One Side <input type="checkbox"/> Both Side

COMMODITIES DERIVATIVES SEGMENT:

Exchange and Segment	Brokerage Slab in %	Minimum Paise/ Per Lot	<input type="checkbox"/> One Side <input type="checkbox"/> Both Side
BSE / MCX / NCDEX - Future			
Exchange and Segment	in % (subject to max. 2.5% of premium amount or Rs.250/- per lot, whichever is higher)	Minimum Paise/ Per Lot	<input type="checkbox"/> One Side <input type="checkbox"/> Both Side
MCX-Option			
Exchange and Segment	in % (subject to max. 2.5% of premium amount or Rs.100/- per lot, whichever is higher)	Minimum Paise/ Per Lot	<input type="checkbox"/> One Side <input type="checkbox"/> Both Side
BSE / NCDEX-Option			

OTHER CHARGES	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	
51	
52	
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	
96	
97	
98	
99	
100	

Nature of Charge		Applicable Charge
a)	Annual Subscription Fee for EXE Based Diet Users	₹999/- per annum.
b)	Inter Settlement Charges	₹15/- + applicable taxes per transaction
c)	Administrative Charges - Offline : on per offline executed order	₹10/- (Maximum ₹50/- per day /per segment)
d)	Delayed Payment Charges – On overdue balance towards trading or margin (Standard rate per annum)	upto 29.50%
e)	Account Processing Charges	₹500/-
f)	Document Handling Charges <ul style="list-style-type: none"> (i) Customer opted for receiving documents by Electronic Mode : In case such customer intends to receive additional / duplicate copies of documents (contract notes, statements etc.) by Physical mode or physical documents are sent due to email getting bounced. (ii) Customer opted for receiving documents by Physical Mode: In case such customer intends to receive additional / duplicate copies of documents (contract notes, statements etc.) by Physical mode. 	₹25/- + applicable taxes per contract note/other documents.

In addition to brokerage additional charges including statutory levies i.e. stamp duty, exchange transaction charges, SEBI fees, Goods and Service Tax (GST), CTT, Clearing Charges, STT, other taxes and levies, investor protection fund fees etc. charged by the statutory authorities/Exchange(s), delayed payment charges, cheque bounce charges, auction settlement charges as may be applicable will be levied. For details please login on our website www.religareonline.com

I/We understand that economic conditions change over time and therefore agree that RBL is authorised to change the tariff in future.

Date

7 

Client Signature

Annexure A

Corporation to secure, the client's obligations and that the rights or interests of the client with respect to the Said Securities shall be subject and subordinate to the rights, claims and interests of Exchange/ Clearing Member/ Clearing Corporation in respect of the Said Securities.

- (v) that Exchange/ Clearing Member/ Clearing Corporation may invoke the pledge without any reference to or permission of the client and upon receipt of the Said Securities, Exchange/ Clearing Member/ Clearing Corporation may utilize the proceeds in meeting the my/our obligations in such manner as it may deem fit and that such invocation of pledge will be final and irrevocable against the Clearing Member and me/us.
- (vi) I/We shall not make any claims or demands for refund or any reimbursement in relation to the Said Securities.
- (vii) I/we hereby confirm that I/we have read the terms and conditions to this effect and fully aware of the consequences of the same.
4. **VERBAL ORDER ACCEPTANCE AUTHORISATION:** I/We agree and acknowledge that in order to avoid any disputes it is recommended by you that I/we should give instructions for order placement/modification and cancellation in writing in the format given along with Policies and Procedure Document, and take signatures of two authorised officers of the branch where orders are tendered along with company stamp on the carbon/photocopy of the instructions in acknowledgment of receipt of my/our instructions. However it is my/our view that the fluctuations in market are so rapid that it is not practical to give written instructions for order placement / modification and cancellation. I/We therefore authorise you to accept my (our) / my (our) authorised representative's verbal instructions for order placement/modification and cancellation in person or over phone (fixed line or mobile phone) and execute the same. I/We understand the risk associated with verbal orders and accept the same, and agree that I/We shall not be entitled to disown orders and consequent trades (if any) by shifting the burden of proof by asking you to prove the placement of orders through telephone recording etc.
5. **RUNNING ACCOUNT AUTHORISATION:** In order to avoid time consuming repeated pay-in by me/us and pay-out by you of funds, I/we hereby direct and authorise you to maintain running account(s) and debit/credit funds from/to the running accounts and make pay-in/receive funds to/from exchanges/clearing corporations/other receiving parties (if applicable). Further, subject to your discretion, please treat my/our funds lying to my/our credit in running accounts as margin/collateral for my/our dealings/trading. In the event I/we have outstanding obligations on the settlement date, you may retain the requisite funds towards such obligations along with funds required to meet margin obligations in all the segments across exchanges as permissible within in regulatory provisions. In case, I/we have traded during my/our chosen settlement period, you may retain upto the maximum amount as permissible within in regulatory provisions duly netting off across all stock/commodities exchanges and their segments. Authorisation is subject to changes as prescribed by the exchange(s)/SEBI from time to time. While settling the account, please send a 'statement of accounts' containing an extract from ledger for funds and an extract from the register of securities displaying all receipts/deliveries of funds/securities/commodities. In the statement(s) being sent, please provide details regarding retention of funds and pledge of securities/commodities, if any. I/We shall bring any discrepancy in the statement(s) preferably within 7 working days from the date of receipt to your notice so as to allow you to take remedial steps, if any are warranted. Please do not carry out above stated settlement of running account in the event I/We avail margin trading facility. Further, do not carry out settlement of running account referred to above for funds given by me/us towards collaterals/margin in the form of bank guarantee (BG)/Fixed Deposit receipts (FDR).

I/We am/are entitled to revoke this Authorisation at any time. My/Our preference for actual settlement of funds is at least:

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

6. FORMAT FOR CLIENT OPTING ONLINE TRADING FACILITY :

I/We wish to avail the following facility being offered by you:

Product / Facility (Please tick the appropriate)		
<input type="checkbox"/> Browser based	<input type="checkbox"/> EXE based (Annual Subscription Fees ₹ 999)	<input type="checkbox"/> Wireless Trading

1. I/We also hereby authorize you to debit the annual subscription fees as applicable to my/our trading account for availing opted facility. The Subscription fee is non-refundable.

2. I/We hereby authorize you to debit the yearly subscription fees as applicable for Exe based services opted by me/us on annual basis. In case I/We wish to withdraw the said facility, I/We will submit the related request in writing.
3. I/We fully aware and agree to the provisions specifying possible risks, responsibilities, obligations and liabilities associated with internet based trading in terms of clauses defined under section "Internet & Wireless Technology based trading facility provided by Members to Client" of the document "Right and Obligations of Members, Authorized Persons and Client" of account opening form.
7. **PRODUCT ADDENDUM** : I/We desire to avail the below mentioned facility for trading in segments opted by me/us:
 1. **TradeSmart Order:** TradeSmart order is an intraday product having an order placement feature wherein a client can limit the loss on every position by necessarily placing a cover order specifying the SLTP and a limit price along with Profit order to book profit.
 2. **Intraday / High Multiplier Facility:** In Intraday/High Multiplier Facility, the Client will be allowed leverage for intra-day trading on available margin/security/collateral. The leverage available shall be liable to change as per company's risk management policy.
 3. **Purchase Today Sell Tomorrow (PTST):** In PTST Facility, client can put buy orders and sell trade on next trading day. If Client does not execute square off "sell trades" against previous trading day's trades done under "PTST" facility prior to Designated Time on T+1 day, then in that event for such trades/open positions of Client trading system will take over control at Designated Time & put square off order.

DECLARATION

I/We hereby declare that the decision to register/enroll under above mentioned products and for making all trades thereby is/ shall be entirely mine/ours decision and I/we have neither been given nor have been in any way influenced by you/your officers with any financial or other advice regarding the suitability or profitability of availing the Facilities as stated above or making any trades thereby. I/We may suffer losses on account of square off/non-square off by the Company with in or at end of the day and I agree to bear such losses without protest or claim against the Company. I/We further acknowledge that not only for above Facility(s) but for any other facility or general trading also, in no case any employee/officer/director or agent of the Company is authorized to give any advice, assurance or handle my/our account in any discretionary manner. I/we agree that in the event I/we were to seek any advise, assurance or allow handling my/our account in any discretionary manner by any employee/officer or agent of the Company, the same shall be mine/our personal arrangement and Company shall be in no way liable for losses etc. which I/we were to suffer as a consequence of such arrangements.

I/we have read and accepted all terms and conditions specified hereinabove and given in document titled "Product Terms & condition" under/as client copy and agree to be bound by all of them.

Client Signature	<div style="position: absolute; top: -15px; left: 10px;">✍</div>	Date	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> </div>
Client Name			
Client Code			

OPTION FOR ISSUE OF DELIVERY INSTRUCTION BOOKLET (DIS BOOKLET)

To,

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Religare Broking Ltd.

A-3/4/5, Club 125, (Tower-A),Sector-125,
Noida-201301 (U.P.)

Dear Sir / Madam,

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

☐ OPTION 1:


I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening of my / our NSDL/CDSL account though I / we have issued a Demat Debit and Pledge Instruction (DDPI) / registered for eDIS / executed PMS agreement in favour of / with Religare Broking Limited (name of the DDPI Authority Holder / Clearing Member / PMS manager) for executing delivery instructions for settling stock exchange trades [settlement related transactions] effected through such DDPI Authority Holder-Clearing Member / by PMS manager/ for executing delivery instructions through eDIS.

OR

☐ OPTION 2:

I / We do not require the Delivery Instruction Slip (DIS) booklet for the time being, since I / We have issued a Demat Debit and Pledge Instruction (DDPI)/registered for eDIS / executed PMS agreement in favour of / with Religare Broking Limited (name of the DDPI Authority Holder / Clearing Member / PMS manager) for executing delivery instructions for settling stock exchange trades [settlement related transactions] effected through such DDPI Authority Holder - Clearing Member / by PMS manager or for executing delivery instructions through eDIS. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

Yours faithfully

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

ACCOUNT HANDLING MANDATE

11

OR

☐ I/We wish to appoint an authorized person besides dealing myself.
(In case this option is selected then kindly give requisite details in below letter)

LETTER OF AUTHORITY

Religare Broking Limited

A-3/4/5, Club 125 (Tower-A), Sector-125, Noida-201301 (U.P.)

Sir,

I / We have been / shall be dealing through you as my / our broker i.e. agent.

I / We hereby appoint Mr. / Ms. / Mrs

with residence and other particulars as given below as my / our authorised representative to deal / transact on my behalf and to place orders, give instructions, receive / collect and / or sign contract notes, bills, account statements, settlements, order and / or trade confirmations (whether written or oral / over phone) and any other documents or communication and generally to do any and all act(s) on my / our behalf which I / we can do and I / we undersigned do hereby agree and declare and confirm that all the acts and things done by him/her shall be my / our acts, deeds and things validly done by me / us to all intents and purposes.

Please treat this authorization as written ratification of my verbal directions / authorizations if any given and carried out by you earlier. I agree to indemnify you and keep you indemnified against all losses, damages and actions which you may suffer or face as a consequence of adhering to and carrying out my directions given above.

Please take the above information on record & oblige.

Thanking you

Details of Authorised Representative	
Name	
Address	
City / Town / Village	PIN Code
State	Country
Telephone No.	Mobile No.
PAN	
Relationship of Authorised Representative with the client	
Signature of Authorised Representative	

- Enclosed self-attested copy of identity proof of the Authorised Representative.
- An employee or authorised person of Religare Broking Limited cannot be appointed as an authorised representative.

Client Signature |

Date | D | D | M | M | Y | Y | Y | Y

Client Name | | | | | | | | | | | | | | | | | | | | | |

Client Code | | | | | | | | | |

DETAILS OF RELATED PERSON

Application Type ☐ New ☐ Update ☐ Delete

CKYC Number PAN of the Applicant

Name of Applicant

1. DETAILS OF RELATED PERSON

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Updation

☐ CKYC Number of Related Person (if available)

Related Person Type ☐ Guardian of Minor ☐ Assignee ☐ Authorized Representative

PHOTOGRAPH

Please affix your recent passport size photograph



Signature Across Photograph

Name Prefix First Name Middle Name Last Name

(If CKYC number and name are provided, below details are optional)

Maiden Name

Father/Spouse Name

Mother Name

PAN

Gender ☐ M - Male ☐ F - Female ☐ T - Transgender

Date of Birth

Please tick, If applicable

☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (RPEP)
☐ Not a Politically Exposed Person (PEP) ☐ Not Related to a Politically Exposed Person (RPEP)

2. PROOF OF IDENTITY AND ADDRESS

1. 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

☐ B - Voter ID Card

☐ C - Driving Licence

☐ D - NREGA Job Card

☐ E - National Population Register Letter

☐ F - Proof of Possession of Aadhaar

2. ☐ E-KYC Authentication

3. ☐ Offline verification of Aadhaar

Address

Line 1

Line 2

Line 3

District

PIN/Post Code

Country

3. CURRENT ADDRESS DETAILS

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

1. 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

☐ B - Voter ID Card

<input type="checkbox"/>	C - Driving Licence	
<input type="checkbox"/>	D - NREGA Job Card	
<input type="checkbox"/>	E - National Population Register Letter	
<input type="checkbox"/>	F - Proof of Possession of Aadhaar	
2.	<input type="checkbox"/> E-KYC Authentication	
3.	<input type="checkbox"/> Offline verification of Aadhaar	
4.	<input type="checkbox"/> Deemed Proof of Address	
5.	<input type="checkbox"/> Self Declaration	
Address		
Line 1		
Line 2		
Line 3	City/Town/Village	
District	State	
PIN/Post Code	Country	

4. CONTACT DETAILS		
Tel. (Off)		Tel. (Resi)
Mobile		Email ID

5. REMARKS (If any)		

6. DECLARATION		
<ul style="list-style-type: none"> I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. 		
Date		
Place		
		Name & Signature of the Authorised Signatory(ies)

ATTESTATION / FOR OFFICE USE ONLY																				
In person Verification (IPV) Details / KYC Verification Carried out by : Name of the person who has done the IPV: _____ Designation: _____ Employee ID: _____ Name of Authorised Person _____ Name of the Organization: Religare Broking Ltd. Emp. Branch _____ Date of IPV: <table border="1"><tr><td>D</td><td>D</td><td>/</td><td>M</td><td>M</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> Signature of the person who has done the IPV _____ Method of receipt of Document: <input type="checkbox"/> Original Verified, Self Attested Documents & Certified copies received Date <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>		D	D	/	M	M	/	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	Seal/Stamp of the Intermediary Signature of the Authorised Signatory
D	D	/	M	M	/	Y	Y	Y	Y											
D	D	M	M	Y	Y	Y	Y													

SELF DECLARATION - CATEGORIZATION OF THE CLIENTS FOR EACH COMMODITY

Religare Broking Limited

A-3/4/5, Club 125 (Tower-A), Sector-125, Noida-201301 (U.P.)

Subject: Categorization of the clients for each commodity

I/We have been/shall be dealing through you as my/ our member broker on different Commodity Exchanges. I/We hereby declare my/ our category for the commodities mentioned therein, as given below in accordance with SEBI circular no. SEBI/HO/CDMRD/DNPMP/CIR/P/2019/08 dated January 04, 2019:

CATEGORIES							
Sr. N.	Name of Commodities	Farmer / FPO	Value chain participant (VCP)	Domestic financial institutional investor	Foreign participant	Proprietary trader	Others
1	BARLEY						
2	CHANA						
3	MAIZE						
4	WHEAT						
5	MOONG						
6	PADDY (BASMATI)						
7	KAPAS / COTTON						
8	BLACK PEPPER						
9	CARDAMOM						
10	CASTOR SEED						
11	GAUR SEED 10 MT						
12	GAUR GUM						
13	SOY BEAN						
14	MUSTARD SEED						
15	CRUDE PALM OIL						
16	MENTHA OIL						
17	RBD PALMOLEIN						
18	REFINED SOY OIL						
19	COTTON SEED OILCAKE						
20	SUGAR M						
21	TURMERIC						
22	JEERA						
23	CORIANDER						
24	CRUDE OIL						
25	NATURAL GAS						
26	ALUMINIUM						
27	BRASS						
28	COPPER						
29	LEAD						
30	NICKEL						
31	ZINC						
32	GOLD						
33	SILVER						

I/We further declare that in case declaration is not provided for any of the particular exchange traded commodity, please consider the "Others" category for the same. I/We undertake that I/we shall inform the member broker in case there is any change in category for any of the exchange traded commodity.

Client Signature |

Date

D

D

M

M

Y

Y

Y

Y

Client Name _____

Client Code | | | | | | | | | | | | | |

CATEGORIES

- Farmers/FPOs: It includes participants such as farmers, farmers' cooperatives, Farmers Producers Organisations (FPOs) and such entities of like nature.
- Value chain participants (VCPs): It includes participants such as Processors, Commercial users as Dal and Flour Millers, Importers, Exporters, Physical Market Traders, Stockists, Cash & Carry participants, Producers, SMEs/MSMEs & Wholesalers etc., but exclude farmers/FPOs.
- Proprietary traders: It includes the members of stock exchanges trading in their proprietary account.
- Domestic financial institutional investors: It includes participants such as Mutual Funds (MFs), Portfolio Managers, Alternative Investment Funds (AIFs), Banks, Insurance Companies and Pension Funds etc., which are allowed to trade in commodity derivatives.
- Foreign participants: It includes participants such as Eligible Foreign Entities (EFEs), NRIs etc. which are allowed to trade in commodity derivatives markets.
- Others: All other participants which cannot be classified in the above categories.

FATCA / CRS DECLARATION FOR INDIVIDUALS

Trading Code		DP ID IN301774 Demat ID						DP ID 12030200 Demat ID					
Sr. No.	Details		1st Holder	2nd Holder	3rd Holder								
1.	Address in the jurisdiction details where applicant is resident outside India for tax	Address											
		City / Town / Village											
		State, Pin Code and Country											
2.	Country of Birth	US											
		Other											
3.	Place of Birth	City / Town											
4.	Source of Wealth	Salary											
		Business											
		Gift											
		Ancestral Property											
		Rental Income											
		Prize Money											
		Others											

Please specify the details of all countries where you hold tax residency and its Tax identification Number & Type :

Sr. No.	Details	1st Holder	2nd Holder	3rd Holder
1.	Country of Residence for Tax Purpose (Other than India)#			
2.	Tax Identification No. (US TIN) or Equivalent (Other)			
3.	Identification Type			

To include all countries other than India, where investor is Citizen/Resident/Green Card Holder/ Tax Resident in those respective countries especially of USA.

Declaration & Acknowledgement:

- I have understood the information requirement of this form (read with the FATCA-CRS Instructions below) and hereby confirm that the information provided above is true, correct and complete to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ am aware that I may liable for it. In case of any change in the above given status on a future date, I undertake to inform Religare Broking Limited the same within 30 Days.
- I agree that if I/am a U.S. person or tax resident of a reportable foreign jurisdiction (other than U.S.) requiring reporting under FATCA/CRS or any other Law, my account details, as required under inter governmental agreement (IGA)/Multilateral competent authority agreement (MCAA) Signed by Indian government, Would be reported by Religare Broking Limited to the relevant Tax Authority.
- If My Country of Birth is US, I/am providing a certificate of relinquishment of Citizenship (loss of Nationality) or a self certification for stating reason for not having such a certificate despite relinquishing US citizenship OR not obtaining US citizenship at birth.

I hereby authorize you to disclose, share, 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 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 of the same. Further, I authorize to share the given information to other SEBI Registered Intermediaries to facilitate single submission / updation & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your end.



1. Who is US person?

In case of individuals, U.S. person means a citizen or Resident of the United States. Persons who would qualify as US person could be born in the United States, Born outside the united states of a US parents, Naturalized Citizens, Green Card Holders, Tax residents.

2. Who is a reportable person (non US) under common reporting standards (CRS)?

Under common reporting standards (CRS), Reportable person means tax resident of a reportable foreign jurisdiction other than US and India.

3. Document to be collected if Customer's Country of birth is US but Declares that he/she is not a US person

- Certificate of relinquishment of citizenship (loss of nationality certificate); or
- Self certification for stating reason for not having such a certificate despite relinquishing US citizenship; Or
- Self certification for stating reasons for not obtaining US citizenship at birth.

4. MF transactions will be permitted to clients/ joint holders in new folios after reviewing this declaration and existing KYC data and only if permitted by AMCs.**5. Towards compliance with tax information sharing laws, such as FATCA, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Towards compliance with such laws, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).**

Also note that you may receive more than one request to provide this information, if you have multiple relationships with us or our group entities. Therefore it is important that you respond to our request, even if you believe that you have already provided this information earlier.

Please note that above information is provided only for quick reference to customers. You are requested to refer Rule 114F, 114G and 114H of Income-tax Rules, 1962 consult a legal/tax advisor for any clarification.

DEMAT DEBIT AND PLEDGE INSTRUCTION

Beneficial Owner Account:

DP Name	BO Name	DP ID (NSDL)	BO Account No.	DP ID (CDSL)	BO Account No.
Religare Broking Limited		IN301774		12030200	













Details of accounts where securities can be Transferred/Pledged:

I. Pool (TM/CM) / Clearing Corporation / Client Securities Margin Pledge / Client Securities under Margin Funding Account:

Demat A/c Purpose	NSDL	CDSL	CM Name
NSE Pool A/c	IN558537	12030200 00000039 (Normal), 12030200 00031889 (SLBS), 11000011 00016472 (EPI)	Religare Broking Limited
BSE Pool A/c	IN630043	12030200 00000062 (Normal Pay-In), 12030200 00000081 (Normal Pay-Out)	Religare Broking Limited
NSE MFSS A/c	IN565576	11000011 00017837	NSCCL
BSE STAR MF A/c	IN620031	11000010 00020972	BOISL/ICCL

Demat A/c Purpose	DP Name	Depository	DP ID	Beneficiary ID
Client Securities Margin Pledge Account	Religare Broking Limited	NSDL	IN301774	19955264
		CDSL	12030200	00096533
Client Securities Margin Pledge Account - MTF	Religare Broking Limited	NSDL	IN301774	19980827
Client Securities Under Margin Funding Account	Religare Broking Limited	NSDL	IN301774	19955272
		CDSL	12030200	00096548

The Client hereby authorises the broking division of Religare Broking Limited(i.e. Stock Broker/ Trading Member) to do the following acts:

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

Religare Broking Limited accepts the authority given by the Client at Delhi.

Authorized Signatory

(Signatory Name)

*the same may be signed physically against each purpose of DDPI. The same may also be eSigned.

In case of eSign, client shall be given an option for choosing the specific purpose(s) of DDPI

[DOWNLOAD CONSENT FORM \(CKYCR\)](#)

Religare Broking Limited
A-3/4/5, Club 125 (Tower-A),
Sector-125, Noida-201301 (U.P.)

I, S/o / D/o / W/o give my consent to download my KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my identity and address from the database of CKYCR Registry.

I understand that my KYC Record includes my KYC Records /Personal information such as my name, address, date of birth, PAN number etc.

Client Signature | 

Date | D | D | M | M | Y | Y | Y | Y |

Client Name _____

Client Code | | | | | | | | | | | |

KNOW YOUR CLIENT (KYC) / CENTRAL KYC REGISTRY APPLICATION FORM (For Individuals)**Religare Broking Limited**A-3 / 4 / 5, Club 125, (Tower-A)
Sector-125, Noida-201301 (U.P.)**Account Type:** ☐ Normal ☐ Minor ☐ Aadhar OTP Based E-KYC**Application Type*** ☐ New ☐ Update

CKYC Number _____

(Mandatory for KYC update request)

PHOTOGRAPHPlease affix your
recent passport
size photographSignature Across
Photograph**Please fill this form in ENGLISH and in BLOCK LETTERS****A. PERSONAL IDENTITY DETAILS**

1. Name of the Applicant _____
Maiden Name (if any) _____
2. Father's / Spouse Name _____
3. Mother Name _____
4. a) Gender ☐ Male ☐ Female ☐ Transgender
b) Marital Status ☐ Single ☐ Married c) Date of Birth DDMMYYYY
5. a) Nationality ☐ Indian ☐ Others Pls. specify.....
b) Residential Status ☐ Resident Individual ☐ Non Resident ☐ Foreign National ☐ Person of Indian Origin
6. a) PAN _____ b) Aadhaar Number, if any XXXXXXXXXX

B. ADDRESS & IDENTITY DETAILS

- Address Type ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified
1. Permanent Address _____
(For Non-Resident Applicant Mandatory to specify overseas address) _____
City / Town / Village _____ PIN Code _____
State _____ Country _____
2. Specify the proof of Identity & Address submitted ☐ Aadhaar Card ☐ Any other (please specify).....
3. Contact Tel. (Off.) with STD Code Tel. (Res.) with STD Code
Details Fax No. with STD Code Mobile No. _____
Email ID _____
4. Current Address (If different from above) _____
City / Town / Village _____ PIN Code _____
State _____ Country _____
5. Specify the proof of address submitted for Current Address _____

C. DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I am aware of other modes of KYC which are available and I have chosen Aadhaar based method voluntarily. My Aadhaar record can be used by KRA Registration Agency/Central KYC Registry only for the specific purpose of validating/maintaining / sharing my KYC record and as an audit evidence. I will have an option to request for deletion of my Aadhaar record.
- I hereby consent to receiving information from KRA Registration Agency/Central KYC Registry through SMS/Email on the above registered number/email address.
- I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.



Signature / Thumb Impression of Applicant

Date DDMMYYYY**ATTESTATION / FOR OFFICE USE ONLY****In person Verification (IPV) Details / KYC Verification Carried out by :**

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of Authorised Person _____

Name of the Organization: **Religare Broking Ltd.** Emp. Branch _____Date of IPV: DD / MM / YYYY

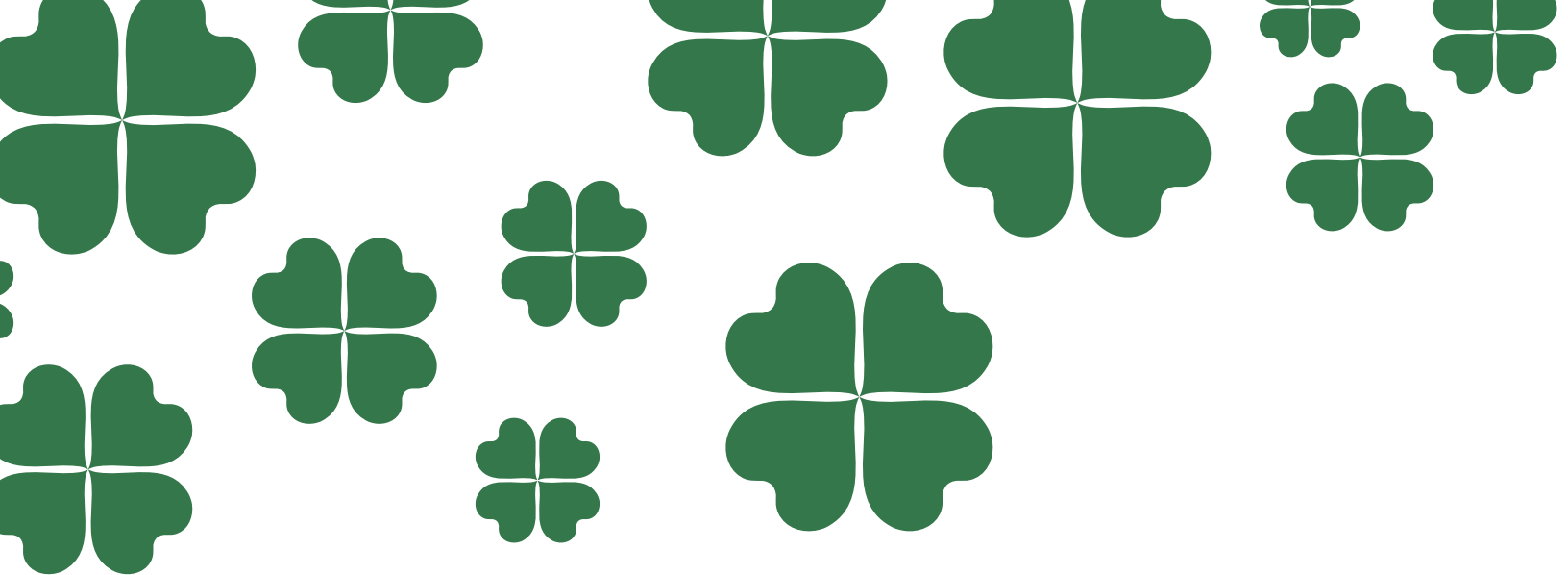
Signature of the person who has done the IPV

Method of receipt of Document: _____☐ Original Verified, Self Attested Documents & Certified copies receivedDate DDMMYYYY

Signature of the Authorised Signatory

Seal/Stamp of the Intermediary

Cover Back Inner



Equity | Commodity | Currency | Insurance | Investments

For more information,

1860-25-88888

wecare@religareonline.com

www.religareonline.com



ACKNOWLEDGMENT

Form No.

Received the application from Mr./Ms..... as the Sole, First holder alongwith and as the Second and Third holders respectively for opening Trading / Demat account alongwith Nomination Form. Your account will be opened after due verification by us. You can check the status of the application submitted by you on our website (www.religareonline.com) Your Client Id will be intimated to you once your account gets opened successfully. Please quote the DP ID & Client ID allotted to you (CM-BP-ID in case of Clearing Members) in all your future correspondence.

For Religare Broking Limited

Name of Relationship Manager

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

Mobile No. of Relationship Manager

+	9	1																	
---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Stamp and Sign

You may contact us at our

Customer Care No. **1860 25 88888** or Email to us at **wecare@religareonline.com**

P.S.: Please take this acknowledgement receipt from the RM/Branch who has contacted you.

*Trading account can not be opened in joint names.



Debit Mandate Form NACH / ECS / DIRECT DEBIT

UMRN

Date

DD	MM	YY	YY
----	----	----	----

Tick (✓)

<input checked="" type="checkbox"/>	CREATE
<input type="checkbox"/>	MODIFY
<input type="checkbox"/>	CANCEL

Sponsor Bank Code

ICIC0TREA00

Utility Code

ICIC00261000001992

I/We hereby authorize

Religare Broking Limited

to debit (tick✓)

SB/CA/CC/SB-NRE / SB-NRO /Other

Bank a/c number

with Bank

IFSC

or MICR

an amount of Rupees

₹

FREQUENCY ☐ Mthly ☐ Qtly ☐ H-Yrly ☐ Yrly ☒ As & when presentedDEBIT TYPE ☐ Fixed Amount ☒ Maximum Amount

Reference 1

DPID - I N 3 0 1 7 7 4 -

Phone No.

Reference 2

DP Charges

Email ID

I agree for the debit of Mandate processing charges by the Bank whom I am authorizing to debit my account as per latest Schedule of charges of the Bank.

PERIOD

From

DD	MM	YY	YY
----	----	----	----

To

DD	MM	YY	YY
----	----	----	----

Or

☒ Until Cancelled

Signature Primary Account holder

Signature of Account holder

Signature of Account holder

1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity / corporate to debit my account.
- I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / corporate or the bank where I have authorized the debit.