



# CLIENT REGISTRATION KIT



## ABHINANDAN STOCK BROKING PVT. LTD.

**Members : National Stock Exchange of India Ltd. / BSE Limited**  
**Depository Participants : Central Depository Services (India) Limited**

Regd. Office : CITY POINT, 95, Sarat Bose Road, 3rd Floor, Kolkata - 700 029

Phone : 4005-5430 ♦ E.mail : [info@abhinandangroup.com](mailto:info@abhinandangroup.com)

Website : [www.abhinandangroup.com](http://www.abhinandangroup.com) ♦ CIN : U65100WB2010PTC153196

Client Name : .....

Client Code : .....

Client ID : .....

Registration Date:.....

Reference : .....

# ACCOUNT OPENING KIT

**Name of Stock Broker / Trading Member :**  
**ABHINANDAN STOCK BROKING PVT. LTD.**

**SEBI Regn. No. and Date :** INZ000202134 Dt.21.09.2018

**Registered & Correspondence Office address :**  
CITY POINT, 95, Sarat Bose Road, 3rd Floor, Kolkata - 700 029  
Phone : 4005-5430, E.mail : [info@abhinandangroup.com](mailto:info@abhinandangroup.com)  
Website : [www.abhinandangroup.com](http://www.abhinandangroup.com)  
CIN : U65100WB2010PTC153196, GSTIN : 19AAICA8362N1ZZ

**Name of Clearing Member : GLOBE CAPITAL MARKET LIMITED**

**SEBI Regn. No. and Date :** INZ000177137 Dt.25.04.2018

**Registered & Correspondence Office address :**  
609, Ansal Bhawan, 16, K. G. Marg  
Connaught Place, New Delhi - 110 001  
Phone : (011) 3041-2400, Fax : (011) 2372-0880  
E.mail : [mail@globecapital.com](mailto:mail@globecapital.com), Website : [www.globecapital.com](http://www.globecapital.com)

**Compliance Officer Name, Phone No. & email ID :**  
Mr Aravind Kumar Prasad, 90070-20293, [akprasad@abhinandangroup.com](mailto:akprasad@abhinandangroup.com)

**CEO Name, Phone No. & email ID :**  
Mr Nikhil Jain, 98310-02596, [nikhil@abhinandangroup.com](mailto:nikhil@abhinandangroup.com)

For any grievance/dispute, please contact **ABHINANDAN STOCK BROKING PVT. LTD.** at the above address or email id : [complaints@abhinandangroup.com](mailto:complaints@abhinandangroup.com) and Phone : 4005-5430. In case not satisfied with the response, please contact the concerned exchange(s) at [ignse@nse.co.in](mailto:ignse@nse.co.in) and Phone No. (022) 2659-8190 for NSE, at [is@bseindia.com](mailto:is@bseindia.com) and Phone No. (022) 2272-8097 for BSE and at [complaints@cdslindia.com](mailto:complaints@cdslindia.com) and Phone No. 18002-25533 for CDSL.

You may also lodge your grievances with SEBI at <https://scores.sebi.gov.in/faqs>. For any queries, feedback or assistance, please contact SEBI Office on Toll Free Helpline at 1800 22 7575, 1800 266 7575.

## **Filing compliant on SCORES - Easy & Quick**

- a. Register on SCORES portal
- b. Mandatory details for filing complaints on SCORES
  - i. Name, PAN, Address, Mobile Number, E-mail ID
- c. Benefits:
  - i. Effective Communication
  - ii. Speedy redressal of the grievances

Please refer SCORES website link <https://scores.sebi.gov.in/scores/Welcome.html> and the FAQs available thereon.

If the investor / client is still not satisfied with the outcome, he / she / they can initiate dispute resolution through the ODR Portal. Visit <https://smartodr.in/login> for the Online Dispute Resolution Portal.

# ABHINANDAN STOCK BROKING PVT. LTD.

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## INSTRUCTIONS / CHECK LIST RELEVANT TO TRADING ACCOUNT

1. Additional documents in case of trading in derivatives segments :

- 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.

2. 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.

3. Demat master or recent holding statement issued by DP bearing name of the client.

4. For individuals :

- a. Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker / sub-broker's office.
- b. 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.

5. For non-individuals :

- a. Form need to be initialized by all the authorized signatories.
- b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company / firm / others and their specimen signatures.

**CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual**
**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.  
 B) Tick '✓' wherever applicable.  
 C) Please fill the form in English and in BLOCK letters.  
 D) Please fill the date in DD-MM-YYYY format.  
 E) For particular section update, please tick (✓) in the box section number and strike off the sections not required to be updated.
- F) Please read section wise detailed guidelines / instructions at the end.  
 G) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.  
 H) List of two character ISO 3166 country codes may be obtained from our office.  
 I) KYC number of applicant is mandatory for update application.  
 J) The 'OTP based E-KYC' check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode.


**For office use only**

(To be filled by financial institution)

Application Type\* ☐ New ☐ Update

KYC Number  (Mandatory for KYC update request)

Account Type\* ☐ Normal ☐ Minor ☐ Aadhaar OTP based E-KYC (in non-face to face mode)

**1. PERSONAL DETAILS\*** (Please refer instruction A at the end)

☐ Name\* (Same as ID proof)

Maiden Name

Father / Spouse Name

Mother Name

Date of Birth\*  DD  MM  YY  YY  YY

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

PAN\*  Form 60 furnished ☐

**2. PROOF OF IDENTITY AND ADDRESS\*** (Please refer instruction B at the end)

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

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

☐ PHOTO\*

**Address**

Line 1\*

Line 2

Line 3

District\*  Pin/Post Code\*  City / Town / Village\*  State/U.T Code\*  ISO 3166 Country Code\*

**3. CURRENT ADDRESS DETAILS** (Please refer instruction B at the end)

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

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

- ☐ A- Passport Number
- ☐ B-Voter ID Card
- ☐ C- Driving Licence
- ☐ D-NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar
- II ☐ E-KYC Authentication
- III ☐ Offline verification of Aadhaar
- IV ☐ Deemed Proof of Address - Document Type code
- V ☐ Self Declaration

**Address**

Line 1\*

Line 2

Line 3

District\*  Pin / Post Code\*  City / Town / Village\*  State/U.T Code\*  ISO 3166 Country Code\*

<input type="checkbox"/> <b>4. CONTACT DETAILS</b> (All communications will be sent to Mobile number/ Email-ID provided) (Please refer instruction C at the end)																																																																																																			
Tel. (Off)										<input type="text"/> — <input type="text"/>										Tel. (Res)										<input type="text"/> — <input type="text"/>										Mobile										<input type="text"/> — <input type="text"/>																																																	
Email ID										<input type="text"/>																																																																																									
<input type="checkbox"/> <b>5. REMARKS</b> (If any)																																																																																																			
<b>6. APPLICANT DECLARATION</b>																																																																																																			
<p>• 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.</p> <p>• I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.</p>																																																																																																			
Date :										<input type="text"/> <input type="text"/> — <input type="text"/> <input type="text"/> — <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>										Place:										<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																																																																					
<b>7. ATTESTATION / FOR OFFICE USE ONLY</b>																																																																																																			
Documents Received										<input type="checkbox"/> Certified Copies										<input type="checkbox"/> E-KYC data received from UIDAI										<input type="checkbox"/> Data received from Offline verification										<input type="checkbox"/> Digital KYC Process																																																											
										<input type="checkbox"/> Equivalent e-document										<input type="checkbox"/> Video Based KYC																																																																															
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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"/>										Name										<b>ABHINANDAN STOCK BROKING PRIVATE LIMITED</b>																																																																					
Emp. Name										<input type="text"/>										Code										<b>IN0493</b>																																																																					
Emp. Code										<input type="text"/>										<div style="border: 1px solid black; width: 100%; height: 100%;"></div>																																																																															
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Emp. Branch										<input type="text"/>																																																																																									
[Employee Signature]																																																		[Institution Stamp]																																																	

**A Clarification / Guidelines on filling ‘Personal Details’ section**

- 1 Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 One the following is mandatory : Mother’s name, Spouse’s name, Father’s name.

**B Clarification / Guidelines on filling ‘Current Address details’ section**

- 1 In case of deemed PoA such as utility bill, etc. or self declaration, the document need not be uploaded on CKYCR.
- 2 PoA to be submitted only if the submitted Pol does not have current address or address as per Pol is invalid or not in force.
- 3 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 4 In Section 2, one of I, II, and III is to be selected. In case of online E-KYC authentication, II is to be selected.
- 5 In Section 3, one of I, II, III and IV is to be selected. In case of online E-KYC authentication, II is to be selected.
- 6 List of documents for ‘Deemed Proof of Address’:

Document Code	Description
---------------	-------------

- |    |   |
|----|---|
| 01 | Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).   |
| 02 | Property or Municipal tax receipt.  |
| 03 | Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.   |
| 04 | 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. |

- 7 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- 8 “Equivalent e-document” means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 9 ‘Digital KYC process’ has to be carried out as stipulated in the PML Rules, 2005.
- 10 REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.

**C Clarification / Guidelines on filling ‘Contact details’ section**

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

**D Clarification / Guidelines on filling ‘Related Person details’ section**

- 1 Provide KYC number of related person, if available.

**E Clarification on Minor**

- 1 Guardian details are optional for minors above 10 years of age for opening of bank account only.
- 2 However, in case guardian details are available for minor above 10 years of age. the same (or CKYCR number of guardian) is to be uploaded.



**CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Legal Entity/ Other than Individuals**

**Important Instructions:**

- A) Fields marked with \*\*\* are mandatory fields.  
 B) Tick '✓' wherever applicable.  
 C) Please fill the date in DD-MM-YYYY format.  
 D) Please fill the form in English and in BLOCK letters.  
 E) KYC number of applicant is mandatory for update application.  
 F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.  
 G) List of two character ISO 3166 country codes is available at the end.  
 H) Please read section wise detailed guidelines / instructions at the end.  
 I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.



**For office use only**

Application Type\* ☐ New ☐ Update

(To be filled by financial institution) KYC Number

(Mandatory for KYC update request)

**1. ENTITY DETAILS\* (Please refer instruction A at the end)**

☐ Name\*

Entity Constitution Type\*

☐ Others (Specify)

(Please refer instruction B at the end)

Date of Incorporation / Formation\*

Date of Commencement of Business

Place of Incorporation / Formation\*

Country of Incorporation / Formation\*

PAN \*

☐ Form 60 furnished

TIN / GST Registration Number

**2. PROOF OF IDENTITY (PoI)\* (Please refer instruction B at the end)**

☐ Officially valid document(s) in respect of person authorised to transact

☐ Certificate of Incorporation / Formation

☐ Registration Certificate

Regn Certificate No.

☐ Memorandum and Articles of Association

☐ Partnership Deed

☐ Trust Deed

☐ Resolution of Board / Managing Committee

☐ Power of attorney granted to its manager, officers or employees to transact on its behalf

☐ Activity Proof - 1 (For Sole Proprietorship Only)

☐ Activity Proof - 2 (For Sole Proprietorship Only)

**3. ADDRESS\* (Please see instruction C at the end)**

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

Proof of Address\*

☐ Certificate of Incorporation / Formation

☐ Registration Certificate

☐ Other Document

Line 1\*

Line 2

Line 3

District\*

PIN / Post Code\*

State / U.T Code\*

ISO 3166 Country Code\*

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

Line 1\*

Line 2

Line 3

District\*

PIN / Post Code\*

State / U.T Code\*

ISO 3166 Country Code\*

**4. CONTACT DETAILS (All communications will be sent to Mobile number/ Email-ID provided\* may be used) (Please refer instruction D at the end)**

Tel. (Off)

FAX

Mobile

Email ID

Mobile

Email ID

**5. NUMBER OF RELATED PERSONS**

(Please refer instruction E at the end)





## CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person

## Important Instructions:

- A) Fields marked with "\*" are mandatory fields.  
 B) Tick '✓' wherever applicable.  
 C) Please fill the date in DD-MM-YYYY format.  
 D) Please fill the form in English and in BLOCK letters.  
 E) KYC number of applicant is mandatory for update application.

- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.  
 G) List of two character ISO 3166 country codes is available at the end.  
 H) Please read section wise detailed guidelines / instructions at the end.  
 I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.



For office use only

Application Type\*

☐ New ☐ Update ☐ Delete

(To be filled by financial institution) KYC Number

(Mandatory for KYC update and delete request)

## 1. DETAILS OF RELATED PERSON\* (Please refer instruction E at the end)

- ☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details

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

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

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

## 1.1 PERSONAL DETAILS (Please refer instruction E at the end)

	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 (ISO 3166 Country Code <input type="text"/> )			
PAN*	<input type="text"/>	<input type="checkbox"/> Form 60 furnished		

## 1.2 PROOF OF IDENTITY AND ADDRESS\* (Please refer instruction E at the end)

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

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

☐ PHOTO\*

## Address

Line 1*	<input type="text"/>
Line 2	<input type="text"/>
Line 3	<input type="text"/>
District*	<input type="text"/>
Pin / Post Code*	<input type="text"/>
State / U.T Code*	<input type="text"/>
City / Town / Village*	<input type="text"/>
ISO 3166 Country Code*	<input type="text"/>

☐ 1.3. CURRENT ADDRESS DETAILS (Please refer instruction E and the end)☐ Same as above mentioned address (In such cases address details as below need not be provided)

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

- ☐ A- Passport Number   
☐ B- Voter ID Card   
☐ C- Driving Licence   
☐ D- NREGA Job Card   
☐ E- National Population Register Letter   
☐ F - Proof of Possession of Aadhaar   
 II ☐ E-KYC Authentication   
 II ☐ Offline verification of Aadhaar   
 IV ☐ Deemed PoA  
 V ☐ Self Declaration

**Address**

Line 1*																											
Line 2																											
Line 3																											
District*							Pin / Post Code*							State / U.T Code*			City / Town / Village*							ISO 3166 Country Code*			

**1. 4 CONTACT DETAILS** (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

Tel. (Off)							Tel. (Res)							Mobile													
Email ID																											

**2. APPLICANT DECLARATION**

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : DD - MM - YYYY

Place:

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

**Documents Received** ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification  
☐ Digital KYC process ☐ Equivalent e-document

**IPV and KYC VERIFICATION CARRIED OUT BY**

Date	DD - MM - YYYY																										
Emp. Name																											
Emp. Code																											
Emp. Designation																											
Emp. Branch																											

**INSTITUTION DETAILS**

Name **ABHINANDAN STOCK BROKING PRIVATE LIMITED**  
 Code **IN0493**

[Employee Signature]

[Institution Stamp]

**CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person****Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.  
 B) Tick '✓' wherever applicable.  
 C) Please fill the date in DD-MM-YYYY format.  
 D) Please fill the form in English and in BLOCK letters.  
 E) KYC number of applicant is mandatory for update application.

- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.  
 G) List of two character ISO 3166 country codes is available at the end.  
 H) Please read section wise detailed guidelines / instructions at the end.  
 I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.



For office use only

Application Type\*

☐ New
 ☐ Update
 ☐ Delete

(To be filled by financial institution) KYC Number

(Mandatory for KYC update and delete request)

**1. DETAILS OF RELATED PERSON\*** (Please refer instruction E at the end)

- ☐ Addition of Related Person
 ☐ Deletion of Related Person
 ☐ Update Related Person Details

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

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

 DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)
**1.1 PERSONAL DETAILS** (Please refer instruction E at the end)

	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 (ISO 3166 Country Code <input type="text"/> )		
PAN*	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Form 60 furnished	

**1.2 PROOF OF IDENTITY AND ADDRESS\*** (Please refer instruction E at the end)

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

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

☐ PHOTO\***Address**

Line 1*	<input type="text"/>
Line 2	<input type="text"/>
Line 3	<input type="text"/>
District*	<input type="text"/>
Pin / Post Code*	<input type="text"/>
State / U.T Code*	<input type="text"/>
City / Town / Village*	<input type="text"/>
ISO 3166 Country Code*	<input type="text"/>

**1.3. CURRENT ADDRESS DETAILS** (Please refer instruction E and the end)
☐ Same as above mentioned address (In such cases address details as below need not be provided)

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

- ☐ A- Passport Number   
☐ B- Voter ID Card   
☐ C- Driving Licence   
☐ D- NREGA Job Card   
☐ E- National Population Register Letter   
☐ F - Proof of Possession of Aadhaar   
 II ☐ E-KYC Authentication   
 II ☐ Offline verification of Aadhaar   
 IV ☐ Deemed PoA  
 V ☐ Self Declaration

**Address**

Line 1*																											
Line 2																											
Line 3																											
District*							Pin / Post Code*							State / U.T Code*			City / Town / Village*							ISO 3166 Country Code*			

**1. 4 CONTACT DETAILS** (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

Tel. (Off)							—							Tel. (Res)							—							Mobile			—						
Email ID																																					

**2. APPLICANT DECLARATION**

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : DD — MM — YYYY

Place:

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

**Documents Received** ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification  
☐ Digital KYC process ☐ Equivalent e-document

**IPV and KYC VERIFICATION CARRIED OUT BY**

Date	DD — MM — YYYY
Emp. Name	
Emp. Code	
Emp. Designation	
Emp. Branch	

**INSTITUTION DETAILS**

Name	ABHINANDAN STOCK BROKING PRIVATE LIMITED
Code	IN0493

[Employee Signature]

[Institution Stamp]



# **CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Legal Entity / Other than Individuals KYC Application Form**

## **A Clarification / Guidelines for filing Entity Details section**

### **1 Entity Constitution Type**

- |                             |                                      |   |
|-----------------------------|--------------------------------------|---|
| A - Sole Proprietorship     | G - Association of Persons (AOP) /   | L - Public Sector Banks                           |
| B - Partnership Firm        | Body of Individuals (BOI)            | M - Central/State Government Department or Agency |
| C - HUF                     | H - Trust                            | N - Section 8 Companies (Companies Act, 2013)     |
| D - Private Limited Company | I - Liquidator                       | O - Artificial Juridical Person                   |
| E - Public Limited Company  | J - Limited Liability Partnership    | P - International Organisation or Agency /        |
| F - Society                 | K - Artificial Liability Partnership | Foreign Embassy or Consular Office etc.           |
|                             |                                      | Q - Not Categorized                               |
|                             |                                      | R - Others  |
|                             |                                      | S - Foreign Portfolio Investors                   |

- 2 In case of companies and partnerships, PAN of the entity is mandatory. In case of other entities, FORM 60 may be obtained if PAN is not available.

## **B Clarification / Guidelines for filling 'Proof of Identity [Pol]' section**

- 1 Activity Proof -1 and Activity Proof - 2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
- 2 Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
- 3 Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
- 4 'Equivalent e-document means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 5 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
- 6 KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.

## **C Clarification / Guidelines for filling 'Proof of Address [PoA]' section**

- 1 State / U.T. Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 2 Certified copy of document or equivalent e-document to be submitted.

## **D Clarification / Guidelines for filling 'Contact Details' section**

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

## **E Clarification / Guidelines for filling 'Related Person Details' section**

- 1 Personal Details
  - The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Proof of Address [PoA]
  - PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
  - State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
  - In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR.
  - REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.
- 3 If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.
- 4 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.

## **F Provision for capturing signature of multiple authorised persons is to be made by the RE.**

<b>Know Your Client (KYC)</b> <b>Application Form (For Individuals Only)</b>		<b>ASB</b> <small>Invest &amp; grow</small>	
<small>Please fill the form in ENGLISH and in BLOCK letters</small> <small>Fields marked * are mandatory</small> <small>Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also</small>		Application Number: <input style="width: 150px;" type="text"/> KYC No. : <input style="width: 100px;" type="text"/> (Mandatory for KYC update request) Application Type*: <input type="checkbox"/> New KYC <input type="checkbox"/> Modification KYC	
<b>KYC Mode*:</b> Please Tick (✓) <input type="checkbox"/> Normal <input type="checkbox"/> EKYC OTP <input type="checkbox"/> EKYC Biometric <input type="checkbox"/> Online KYC <input type="checkbox"/> Offline EKYC <input type="checkbox"/> Digilocker			
<b>1. Identity Details</b> (please refer guidelines overleaf)			
PAN* <input style="width: 150px;" type="text"/>		Please enclose a duly attested copy of your PAN Card <input type="checkbox"/> Form 60 furnished	
Name* (same as ID proof) <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
Maiden Name* (if any) <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
Fathers/Spouse's Name* <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
Date of Birth* <input style="width: 150px;" type="text"/>			
Gender* <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender			
Marital Status* <input type="checkbox"/> Single <input type="checkbox"/> Married			
Nationality* <input type="checkbox"/> Indian <input type="checkbox"/> Other <input style="width: 100px;" type="text"/>			
Residential Status* <input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin+			
<small>Please Tick (✓)</small>		<div style="border: 1px solid black; width: 150px; height: 100px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">             Recent passport size Applicant Photo           </div> <small>Cross Signature across photograph</small>	
<small>(Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC. Select NRI or Foreign National based on Nationality of the individual)</small>			
<b>Proof of Identity (POI) submitted for PAN exempted cases</b> (Please tick)			
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> A — Aadhaar Card           <input type="checkbox"/> B — Passport Number           <input type="checkbox"/> C — Voter ID Card           <input type="checkbox"/> D — Driving License           <input type="checkbox"/> E — NREGA Job Card           <input type="checkbox"/> F — NPR           <input type="checkbox"/> Z — Others         </div> <div>           XXXX XXXX _ _ _ _ _  <input style="width: 150px;" type="text"/>  <input style="width: 150px;" type="text"/>  <input style="width: 150px;" type="text"/>  <input style="width: 150px;" type="text"/>  <input style="width: 150px;" type="text"/>  <input style="width: 150px;" type="text"/> (any document notified by Central Government)         </div> <div>           (Expiry Date) <input style="width: 100px;" type="text"/>            (Expiry Date) <input style="width: 100px;" type="text"/> </div> </div>			
Identification Number <input style="width: 150px;" type="text"/>			
<b>2. Address Details*</b> (please refer guidelines overleaf)			
<b>A. Correspondence/ Local Address*</b>			
Line 1* <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
Line 2 <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
Line3 <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
City/Town/Village* <input style="width: 150px;" type="text"/> District* <input style="width: 150px;" type="text"/> Pin Code* <input style="width: 100px;" type="text"/>			
State* <input style="width: 150px;" type="text"/> Country* <input style="width: 150px;" type="text"/>			
Address Type* <input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified			
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>		<div style="background-color: #d3d3d3; padding: 5px; text-align: center;">Applicant Signature</div> <div style="border: 1px solid black; width: 100%; height: 80px;"></div>	



**B. Permanent residence address of applicant, if different from above A / Overseas Address\* (Mandatory for NRI Applicant)**

Line 1\* \_\_\_\_\_  
Line 2 \_\_\_\_\_  
Line 3 \_\_\_\_\_  
City/  
Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_  
State\* \_\_\_\_\_ Country\* \_\_\_\_\_  
Address Type\* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

**Proof of Address\*** (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

☐ A — Aadhaar Card XXXX XXXX \_ \_ \_ \_ \_  
☐ B — Passport Number \_\_\_\_\_ (Expiry Date) \_\_\_\_\_  
☐ C — Voter ID Card \_\_\_\_\_  
☐ D — Driving License \_\_\_\_\_ (Expiry Date) \_\_\_\_\_  
☐ E — NREGA Job Card \_\_\_\_\_  
☐ F — NPR Letter \_\_\_\_\_  
☐ Z—Others \_\_\_\_\_ (any document notified by Central Government)  
Identification Number \_\_\_\_\_

**3. Contact Details (in CAPITAL)**

Email ID\* \_\_\_\_\_  
Mobile No. \* \_\_\_\_\_  
Tel (Off) \_\_\_\_\_ Tel (Res) \_\_\_\_\_

**4. Applicant Declaration**

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

I/We hereby consent to receiving information from KRA and / or CKYC Registry through SMS/Email on the above registered number/Email address.  
I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

DATE: \_\_\_\_\_ (DDMM-YYYY)

PLACE: \_\_\_\_\_

Applicant Signature

**5. For Office Use Only**

Person Verification (IPV) & KYC Verification carried out by*	Intermediary Details*
<p>IPV Date _____</p> <p>Emp. Name _____</p> <p>Emp. Code _____</p> <p>Emp. Designation _____</p>	<p><input type="checkbox"/> Self certified document copies received (OVD)</p> <p><input type="checkbox"/> True Copies of documents received (Attested)</p> <p>AMC / Intermediary Name :</p> <p><b>ABHINANDAN STOCK BROKING PVT. LTD.</b></p>
Employee Signature and Stamp	Institution Name and Stamp

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

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked \* are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: KYC No. :  (Mandatory for KYC update request)Application Type\*: ☐ New KYC ☐ Modification KYC**1. Entity Details** (please refer guidelines)PAN\* 

Please enclose a duly attested copy of your PAN Card

☐ Form 60 furnishedTIN / GST Regn. No. Name\* (same as ID proof) Entity Constitution Type  Others (Specify)  (Please refer Instruction G at the end)Date of Incorporation\*  Place of Incorporation\* Date of Commencement\*  Registration Number\* 

Entity Type\*

Please Tick (✓)

☐ Private Ltd. Co.☐ Public Ltd. Co.☐ Body Corporate☐ Partnership☐ Trust/Charity/NGO☐ HUF☐ FPI Category I☐ FPI Category II☐ AOP☐ Bank☐ Government Body☐ Defence Establishment☐ Body of Individuals☐ Society☐ LLP☐ Non-Government Organization☐ Others **2. Proof of Identity\*** (please refer the guidelines)☐ Officially Valid Document(s) in respect of person authorized to transact☐ Certificate of Incorporation/Formation ☐ Registration Certificate ☐ Memorandum of Articles and Association☐ Partnership Deed☐ Trust Deed☐ Board Resolution☐ Power of attorney granted to its manager, office, employees to transact on its behalf☐ Activity Proof –1\* (For Sole Proprietorship Only)☐ Activity Proof –2\* (For Sole Proprietorship Only)**3. Address Details\*** (please refer the guidelines)**A. Registered Address\***Line 1\* Line 2 Line3 City/Town/Village\*  District\*  Pin Code\* State\*  Country\* **B. Correspondence/Local Address in India** (if different from above)\*Line 1\* Line 2 Line3 City/Town/Village\*  District\*  Pin Code\* State\*  Country\* 

Applicant Signature

**Proof of Address\*** (attested copy of any one POA to be submitted—<sup>#</sup>Not more than 3 months old)

<input type="checkbox"/> Certificate of Incorporation/Formation	<input type="checkbox"/> Registration Certificate	<input type="checkbox"/> Other document _____
<input type="checkbox"/> Latest Telephone Bill <sup>#</sup> (Landline only)	<input type="checkbox"/> Latest Electricity Bill <sup>#</sup>	<input type="checkbox"/> Latest Bank Account Statement <sup>#</sup>
<input type="checkbox"/> Registered Lease/ Sale Agreement of Office Premises	Validity/Expiry Date of POA (Expiry Date) ____	
<input type="checkbox"/> Any other proof of address document (as listed overleaf) _____		

**4. Contact Details**

Email ID _____	Mobile No. _____
Email ID _____	Mobile No. _____
Tel (off) _____	Fax _____

**5. Annexures Submitted**Number of Related Persons - **6. Remarks / Additional Information****7. Applicant Declaration**

I hereby declare that the details furnished above are true and correct to the best of my/our 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/We are aware that I/We may be held liable for it.

I/We hereby consent to receiving information from KRA and/or CKYC Registry through SMS/Email on the above registered number/Email address

DATE: \_\_\_\_ (DD-MM-YYYY)

PLACE: \_\_\_\_\_

Applicant Signature

**8. For Office Use Only**

In-Person Verification (IPV) &amp; KYC Verification carried out by\*

Intermediary Details\*

KYC Date \_\_\_\_\_

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

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

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

☐ Self certified document copies received (Originals Verified)☐ True Copies of documents received (Attested)

AMC / Intermediary Name OR Code:

**ABHINANDAN STOCK BROKING PVT. LTD.**

Employee Signature and Stamp

Employee Signature and Stamp

**Know Your Client (KYC)****Annexure (For Non- Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked \* are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: KYC No. :  (Mandatory for KYC update request)Application Type\*: ☐ New KYC ☐ Modification KYC**1. Identity Details of Related Person (please refer guidelines overleaf)**PAN\* 

Please enclose a duly attested copy of your PAN Card

☐ Form 60 furnishedName\* (same as ID proof) Maiden Name\* (if any) Fathers/Spouse's Name\* Date of Birth\* 

Gender\*

☐ Male☐ Female☐ Transgender

Nationality\*

☐ Indian☐ Other 

Applicant Photo

Related Person Type\*

☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointed Official Proprietor☐ Beneficiary ☐ Authorized Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder☐ Others  (please specify)DIN:  (mandatory if the related person is Director)

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

☐ A — Aadhaar Card XXXX XXXX ☐ B — Passport Number (Expiry Date) ☐ C — Voter ID Card ☐ D — Driving License (Expiry Date) ☐ E — NREGA Job Card ☐ F — NPR ☐ Z — Others 

(any document notified by Central Government)

Identification Number **2. Address Details\* (please refer guidelines overleaf)****A. Correspondence/ Local Address\***Line 1\* Line 2 Line 3 City/Town/Village\*  District\*  Pin Code\* State\*  Country\* Address Type\* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Applicant Signature

<b>B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)</b>	
Line 1* _____	
Line 2 _____	
Line 3 _____	
City/Town/Village* _____	District* _____ Pin Code* _____
State* _____	Country* _____
Address Type* <input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified	
<b>Proof of Address*</b> (attested copy of any 1 POA for correspondence and permanent address each to be submitted)	
<input type="checkbox"/> A — Aadhaar Card      XXXX XXXX _____	
<input type="checkbox"/> B — Passport Number      _____	(Expiry Date)    ____    ____    ____
<input type="checkbox"/> C — Voter ID Card      _____	
<input type="checkbox"/> D — Driving License      _____	(Expiry Date)    ____    ____    ____
<input type="checkbox"/> E — NREGA Job Card      _____	
<input type="checkbox"/> F — NPR Letter      _____	
<input type="checkbox"/> Z—Others      _____	(any document notified by Central Government)
Identification Number    _____	
<b>3. Contact Details</b>	
Email ID    _____	
Mobile No.    _____	
Tel (Off)    _____	Tel (Res)    _____
<b>4. Applicant Declaration</b>	
I hereby declare that the details furnished above are true and correct to the best of my/our 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/We are aware that I/We may be held liable for it.  I/We hereby consent to receiving information from KRA and/or CKYC Registry through SMS/Email on the above registered number/Email address  DATE: ____ ____ ____ ____ (DDMM-YYYY) PLACE: _____	Applicant Signature
<b>5. For Office Use Only</b>	
In-Person Verification (IPV) & KYC Verification carried out by*	Intermediary Details*
KYC Date    ____    ____    ____ Emp. Name    _____ Emp. Code    _____ Emp. Designation    _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested)  <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">ABHINANDAN STOCK BROKING PVT. LTD.</div>
Employee Signature and Stamp	Institution Name and Stamp

**Know Your Client (KYC)****Annexure (For Non- Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked \* are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: KYC No. :  (Mandatory for KYC update request)Application Type\*: ☐ New KYC ☐ Modification KYC**1. Identity Details of Related Person (please refer guidelines overleaf)**PAN\*  Please enclose a duly attested copy of your PAN Card ☐ Form 60 furnishedName\* (same as ID proof) Maiden Name\* (if any) Fathers/Spouse's Name\* Date of Birth\* Gender\* ☐ Male ☐ Female ☐ TransgenderNationality\* ☐ Indian ☐ Other 

Related Person Type\*

☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointed Official Proprietor☐ Beneficiary ☐ Authorized Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder☐ Others  (please specify) DIN:  (mandatory if the related person is Director)

Applicant Photo

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

☐ A — Aadhaar Card XXXX XXXX ☐ B — Passport Number (Expiry Date) ☐ C — Voter ID Card ☐ D — Driving License (Expiry Date) ☐ E — NREGA Job Card ☐ F — NPR ☐ Z — Others 

(any document notified by Central Government)

Identification Number **2. Address Details\* (please refer guidelines overleaf)****A. Correspondence/ Local Address\***Line 1\* Line 2 Line 3 City/Town/Village\*  District\*  Pin Code\* State\*  Country\* Address Type\* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Applicant Signature

<b>B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)</b>	
Line 1* _____	
Line 2 _____	
Line3 _____	
City/Town/Village* _____	District* _____ Pin Code* _____
State* _____	Country* _____
Address Type* <input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified	
<b>Proof of Address*</b> (attested copy of any 1 POA for correspondence and permanent address each to be submitted)	
<input type="checkbox"/> A — Aadhaar Card                      XXXX XXXX _____ <input type="checkbox"/> B — Passport Number                      _____ (Expiry Date)    ____    ____    ____ <input type="checkbox"/> C — Voter ID Card                      _____ (Expiry Date)    ____    ____    ____ <input type="checkbox"/> D —Driving License                      _____ <input type="checkbox"/> E —NREGA Job Card                      _____ <input type="checkbox"/> F — NPR Letter                      _____ <input type="checkbox"/> Z—Others                      _____ (any document notified by Central Government) <div style="margin-left: 40px;">Identification Number    _____</div>	
<b>3. Contact Details</b>	
Email ID    _____	
Mobile No.    _____	
Tel (Off)    _____	Tel (Res)    _____
<b>4. Applicant Declaration</b>	
<p>I hereby declare that the details furnished above are true and correct to the best of my/our 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/We are aware that I/We may be held liable for it.</p> <p>I/We hereby consent to receiving information from KRA and/or CKYC Registry through SMS/Email on the above registered number/Email address</p> <p>DATE: ____ ____ ____ ____ (DDMM-YYYY)</p> <p>PLACE: _____</p>	<div style="text-align: center; border-bottom: 1px solid black; margin-bottom: 10px;">Applicant Signature</div> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
<b>5. For Office Use Only</b>	
In-Person Verification (IPV) & KYC Verification carried out by*	Intermediary Details*
KYC Date    ____    ____    ____ Emp. Name    _____ Emp. Code    _____ Emp. Designation    _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) <div style="border: 1px solid black; padding: 5px; text-align: center; margin-top: 10px;"><b>ABHINANDAN STOCK BROKING PVT. LTD.</b></div>
Employee Signature and Stamp	Institution Name and Stamp



## **Instructions/Guidelines for filling Individual / Non-Individual KYC Application Form**

### **A. General Instructions:**

1. Self-attestation of documents is mandatory.
2. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per below list mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent addresses 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/ PIOCard / OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board / Passport of Minor/Birth Certificate must be provided.
11. Politically exposed persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country e.g., Head of State or of Government, senior politician, senior government/judiciary/military officer, senior executive of state owned corporation, important political party official, etc.

### **B. Proof of Identity (POI):**

1. PAN card with photograph is mandatory for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License / Letter issued by NPR / NREGA job card
3. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
4. Mention identification / reference number if 'Z - Others (any document notified by the central government)' is ticked.
5. Others - Identity card with applicant's photograph issued by any of the following: Central / State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

### **C. Proof of Address (POA):**

1. PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
2. Others includes - Utility bill which is not more than 3 months old of any service provider (electricity, landline telephone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India
3. Identity card/document with address issued by any of the following: Central / State Government Departments, Statutory / Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members.
4. Self declaration of High courts / Supreme court judges, giving the new address in respect of their own accounts.
5. For FII/Sub account, Power of attorney given by FII/Sub account to the custodians (which are duly notarized and/or apostilled or consularized) that gives registered address should be taken.
6. Proof of address in name of spouse may be accepted.
7. Registered lease or Sale agreement / Flat maintenance bill / Insurance copy / Ration card / Latest Property tax.
8. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License / Letter issued by NPR / NREGA job card.

### **D. Exemptions/Clarifications to PAN (\*Sufficient documentary evidence in support of such claims to be collected)**

1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
3. Investors residing in the state of Sikkim.

4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
5. In case of institutional clients, namely FILs, MFs, VCFs, FVCIs, Scheduled commercial bank, Multilateral and Bilateral development financial institutions, State Industrial development corporations, insurance companies registered with IRDA and public financial institutions as defined under section 4A of the Company Act 1956, custodians shall verify the PAN card details with the original PANs and provide duly certified copies of such verified PAN details to the intermediary.

#### **E. List of people authorized to attest the documents:**

1. Authorized officials of Asset Management Companies (AMCs).
2. Authorized officials of Registrar & Transfer Agent (RTA) acting on behalf of the AMC.
3. KYC compliant mutual fund distributors affiliated to Association of Mutual Funds (AMFI) and have undergone the process of 'Know Your Distributor (KYD)'.
4. Notary Public, Gazette Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy / Consulate General in the country where the client resides are permitted to attest the documents.

#### **F. Online Mode Processing of KYC**

##### **1. EKYC BIOMETRIC**

- Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
- The documents should be e-signed.
- Applicant details are verified using UIDAI Biometric details.
- Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
- Intermediary attestation on documents is exempted.

##### **2. EKYC OTP**

- Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
- The documents should be e-signed.
- Applicant details are verified using UIDAI details using OTP.
- Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
- Intermediary attestation on documents is exempted.

##### **3. ONLINE KYC**

- Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
- The documents should be e-signed.
- Virtual In Person Verification (VIPV) is mandatory as per SEBI guidelines.
- Intermediary attestation on documents (OSV) is exempted.

##### **4. OFFLINE EKYC**

- Applicant may directly upload their document (PAN copy) as scanned images on intermediary's portal.
- The documents should be e-signed.
- Digital KYC performed through Offline Aadhaar e-KYC. OVD sourced from Offline Aadhaar e-KYC.
- Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.

##### **5. DIGILOCKER**

- Digital KYC performed through the documents (OVD) sourced from Digilocker.
- Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
- Intermediary attestation on documents is exempted.

#### **G. Entity Constitution Type**

A - Sole Proprietorship	G - Association of Persons (AOP) /	M - Central/State Government Department or Agency
B - Partnership Firm	Body of Individuals (BOI)	N - Section 8 Companies (Companies Act, 2013)
C - HUF	H - Trust	O - Artificial Juridical Person
D - Private Limited Company	I - Liquidator	P - International Organisation or Agency /
E - Public Limited Company	J - Limited Liability Partnership	Foreign Embassy or Consular Office etc.
F - Society	K - Artificial Liability Partnership	Q - Not Categorized
	L - Public Sector Banks	R - Others
		S - Foreign Portfolio Investors

Type of Entity	Additional Documents Required over and above PAN, POI and POA
Corporate	<ul style="list-style-type: none"> <li>• Copy of Balance Sheet for the last to financial years (to be submitted every year).</li> <li>• Copy of latest share-holding pattern including the 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 submitter every year).</li> <li>• Photograph, POI, POA, PAN and DIN number of the whole time Director / 2 directors in charge of day to day operations.</li> <li>• Photograph, POI, POA, PAN of individual promoters holding control—either directly or indirectly.</li> <li>• Copy of Memorandum and Articles of Association and Certificate of Incorporation.</li> <li>• Copy of Board Resolution for Investment in security markets.</li> <li>• Authorized signatories list with specimen signatures.</li> <li>• Shareholding pattern.</li> </ul>
Partnership Firm	<ul style="list-style-type: none"> <li>• Copy of Balance Sheet for the last to financial years (to be submitted every year).</li> <li>• Certificate of Registration (for registered partnership firms only).</li> <li>• Copy of Partnership Deed.</li> <li>• Authorized signatories list with specimen signatures.</li> <li>• Photograph, POI, POA, PAN of Partners.</li> <li>• Shareholding pattern.</li> </ul>
Trust	<ul style="list-style-type: none"> <li>• Copy of Balance Sheet for the last to financial years (to be submitted every year).</li> <li>• Certificate of Registration (for registered Trusts only).</li> <li>• Copy of Trust Deed.</li> <li>• List of Trustees certified by Managing Trustees / CA</li> <li>• Photograph, POI, POA, PAN of Trustees.</li> </ul>
HUF	<ul style="list-style-type: none"> <li>• PAN of HUF</li> <li>• Deed of Declaration of HUF or List of Co-Parceners.</li> <li>• Bank Passbook / Bank statement in the name of HUF.</li> <li>• Photograph, POI, POA, PAN of KARTA.</li> </ul>
Banks/Institutional Investors	<ul style="list-style-type: none"> <li>• Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years</li> <li>• Authorized signatories list with specimen signatures.</li> </ul>
Unincorporated Association or a Body of Individuals	<ul style="list-style-type: none"> <li>• Proof of existence or Constitution document.</li> <li>• Resolution of Managing Body and power of Attorney granted to transact business on its behalf.</li> </ul>
Army/Government Bodies	<ul style="list-style-type: none"> <li>• Copy of Constitution/Registration or Annual report / Balance Sheet for the last 2 financial years.</li> <li>• Authorized signatories list with specimen signatures.</li> </ul>
Army/Government Bodies	<ul style="list-style-type: none"> <li>• Self certification on letterhead.</li> <li>• Authorized signatories list with specimen signatures.</li> </ul>
Registered Society	<ul style="list-style-type: none"> <li>• Copy of Registration Certificate under Society Registration Act.</li> <li>• List of managing committee members.</li> <li>• Committee Resolution for persons authorized to act as authorised signatories with specimen signatures.</li> <li>• True copy of society rules and by-laws certified by Chairman/Secretary.</li> </ul>
FPI Category I	<ul style="list-style-type: none"> <li>• FPI Certificate</li> <li>• Constitution Documents</li> <li>• Copy of Board Resolution (optional)</li> <li>• Shareholding pattern and Ultimate Beneficiary Owners List (UBO)</li> <li>• Authorized signatories list with specimen signatures.</li> </ul>
FPI Category II	<ul style="list-style-type: none"> <li>• FPI Certificate</li> <li>• Constitution Documents</li> <li>• Copy of Board Resolution</li> <li>• Shareholding pattern and Ultimate Beneficiary Owners List (UBO) with UBO proof of identity</li> <li>• Authorized signatories list with specimen signatures.</li> </ul>

# ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT (FOR INDIVIDUALS)



## ABHINANDAN STOCK BROKING PVT. LTD.

Regd. Office : 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata – 700 029

Phone : +91 33 4005-5430, E.mail : info@abhinandangroup.com

Website : www.abhinandangroup.com, CIN : U65100WB2010PTC153196

**DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016**

(To be filled by the Depository Participant)

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

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

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

Holders Details												
<b>Sole/ First Holder's Name</b>							<b>PAN</b>					
							<b>UID</b>					
							<b>UCC</b>					
	<b>Exchange Name &amp; ID</b>											
<b>Second Holder's Name</b>							<b>PAN</b>					
							<b>UID</b>					
<b>Third Holder's Name</b>							<b>PAN</b>					
							<b>UID</b>					
<b>Name*</b>												
<p>* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.</p>												
Type of Account (Please tick whichever is applicable)												
Status	Sub-Status											
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual Margin Trading A/C (MANTRA)				<input type="checkbox"/> Individual-Director <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Minor <input type="checkbox"/> Others (Specify)_____							
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI - Depository Receipts				<input type="checkbox"/> NRI Non - Repatriable <input type="checkbox"/> NRI Non - Repatriable Promoter <input type="checkbox"/> Others (Specify)_____							
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository Receipts <input type="checkbox"/> Others (Specify)___											

Details of Guardian (in case the account holder is minor) - Please fill separate KYC for Guardian			
Guardian's Name		PAN	
Relationship with the applicant		UID	
I/We authorise you to receive credits automatically into my/our account		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Account to be operated through Demat Debit and Pledge Instruction (DDPI)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I/We wish to receive the DIS Booklet with Account Opening		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I / We would like to authorise the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly		
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID, as mentioned in KYC Form		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I/ We would like to share the email ID with the RTA		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I / We would like to receive the Annual Report		<input type="checkbox"/> Physical <input type="checkbox"/> Electronic	
(Tick the applicable box. If not marked the default option would be in Physical)			
Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository Participant (Tick any one)			
		<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form	
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	
For Joint Accounts, communication to be sent to		<input type="checkbox"/> First Holder <input type="checkbox"/> All Joint Account Holders	
<b>Mode of Operations for Joint Accounts</b>		<input type="checkbox"/> Jointly <input type="checkbox"/> Anyone of the holder or survivor(s)	
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.			
<b>BSDA Details</b>	(a) I/We have read and understood the Securities and Exchange Board of India's guidelines for facility for a BSDA. (b) 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. (c) 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. (d) 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.		

# ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT (FOR NON-INDIVIDUALS)



## ABHINANDAN STOCK BROKING PVT. LTD.

Regd. Office : 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata – 700 029

Phone : +91 33 4005-5430, E.mail : info@abhinandangroup.com

Website : www.abhinandangroup.com, CIN : U65100WB2010PTC153196

**DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016**

(To be filled by the Depository Participant)

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

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

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

<b>Holders Details</b>											
Sole/ First Holder's Name					PAN						
Search Name											
Exchange Name		ID		UCC							
Second Holder's Name					PAN						
					UID						
Third Holder's Name					PAN						
					UID						
Name*											
<p><b>* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.</b></p>											
<b>Type of Account (Please tick whichever is applicable)</b>						<b>Sub-Status</b>  To be filled by the DP					
<b>Status</b>											
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FI <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify)											
SEBI Regn. No. (If Applicable)					SEBI Regn. Date	D	D	M	M	Y	Y
RBI Regn. No. (If Applicable)					RBI Approval Date	D	D	M	M	Y	Y
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify) _____										
I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')						[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No					
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')						<input type="checkbox"/> Yes <input type="checkbox"/> No					
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly										
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID _____						<input type="checkbox"/> Yes <input type="checkbox"/> No					

**MANDATORY**

I/ We would like to share the email ID with the RTA		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I / We would like to receive the Annual Report		<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic	
(Tick the applicable box. If not marked the default option would be in Physical)			
Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository Participant <i>(Tick any one)</i>			
		<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form	
<b>Clearing Member Details (To be filled by CMs only)</b>			
Name of Stock Exchange			
Name of CC / CH			
Clearing Member Id		Trading member ID	
I / We wish to receive dividend / interest directly in to my bank account 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



## OTHER DETAILS - COMMON FOR TRADING & DP ACCOUNTS

Bank Details [Dividend Bank Details]													
Bank Code (9 digit MICR Code)													
IFS Code (11 character)													
Account Number													
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify)_____												
Bank Name													
Branch Name													
Bank Branch Address													
City							State						
Country							PIN code						
(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. Ø In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present/mentioned on the document.													
Gross Annual Income Details													
Income Range per annum	<input type="checkbox"/> Upto ₹ 1 Lac <input type="checkbox"/> ₹ 1 Lac to ₹ 5 Lac <input type="checkbox"/> ₹ 5 Lac to ₹ 10 Lac <input type="checkbox"/> ₹ 10 Lac to ₹ 25 Lac <input type="checkbox"/> ₹ 25 Lac to ₹ 1 Crore <input type="checkbox"/> More than ₹ 1 Crore												
Net-worth as on (Date)	D	D	M	M	Y	Y	Y	Y	Y	Y	Y	₹	
(Net worth should not be older than 1 year)													
Occupation	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others _____												
Mother's Name													
Educational Qualifications													
Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)												
Any other information													
<b>SMS Alert facility :</b> [Mandatory if you are giving Power of Attorney (PoA). Ensure that the mobile number is provided in the KYC Application Form]													
Sole/First Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Second Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Third Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No					
I wish to avail the Mobile number registered for SMS Alert Facility.													
I have read and understood the Terms and Conditions prescribed by CDSL for the same.									<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>Easi</b>	To register for <b>easi</b> , please visit our website <a href="http://www.cdslindia.com">www.cdslindia.com</a> .												
	<b>Easi</b> allows a BO to view his ISIN balances, transactions and value of the portfolio online.												

DEPOSITORY ACCOUNT(S) DETAILS (if existing)			
Depository			
Participant Name			
Depository Name	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL		
Beneficiary Name			
DP ID			
Beneficiary ID (BO ID)			
<b>TRADING PREFERENCES</b> - Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you.			
Exchange	Segment	Signature	
NSE & BSE	- All Segments	✓	
	- Cash / Mutual Fund	✓	
	- F&O	✓	
	- Currency	✓	
NSE & BSE	- Commodity Derivatives	✓	
If you do not wish to trade in any of segments / Mutual Fund, please mention here _____			
<b>PAST ACTIONS</b>			
Details of any action / proceedings initiated / pending / taken by SEBI / Stock exchange / any other authority against the applicant / constituent or its Partners / promoters / whole time directors / authorized persons in charge of dealing in securities during the last 3 years			
<b>DEALINGS THROUGH AUTHORISED PERSON OR OTHER STOCK BROKERS</b>			
Whether dealing with any other Stock Broker / Authorised Person (in case dealing with multiple Stock Broker / Authorised Person, provide details of all)			
Name of Stock Broker			
Name of AP, if any		AP Regn. No.	
Client Code		Exchange	
Details of disputes/dues pending from/to such Stock Broker / Authorised Person			

<b>ADDITIONAL DETAILS</b>	
Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify)	
_____ (Ensure that Email id is mentioned in KYC, if ECN is opted)	
Whether you wish to receive the standard documents - Rights and Obligations, Risk Disclosure Document (RDD), Guidance note and Rights and Obligations of Beneficial Owner and Depository Participant	<input type="checkbox"/> physically or <input type="checkbox"/> electronically
<b>Please note that these documents are also available in certain vernacular languages on demand.</b>	
Whether you wish to avail of the facility of internet trading / wireless technology (please specify)	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
Number of years of Investment / Trading Experience	
Any other information	
<b>INTRODUCER DETAILS (optional)</b>	
Name of the Introducer	
	(Name) (Middle Name) (Surname)
Status of the Introducer	<input type="checkbox"/> Remisier <input type="checkbox"/> Authorized Person <input type="checkbox"/> Existing Client <input type="checkbox"/> Others, please specify
Address and Phone No. of the Introducer	
Signature of the Introducer	

## DECLARATION

1. I / We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.
2. 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.
3. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
4. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website, if any.
5. 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".

	Name	Signatures
<b>Sole / First Holder or Guardian (in case of Minor)</b>		✓
<b>Second Holder</b>		✓
<b>Third Holder</b>		✓

**(Signatures should be preferably in black ink).**

### NOTES :

1. All communication shall be sent at the address of the Sole/First holder only.
2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
3. For receiving Statement of Account in electronic form:
  - I. Client must ensure the confidentiality of the password of the email account.
  - II. Client must promptly inform the Participant if the email address has changed.
  - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
4. Strike off whichever is not applicable.

### MANDATORY

## FORM FOR NOMINATION

I/We wish to make a nomination. [As per details given below]												
<b>Nomination Details</b>												
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.												
<b>Nomination can be made upto three nominees in the account</b>	<b>Details of 1st Nominee</b>	<b>Details of 2nd Nominee</b>	<b>Details of 3rd Nominee</b>									
<b>Mandatory Details</b>												
<b>1 Name of the Nominee(s) (Mr./Ms.)*</b>												
<b>2 Share of each Nominee</b> Equally [If not equally, please specify percentage]	%	%	%									
Any odd lot after division shall be transferred to the first nominee mentioned in the form.												
<b>3 Relationship with the Applicant (if any)</b>												
<b>Non-mandatory Details</b>												
<b>4 Address of Nominee(s) / Guardian in case of Minor</b>  City / Place  State & Country  PIN Code												
<b>5 Mobile / Telephone No. of Nominee(s) / Guardian in case of Minor</b>												
<b>6 Email ID of Nominee(s) / Guardian in case of Minor</b>												
<b>7 Nominee / Guardian (in case of Minor) Identification Details</b> [Please tick any one of following and provide details of same]  <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank A/c No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID												

	Name(s) of holder(s)	Signature(s) of holder*
Sole / First Holder (Mr./Ms.)		✓
Second Holder (Mr./Ms.)		✓
Third Holder (Mr./Ms.)		✓
<b>Witness</b> Signature_____ Name_____ Address_____ 		

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

**Notes :** This nomination shall supersede any prior nomination made by the account holder(s), if any.  
The Intermediary shall provide acknowledgement of the Nomination Form to the account holder(s).

## DECLARATION FOR OPTING-OUT OF NOMINATION

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our MF Folio/ 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 MF Folio / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the MF Folio / demat account.		
	Name(s) of holder(s)	Signature(s) of holder*
Sole / First Holder (Mr./Ms.)		✓
Second Holder (Mr./Ms.)		✓
Third Holder (Mr./Ms.)		✓
<b>Witness</b> Signature_____ Name_____ Address_____ 		

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

## POLICY ON FREEZING / BLOCKING CLIENT ACCOUNT

1. **Background** : SEBI vide circular no. SEBI/HO/MIRSD/POD-1/P/CIR/2024/4 dated January 12, 2024 and NSE Circular no NSE/INSP/61529 Dated April 08, 2024 regarding Framework for Trading Members to provide the facility of voluntary freezing/blocking of online access of the trading account to their clients.

It is pertinent to mention that:

- a. Freezing/blocking is only for the online access to the client's trading account, and there shall be no restrictions on the Risk Management activities of the Trading Member.
  - b. The request for freezing/ blocking does not constitute request for marking the client's Unique Client Code (UCC) as inactive in the Exchange records.
2. In view of the above the company has framed the following policy governing the outline of the modus operandi. In addition to branch trading the company is extending the facility of internet trading through browser based and EXE based followed by mobile trading. Presently we will be providing the following method of communications through which the client may request for voluntary freezing/ blocking of the online access of trading account if any suspicious activity is observed in the trading account: -
    - a) Email from registered e-mail ID : A dedicated email ID **stoptrade@abhinandangroup.com** has been opened where client can send their request for freezing/ blocking from their email ID registered with us. Clients are requested to send their freezing/ blocking request without any ambiguity along with UCC. Similarly, for un-freezing/ un-blocking, clients are requested to send their request at the email ID **stoptrade@abhinandangroup.com** from their registered email ID mentioning the same. Request sent for such freezing/ blocking and un-freezing/ un-blocking may not be addressed by the company if it is not sent from client's registered email ID or sent to any other email ID of the company.
    - b) SMS from registered mobile number: A dedicated mobile number 70445-51871 has been assigned where client can send their request for freezing/ blocking from their mobile number registered with us. Clients are requested to send their freezing/ blocking request in the following manner:
      - For freezing/ blocking type : **"BLOCK" FOLLOWED BY UCC WITHOUT SPACE** Example: if your UCC is A123 then message will be **"BLOCKA123"** and send it to 70445-51871.
      - For un-freezing/ un-blocking type : **"UNBLOCK FOLLOWED BY UCC WITHOUT SPACE"** Example: if your UCC is W114X100 then message will be **"UNBLOCKW114X100"** and send it to 70445-51871.

Request sent for such freezing/ blocking and un-freezing/ un-blocking may not be addressed by the company if it is not sent from client's registered mobile number or sent to any other mobile number of the company.

3. The company shall take the following actions on the receipt of such request through any modes of communications for freezing/blocking of the online access of the trading account from the client:
  - Verify whether request is received from the registered mobile number/e-mail ID of the client;
  - Freeze / block the online access of the client's trading account and simultaneously cancel all the pending orders, if any, of the said client.
  - Issue the acknowledgement to the registered email ID or mobile number of the client stating that the online access to the trading account has been frozen / blocked and all the pending orders in the client's trading account, if any, have been cancelled.



- Details of open positions (if any) would also be communicated to registered email ID of the client along with contract expiry information within one hour from the freezing/blocking of the trading account.
- The timelines for freezing/ blocking of the online access of the clients' trading account is as under:

Scenario	Timelines for issuing acknowledgements as well as freezing / blocking of the online access of the trading account.
Request received during the trading hours and within 15 minutes before the start of trading hour.	Within 15 minutes of receiving the request.
Request received after the trading hours and 15minutes before the closure of trading hour.	Before the start of next trading session

4. The company shall maintain the appropriate records/logs including request received to freeze/ block the online access of trading account, confirmation given for freezing/blocking of the online access of the trading account and cancellation of pending orders, if any, and sent them to the clients for the time limit as prescribed by the Regulator.
5. **Re-enabling the client for online access of the trading account :** - The Trading Member shall re-enable the online access of trading account after carrying out necessary due diligence including validating the client request and unfreezing / unblocking the online access of the trading account.

✓

\_\_\_\_\_  
Signature of the Client

## **Most Important Terms and Conditions (MITC)**

As required by SEBI Circular No. SEBI/HO/MIRSD/MIRSD-PoD-1/P/CIR/2023/180 dt.13.11.2023  
(For non-custodial settled trading accounts)

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

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Signature of the Client

## TARIFF SHEET

Unique Client Code	
Group	
Branch	

**Brokerage Details (provided by \_\_\_\_\_)**

Exchange/Segment		%	Min
<b>NSE CM</b>	Delivery		
	Squareup		
<b>NSE F&amp;O</b>	Same Day		
	Options		
<b>NSE COMMODITY</b>	Same Day		
	Options		
<b>BSE CM</b>	Delivery		
	Squareup		
<b>BSE F&amp;O</b>	Same Day		
	Options		
<b>BSE CURRENCY</b>	Same Day		
	Options		
<b>BSE COMMODITY</b>	Same Day		
	Options		

Minimum Processing Fees, in case of brokerage being less than ₹ 15/- in total brokerage booked on a particular date & in a particular segment ₹ 15/-

I/we further agree to pay other statutory charges like service tax, stamp duty, exchange TOT, SEBI TOT and other statutory charges levied by regulatory authorities on transaction carried out by me/us at relevant rates to the stock broker, over and above the brokerage charged to me/us.

✓ \_\_\_\_\_  
Signature of the Client

	Name & Signature
Original Documents Verified by	
Client Code Alloted by	
Client Code mapped in manager by	
Client Code & Details uploaded in Back Office	
Client Code uploaded in NSE/BSE System	



# ABHINANDAN STOCK BROKING PVT. LTD.

Regd. Office : 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata – 700 029

Telefax : +91 33 4005-5430, E.mail : info@abhinandangroup.com

Website : www.abhinandangroup.com, CIN : U65100WB2010PTC153196

Investors' Complaints Redressal E.mail : complaints@abhinandangroup.com

DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016



## CHARGE STRUCTURE

Sl. No.	Particulars	BSDA	Scheme 1	Scheme 2	Scheme 3
1	Statutory Charges at the time of Account Opening & Advance / Deposit	₹ 200	₹ 200	₹ 200	₹ 200 (One time AMC ₹ 4000 for Non-Corporate & ₹ 5000 for Corporate)
2	Annual Maintenance Charges	Holding value upto ₹ 4 lacs - Nil ₹ 4 lacs to ₹ 10 lacs - ₹ 100 Above ₹ 10 lacs - AMC applicable as per Normal <b>Scheme 1</b>	₹ 250 for Non-Corporate ₹ 850 for Corporate	₹ 500 for Non-Corporate ₹ 1100 for Corporate	NIL for Non-Corporate ₹ 500 for Corporate
3	Buy (Credit)	Nil	Nil	Nil	Nil
4	Sell (Debit)				
	Market Transactions	₹ 15 per ISIN	0.01% of transaction value (subject to minimum of ₹ 15 per ISIN)	₹ 15 per ISIN	₹ 15 per ISIN
	Off-Market Transactions	0.01% of transaction value (subject to minimum of ₹ 25 per ISIN)	0.02% of transaction value (subject to minimum of ₹ 25 per ISIN)	0.01% of transaction value (subject to minimum of ₹ 25 per ISIN)	0.01% of transaction value (subject to minimum of ₹ 25 per ISIN)
5	Dematerialization	₹ 10 Per Certificate (subject to minimum of ₹ 25 per ISIN) + ₹ 50 Courier Charges			
6	Rematerialization	₹ 15 Per 100 Securities or part thereof (subject to minimum of ₹ 50 per ISIN)			
7	All kind of Pledge / Hypothecation requests	0.01% of value of securities (subject to minimum of ₹ 35 per request)			
8	All kind of Lending/ borrowing requests	0.01% of value of securities (subject to minimum of ₹ 35 per request)			
9	Easi Facility*	Nil			
10	Easiest Facility**	₹ 100 per annum			
11	Account of choice***	₹ 400 p.a. & Token charges ₹ 2250 and annual renew of token charge ₹ 1150			

\* Only viewing Holding & Status of transaction(s) executed in the last 30 days

\*\* is a mode of operation through which transfer of securities can take place to settlement related accounts of CMs (brokers) only.

\*\*\* is a mode of operation through which transfer of securities can take place to any account of choice.

**Scheme Opted : ☒ BSDA ☒ Scheme 1 ☒ Scheme 2 ☒ Scheme 3**

✓

Sole/First Holder

✓

2nd Holder

✓

3rd Holder

**NOTES :**

1. Only 1st year's annual account maintenance charges are collected at the time of account opening. All other charges are billed on a monthly basis if you have any transactions during that month.
2. For all purposes, the bill date shall be construed as the date of demand and bills will be considered as the bill cum notice for payment. ASBPL reserves the right to freeze depository account for debit transaction in case of non payment of charges after 15 days from the bill date.
3. Delayed payment charges will be levied @ 12% p.a., if payment is not received within 15 days from the bill date.
4. **"All market instructions for transfer must be received latest by 4.00 p.m. on the previous working day prior to the pay in day as per SEBI guidelines. All Off Market instructions for transfer must be received at least 24 hours before the execution date. Late instructions would be accepted at the Account Holder's sole risk and responsibility".**
5. Charges are subject to revision at the company's sole discretion and as per revision in CDSL charges. Changes, if any, will be intimated 30 days in advance.
6. Any service not quoted above will be charged separately.
7. Value of transactions will be in accordance with rates provided by the depository.
8. Service tax and other statutory charges, if applicable will also be levied.
9. Charges may also be collected upfront, by the point of acceptance of Delivery Instructions.
10. Charges for POA stamping will be charged extra.

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

Signature of Account Holders :

✓ \_\_\_\_\_  
**Sole/First Holder**

✓ \_\_\_\_\_  
**2nd Holder**

✓ \_\_\_\_\_  
**3rd Holder**

### POLICY/DECLARATION ON AML/CFL

Sl.No.	AML Measures	Particulars
1	AML Policy	We have in place written policy & procedure as per guidelines issued by SEBI/ Exchange
2	Know Your Customer (KYC)	We have in place system for identification of our clients including KYC documentation.
3	Maintenance of Records	We update the client profile on a regular basis.
4	Screening against negative lists	We have in place record maintenance and retention procedures as prescribed. We screen the client database to ensure that it is not held by or linked to anyone included in the specified list.
5	Risk Assessment	We have in place system to place clients into high, medium & low risk category and apply enhanced due diligence for clients that pose a higher risk.
6	Clients of Special Category	We have in place policy to place clients of special category such as persons <input type="checkbox"/> with political link, <input type="checkbox"/> non -residents, <input type="checkbox"/> Trusts, <input type="checkbox"/> NGOs, <input type="checkbox"/> Closely held Companies etc. in high risk category. <input type="checkbox"/> Other Pl. specify _____
7	Monitoring, Identification & Reporting of Suspicious Transactions	We have in place, systems and procedures for monitoring, detection and reporting of suspicious transactions to the relevant authorities.
8	Audit	We are subject to inspection by SEBI/Exchange. Additionally we are periodically audited by an independent internal auditor that assesses AML policies and procedures too.

## POLICIES AND PROCEDURES

### A) Refusal of Orders for penny stocks :

Penny stocks are thinly traded shares of small companies which are traded infrequently. It may be difficult to buy/sell Penny stocks. Penny stocks include the equity securities with no active trading market.

For Dealing in penny stock following procedures is being followed :

1. Authorization of the Senior Officer is to be taken if any client wants to invest in penny stocks.
2. The valid reason of the client to trade in penny stock is taken.
3. The financial position, background of the client is reviewed.

The order of a client shall be refused by the Member when it appears that

1. If the dealing amounts to manipulation of the price of the security.
2. If the dealing creates false or misleading appearance of trading in the securities market.
3. If the dealing in the security is not intended to effect transfer of beneficial ownership but intended to operate only as a device to inflate, depress or cause fluctuations in the price of the penny stock for wrongful gain or avoidance of loss.

### B) Setting up client's exposure limits :

At the time of entering into agreement with the clients and branches we require them to agree to abide by the exposure limits set by us from time to time subject to the availability of funds in their accounts & margins given by them in form of cash, FDRs, BGs, shares etc also. Client exposure is set on the basis of financial soundness (such as high, medium or low net worth client) and turnover position of the client.

### C) Applicable Brokerage Rate :

The brokerage rate that would be applicable on the client shall be decided mutually between **Abhinandan Stock Broking Pvt. Ltd.** and client. Such brokerage rate might increase/decrease during the course of time. Any such change would be intimated to the clients before implementing the same. However, the brokerage rate in any case would not exceed maximum brokerage rate of the transaction value as prescribed under SEBI/Exchange regulations.

### D) Imposition of Penalty / Delayed Payment :

As per the laws of Exchange /SEBI, the client must make the payment of securities/funds he/ she sold/purchased before the Pay-In date. If the client fails to make the Payment before the said period, **Abhinandan Stock Broking Pvt. Ltd.** may impose penalty or delayed payment charges not exceeding 1% per month for not making payment of their pay-in obligation on time as per the exchange requirement or net ledger debit balance as applicable.

No interest / delayed payment charges will be payable by the Trading Member on the credit balance lying in the margin account or ledger balance of the Client.

### E) The right to sell client's securities or close client's positions, without giving notice to the client, on account of non-payment of client's dues :

- a) Even after regular reminders, if client fails to make the payment of the margin money or pay-in amount, then we would square off his/her/their position and before taking such action in this direction, we telephonically/vide e.mail explain all the details to the client about our proposed action in this regard.
- b) Principally, company follows the practice of giving reasonable opportunity of being heard and gives a verbal show cause notice to such clients. Thereafter, if company finds after giving reasonable time that the client has failed to pay the money due from him, we square off their position. However, in exceptional cases, like in case of those

clients with whom company has a long term bonding and there is reassurance from the concerned client that they will make the payment in due course of time, in such circumstances, company may consider allowing them to continue with their positions. Further, this shall be limited to the extent of settlement / margin obligations.

**F) Shortages in obligations arising out of internal netting of trades :**

Subject to the rules, regulation and bye-laws of the relevant stock exchange/ SEBI, if the seller of the security, in case of internal netting of trades has failed to deliver the security in the scheduled settlement number in the designated settlement account of the member, the seller has to deliver the security in the designated Auction settlement for scheduled settlement.

However, if the client fails to deliver the shares, then the seller will be debited with the highest prevailing price in the NSE from the first day of the relevant trading period till the auction day or 2% above the closing price on auction day for the particular security, whichever is higher, along with charges and the buyer will get the credit for the same.

**G) Conditions under which a client neither may nor be allowed to take further position or the broker may close the existing position of a client :**

A client is not allowed to take further position or the existing position of a client is closed on the following conditions:

1. If the ledger of a client shows continuous debit balances.
2. If the client defaults in meeting funds / securities obligation, it will lead to compulsory close out of the position.
3. If the client fails to submit any information / document as are mandatory or relevant, the client may not be allowed to take further position.
4. If the exchange is not allowing any further position in that scrip.
5. If broker's limit of taking exposure in that particular scrip comes to an end.

**H) Temporarily suspending or closing a client's account at the client's request :**

- a) The account of the client shall be suspended/ closed on receipt of written request from the client specifying the reasons to close the account. If the reasons given are justified then the account of that client is suspended after effecting the settlement of the account.
- b) The Trading Member can withhold the pay out of Client and suspend his trading amount due to his surveillance action or judicial or/and regulatory order/action requiring client suspension.

**I) Deregistration of a client :**

A client shall be deregistered upon fulfillment of the following conditions after effecting full and final settlement of account with respect to funds and securities :

- a) On receipt of the specific request from the client to deregister himself and to close his accounts.
- b) If the action of the Client are prima facie illegal / improper or such as to manipulate the price of any securities or disturb the normal / proper functioning of the market, either alone or in conjunction with others.
- c) If there is any commencement of a legal process against the Client under any law in force;
- d) On the death/lunacy or other disability of the Client;
- e) If a receiver, administrator or liquidator has been appointed or allowed to be appointed of all or any part of the undertaking of the Client;
- f) If the Client has voluntarily or compulsorily become the subject of proceedings under any bankruptcy or insolvency law or being a company, goes into liquidation or has a receiver appointed in respect of its assets or refers itself to the Board for Industrial and Financial Reconstruction or under any other law providing protection as a relief undertaking;



- g) If the Client being a partnership firm, has any steps taken by the Client and/ or its partners for dissolution of the partnership;
- h) If the Client have taken or suffered to be taken any action for its reorganization, liquidation or dissolution;
- i) If the Client has made any material misrepresentation of facts, including (without limitation) in relation to the Security;
- j) If there is reasonable apprehension that the Client is unable to pay its debts or the Client has admitted its inability to pay its debts, as they become payable;
- k) If the Client suffers any adverse material change in his / her / its financial position or defaults in any other agreement with the Trading Member;
- l) If the Client is in breach of any term, condition or covenant of this Agreement;
- m) If any covenant or warranty of the Client is incorrect or untrue in any material respect;

However notwithstanding any termination of the agreement, all transactions made under / pursuant to this agreement shall be subject to all the terms and conditions of this agreement and parties to this agreement submit to exclusive jurisdiction of courts of law at the place of execution of this agreement by Trading Member.

#### **J) Inactive accounts :**

The account of a client who do not trade and remain inactive for 12 (twelve) months shall be declared “inactive account” and will be temporarily suspended.

The Member reserves the right to ask for any documents in support of current address, bank account, demat account, financial status, etc before reactivating such inactive accounts.

#### **K) Policies & Procedures :**

“As per the SEBI circular no. CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated 20.06.2019 on Handling of Client’s Securities, **Abhinandan Stock Broking Pvt. Ltd.** shall transfer the securities purchased by the client to client’s demat account within 1 working day of the pay out if clear payment is received from the client and if the client fails to make the payment in full then **Abhinandan Stock Broking Pvt. Ltd.** shall transfer the securities to the “client unpaid securities account (CUSA)”. The securities kept in the CUSA shall either be transferred to the demat account of the client upon fulfillment of its funds pay- in obligation or in case of the payment is not received by the client it shall be disposed off in the market by **Abhinandan Stock Broking Pvt. Ltd.** within 5 trading days after the date of pay out without any notice to the client to the extent of debit balance of the client and/or as per **Abhinandan Stock Broking Pvt. Ltd.** Risk Management policy and balance securities shall be transferred to the respective client’s demat account.”

#### **L) Running Account Authorization**

“Please note that, running account authorisation for funds and securities earlier provided by you to us at the time of account opening is now restricted to funds only and not for securities as per the recent SEBI’s circular - CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated 20.06.2019. So, w.e.f. 01.10.2019 as per the said circular, the revised running account authorisation clause will be read as follows: “Funds shall not be paid immediately until/unless specifically demanded by client and member is free to use the same for the future settlement/margin obligations etc of the client”.

#### **M) Voluntary Clauses**

I/We are aware and agree that as per the SEBI circular no. CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated 20.06.2019 that **Abhinandan Stock Broking Pvt. Ltd.** shall transfer the securities bought by me/us received in pay-out, to my/ our demat account within 1 working day if clear payment is received from the client and if I/We fail to make the payment in full then **Abhinandan Stock Broking Pvt. Ltd.** shall transfer the securities to the “client unpaid securities account (CUSA)”. I/We further agree and confirm that, the securities kept in the CUSA shall either be



transferred to my/our demat account upon fulfilment of my/our funds pay-in obligation or it shall be disposed of in the market by **Abhinandan Stock Broking Pvt. Ltd.** within 5 trading days after the date of pay out without any notice to the client to the extent of debit balance of the client and/or as per **Abhinandan Stock Broking Pvt. Ltd.** Risk Management policy and balance securities shall be transferred to the respective client's demat account. Any profit/loss occurred on such sale transactions of unpaid securities, will be borne by me/us and transferred to/ adjusted in my/our ledger. If any such stock will remain in CUSA due to my/our default, **Abhinandan Stock Broking Pvt. Ltd.** may charge a fine/penalty as levied by the exchange/depositories to me and I/We shall not object the same.

**Client acceptance of policies and procedures stated herein above :-**

I/We have fully understood the same and do hereby sign the same and agree not to call into question the validity, enforceability and applicability of any provision/clauses this document any circumstances whatsoever. These Policies and Procedures may be amended/ changed unilaterally by the broker, provided the change is informed to me/us with through any one or more means or methods. I/We agree never to challenge the same on any ground including delayed receipt / non receipt or any other reasons whatsoever. These Policies and procedures shall always be read along with the agreement and shall be compulsorily referred to while deciding any dispute /difference or claim between me/us and stock broker before any court of law/judicial/ adjudication authority.

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Signature of the Client

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**Additional Rights and Obligations of the Rights and Obligations Document**

The Stock Broker / Stock Broker and Depository Participant shall not directly / indirectly compel the clients to execute Power of Attorney (POA) or Demat Debit and Pledge Instruction (DDPI) or deny services to the client if the client refuses to execute POA / DDPI. Accordingly, SEBI Circular No. CIR/MIRSD/16/2011, dated August 22, 2011 stands amended to this extent.

## AUTHORITY LETTER FOR RUNNING ACCOUNT OF FUNDS

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

To  
**ABHINANDAN STOCK BROKING PVT. LTD.**  
CITY POINT, 3rd Floor  
95, Sarat Bose Road  
Kolkata - 700 029

Dear Sir,

1. With reference to my/our trading account opened with you, I/we request you to maintain a running account for funds on my/our behalf without settling the account on settlement of each transaction. As required by SEBI circular my/ our funds at EOD shall be upstream to CC/CM on daily basis. Further, any request made for release of funds shall be proceed within same day if request is made by 3.30 P.M. and on the next trading day if request is received after 3.30 P.M.
2. I/we understand and agree that no interest will be payable to me/us on the funds so retained with you.
3. I/we may be trading in derivatives segment & cash segment of various Exchanges and hence have various accounts with you. In this regard I/we hereby authorize **Abhinandan Stock Broking Pvt. Ltd.** to act at its discretion of adjusting any credit balance under my/ our various accounts against the debit in any account across segments/Exchange, without taking any further instruction from me/us.
4. Excess margins deposited towards one exchange / segment may be adjusted, on a running basis towards margin requirement / debit balance in same / other exchange / segment, where I/we have the client account.
5. I/we authorize you to set off a part or whole of the margin deposited by me/us against any of my / our dues, by appropriating relevant amount of fund or by sale of securities which form part of margin.
6. I / we hereby authorize you to deposit my / our funds deposited as margin to exchange / Clearing Corporation.
7. I/we may revoke the authorisation at any time by giving a written notice.
8. I/we also agree that the actual settlement of fund shall be done by us, at least once in a quarter or month, as preference given below and the statement of account for the same will be provided to me by **Abhinandan Stock Broking Pvt. Ltd.**
9. I/we agree that fund given towards collaterals/margins in form of bank guarantee (BG) / Fixed Deposit Receipts (FDR) may not be periodically settled.
10. I/we agree that (a) in respect of derivatives market transactions, the Trading member may retain funds calculated in the manner specified below:
  - i) Entire pay-in obligation of funds outstanding at the end of day on date of settlement, across all segments.
  - ii) Member may retain 50% of end of the day (EOD) margin requirement as cash margin, excluding the margin on consolidated crystallized obligation/ MTM.
  - iii) Apart from 50% cash margin mentioned in point ii above, member may also retain 225% of EOD margin (which includes additional 125% margin) reduced by 50% cash margin and the value of securities (after applying appropriate haircut) accepted as collateral from the clients by way of 'margin pledge' created in the Depository system for the purpose of margin and value of commodities (after applying appropriate haircut). The margin liability shall include the end of the day margin requirement in all the segments across exchanges excluding the margin on consolidated crystallized obligation/ MTM. The margin liability may also include the margin collected by the Member from their clients as per the risk management policy and informed to the clients.
11. I/we agree/understand that there shall be no inter-client adjustment for the purpose of settlement of the running account.
12. I/we shall bring any dispute arising from the statement of account or settlement so made to the Notice of the Trading Member preferably **within 30 working days** from the date of receipt of funds statement as the case may be.

### PREFERENCE OF CLIENT FOR SETTLEMENT OF RUNNING ACCOUNT (FUNDS & SECURITIES)

Settlement Preferences	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly
------------------------	----------------------------------	------------------------------------

Thanking you,

Yours truly,

✓ \_\_\_\_\_

Signature of the Client

**VOLUNTARY**

## MANDATE TO ISSUE DOCUMENTS IN ELECTRONIC FORMAT

Dated : \_\_\_\_\_

To  
**ABHINANDAN STOCK BROKING PVT. LTD.**

CITY POINT, 3rd Floor  
95, Sarat Bose Road  
Kolkata - 700 029

Sir,

### Re : Electronic Communication

This has reference to the facility of receiving contract notes and other documents in Electronic form issued by you in compliance with regulations and guidelines issued by SEBI and Stock Exchanges. I / We understand that ECN are valid legal contract notes as per Stock Exchange / SEBI Rules and recognized under Income Tax Act, as well as other Acts in India.

Therefore, the ECN shall be an accepted form of Contract Note to me / us and should be mailed to the Email ID, mentioned in the KYC Form.

I / We wish to inform you that I / We would like to avail of this facility. In this regard we state the following :

1. This is to further confirm that it will be my / our responsibility that my / our e.mail ID is active and if not, then I / we will inform you to update new e.mail ID.
2. I / we undertake to check the ECNs and discrepancy if any shall be brought to your notice within 24 hours of the issuance of contract notes.
3. You are authorized to send me / us account statement / other documents / other notices / correspondence periodically through the same channel.
4. I / we undertake that any change in my / our Email ID shall be communicated to you in writing through a physical letter.
5. In case of non-receipt of bounced mail notification, it would be assumed that the ECN / other documents have been delivered at the respective Email ID.

Kindly take the above into your record and oblige.

Thanking you,

Yours truly,

✓ \_\_\_\_\_  
Signature of Client

Name : \_\_\_\_\_

## AUTHORITY TO PLACE ORDER / TRADE ON BEHALF OF THE CLIENT

Dated : \_\_\_\_\_

To  
**ABHINANDAN STOCK BROKING PVT. LTD.**  
CITY POINT, 3rd Floor  
95, Sarat Bose Road  
Kolkata - 700 029

Dear Sir,

### Sub : Authority to trade on my behalf

This is with respect to my UCC \_\_\_\_\_.

I/We hereby authorize the following person(s) to trade/transact in my above mentioned account on behalf of me.

Sl. No.	Name of Person Authorized to trade on behalf of client	Relationship (if any)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

who is not politically exposed person / relative of politically exposed person / barred by any regulatory entity to trade in securities, F&O and currency market, whose signature is attested hereunder to do the following act whether verbally over phone or in writing on my behalf :

- act as my Authorized Representative to place orders with you on my behalf for purchase or sale of securities, trade in F&O and currency market and modify / cancel such orders whether in part or in full;
- purchase or sell securities, trade in F&O and currency market;
- accept Contract Note or Ledger Statement; give instruction to you for making payment for amount due against my outstanding.

I hereby confirm and declare that my relation with the Authorized Representative as mentioned above is true and correct.

I/We hereby understand the risk associated with authorizing other people to trade in my account and hereby declare that at no point would I hold **Abhinandan Stock Broking Pvt. Ltd. (ASBPL)** liable for any loss which I/we may incur due to trades done by the above mentioned authorized persons.

I/We undertake that this authorization shall remain in force unless a written revocation is submitted by me to ASBPL in advance.

Thanking you,

Yours truly,

✓ \_\_\_\_\_  
Signature of Client

**VOLUNTARY**

## AUTHORIZATIONS

I/ We further authorize <b>Abhinandan Stock Broking Pvt. Ltd.</b> here as under:	
1. I/We hereby agree that the ledger statements in respect of transactions entered into on the cash segments of the exchanges will be combined for the purpose of convenience of the stock broker and for my/our convenience and the payments received and paid by the stock broker will be appropriated on a first in first out basis.	<div style="text-align: center;">✓ _____</div> <div style="text-align: center;">Signature of Client</div>
2. I/We hereby agree to pay all the amount due to the broker on it's due date. The amount due to the broker shall include all types of margin and pay-in obligations. In case I/we do not make payment by due date, I/we understand and agree to pay penal interest @ 1% per month chargeable on the amount remaining outstanding as levied by the stock broker and or sell the securities lying with the stock broker.	<div style="text-align: center;">✓ _____</div> <div style="text-align: center;">Signature of Client</div>
3. I/We authorize ASBPL to set off outstanding in any of my/our accounts against credit available or arising in any other account maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the exchanges or in any other exchanges and/or against the value of cash margin or collateral shares provided to ASBPL by me/us. We further authorize ASBPL withhold funds pay-out towards all applicable margin and debits.	<div style="text-align: center;">✓ _____</div> <div style="text-align: center;">Signature of Client</div>
4. I/We have a trading account as well as a Depository BO account with ASBPL. For the convenience of payment of all the charges pertaining to my/our depository account, I/we hereby request you to debit my/our trading account with all the DP account charges as and when the bill is raised by ASBPL (Depository Participant). Further I/we understand that in case of any non-compliance of the Bye Laws, Rules & Regulations as laid down by SEBI, Exchanges and/or the Depositories and for any other matters that may be decided by ASBPL from time to time, ASBPL may charge penalty on me/us. Such penalty amount shall be directly debited to my/our account. I/We hereby request you to debit my/our trading account for the amount of penalty charged in my/our depository account with you.	<div style="text-align: center;">✓ _____</div> <div style="text-align: center;">Signature of Client</div>
5. I/We understand that we shall not sell shares unless lying in my/our DP account. However, we request you to provide me/us the facility for inter-settlement of securities after debiting appropriate charges from my/our account for this service. ASBPL will not be responsible/liable for any profit/loss incurred/sustained by my me/us for mistake/failure of whomsoever for inter settlement of securities.	<div style="text-align: center;">✓ _____</div> <div style="text-align: center;">Signature of Client</div>

## DECLARATION/LETTER OF UNDERSTANDING

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

To  
**ABHINANDAN STOCK BROKING PVT. LTD. (ASBPL)**  
CITY POINT, 3rd Floor  
95, Sarat Bose Road  
Kolkata - 700 029

Dear Sir,

1. I/We agree not to hold ASBPL liable or responsible for delay or default in performance of your obligations due to contingencies beyond your control such as fire, flood, civil commotion, earthquake, riots, war strikes, failure of systems, failure of internal links, government/regulatory actions or any other contingencies beyond your control.
2. I/We am/are agreeable for inter-settlement transfer of securities towards settlements.
3. All fines/penalties and charges levied upon ASBPL due to my acts/deeds or transactions may be recovered by ASBPL from my account.
4. Any queries related to my/our contract note shall be brought to the notice of ASBPL within 7 days of the receipt of the contract note.
5. I/We hereby authorize ASBPL not to provide me Order Confirmation/ Modification/ Cancellation slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We hereby request ASBPL to kindly accept my/our verbal orders/instructions over phone and execute the same. I/We understand the risk associated with placement of verbal orders and accept the same. In case I wish to withdraw this consent I shall inform ASBPL in writing and get the same acknowledged by ASBPL at least one week in advance from the date of withdrawal.
6. I/We will be extending all co-operation to ASBPL in their endeavour towards Anti Money Laundering. ASBPL may initiate any enquiry against me/us and/or my/our transactions any time without any legal implication whatsoever against them.
7. I/We understand that information about me/us and my/our transactions may be reported by ASBPL to FIU/concerned authorities without any intimation to me/us and have no objection to the same.
8. I/We undertake that if I/we fail to deliver any one or more securities to the pool account of ASBPL in respect of the securities sold by me/us before the pay-in date notified by the Exchange from time to time, such undischarged obligation in relation to delivering any one or more securities shall be deemed to have been closed out at the auction price or close-out price, as may be debited to ASBPL in respect of the security for the respective settlement, otherwise the close out price on the date of pay-out in respect of the relevant securities, declared by the Exchange. The loss, if any, on account of the close out shall be borne by me/us.
9. I agree to ASBPL tape-recording the conversation between me and ASBPL officers in its absolute discretion, whether personally or over the telephone. Such recordings may be relied upon by ASBPL as and when required and I agree not to challenge the evidentiary value of such recordings.
10. I hereby authorize ASBPL to debit my account with depository services charges, bank charges on account of dishonor of cheques, stop payment instruction charges, demand draft/ pay order/PGP charges. NEFT/RTGS charges, call and trade charges, SMS charges, settlement/ professional charges (for as may be applicable to NRIs), research service/message fee, trading platform charges, application money and processing charges for mutual funds, initial public offerings/follow on public offerings, rights issue, fixed deposit(s), money market instruments etc. generally various investment avenues / products, processing fees/charges towards contract note/statement of account etc. and any other such or similar fees / charges as may become applicable from time to time.

Thanking you,

Yours truly,

✓ \_\_\_\_\_  
Signature of the Client

**VOLUNTARY**

## ADDITION OF AADHAAR DETAILS

I/We do hereby solemnly declare that the detail herein above submitted by me/us is/are true to my/our knowledge.

I/We voluntarily give my/our consent to '**Abhinandan Stock Broking Pvt. Ltd.**' to use my/our Aadhaar Details to authenticate from UIDAI and link the Aadhaar Number to all my/our existing/new accounts with your DP.

	NAME	AADHAAR													
<b>Sole/First Holder</b>															
<b>Second Holder</b>															
<b>Third Holder</b>															

✓ _____ Signature of First/Sole Holder	✓ _____ Signature of Second Joint Holder	✓ _____ Signature of Third Joint Holder
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### DECLARATION IN CASE OF SAME MOBILE NUMBER AND / OR E.MAIL ID FOR DIFFERENT CLIENTS

[Please tick (✓) wherever applicable]

DP ID	<b>12082800</b>	Client ID		Date	
Name of Sole / First Holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).					
Signature of Sole/First holder		✓			

DP ID	<b>12082800</b>	Client ID		Date	
Name of Second Holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).					
Signature of Second holder		✓			

DP ID	<b>12082800</b>	Client ID		Date	
Name of Third Holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).					
Signature of Third holder		✓			

**Voluntary information provided by the client in relation to the Prevention of Money Laundering Act, 2002**

Name of the Client : \_\_\_\_\_

If Business / Profession : Nature of business : \_\_\_\_\_

Industry : \_\_\_\_\_

Details of my / our Relatives, having account with **Abhinandan Stock Broking Pvt. Ltd.** :

Name	Relationship	UCC (Client Code)
1.		
2.		
3.		
4.		

Details of the Corporate / Partnership Firm / Trust etc. where I/We am/are affiliated

Name	Entity Type	Nature of Business	Relationship	UCC (Client Code)
1.				
2.				
3.				
4.				

I / we hereby submit and agree to submit every year following documents to **Abhinandan Stock Broking Pvt. Ltd.**, before the due date as prescribed by **Abhinandan Stock Broking Pvt. Ltd.** :

1. Profit and Loss Account & Capital Account
2. Balance Sheet
3. Self attested copy of Income Tax Return (If return not available, I / we will furnish Form 16)
4. Copy of Form 16 in case of Salary Income
5. Any other document providing financial details of the client

I / we confirm that I / we will immediately inform **Abhinandan Stock Broking Pvt. Ltd.** in case I / we am / are convicted under any grounds or any action is taken against me/us by any authority(ies).

I / we intend to invest in the stock market with : ☐ Own Funds ☐ Borrowed Funds

(If Borrowed Funds, then please specify below Sources of funds :)

Sources of Borrowed Funds (if any)	Amount (₹)

(Certificated / Opinion Report from the Banker / Financial Institution confirming that there has been no default in the client's account is to be attached, which I / we agree to attach herewith.)

I / we hereby declare that I / we am/are beneficial owner of the Trading / On-line account opened with **Abhinandan Stock Broking Pvt. Ltd.**, and that I / we am / are investing my / our own funds with **Abhinandan Stock Broking Pvt. Ltd.**

✓

Client Signature

Client's Name

**For Office use only :**

Risk categorisation of client as per PMLA, 2002 : ☐ High Risk ☐ Medium Risk ☐ Low Risk

Verified by : \_\_\_\_\_

Authorised &amp; Approved by : \_\_\_\_\_

**VOLUNTARY**



## DECLARATION OF ULTIMATE BENEFICIAL OWNERSHIP

(Mandatory For Non-Individuals)

Investor Name \_\_\_\_\_ PAN \_\_\_\_\_

### Part I - LISTED COMPANY / ITS SUBSIDIARY COMPANY [If applicable, Part II Not Applicable]

We hereby declare that the Applicant/ Owner of the controlling interest in the applicant

☐ is a Company listed on a Stock Exchange

☐ is a majority-owned subsidiary of a Company listed on a Stock Exchange

Name of the holding/ parent company (with % share) \_\_\_\_\_

Name of such Listed Company (if not the Applicant itself) \_\_\_\_\_

Stock Exchange where listed \_\_\_\_\_ Security ISIN \_\_\_\_\_

### Part II - OTHER THAN LISTED COMPANY / ITS SUBSIDIARY COMPANY

Name & Address of the Ultimate Beneficial Owner [UBO]	PAN or any other identification proof where PAN not applicable	Country of tax residency	% of beneficial interest in the Applicant	Whether Politically Exposed?	UBO Code (see instruction next page)
(1)					
(2)					
(3)					

If UBO is already KYC compliant, KYC complied proof to be enclosed. Else PAN or any other valid identity proof and address proof must be attached (self certified by the UBO and certified by the Applicant)

### Part III - DECLARATION

We understand that <b>Abhinandan Stock Broking Pvt. Ltd.</b> is relying on this information for the purpose of determining the beneficial ownership of the account. We certify that the information we provided on this form is true and complete to the best of our knowledge and belief. We agree to submit a new form within 30 days if any information or certification on this form gets changed.	<div>✓ _____ Authorised Signatory [with seal]</div> <div>Date : _____ Place : _____</div>
--	---

In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit.

## GENERAL INFORMATION & INSTRUCTIONS

As per SEBI Master Circular No. CIR/ISD/AML/3/2010 dated December 31, 2010 regarding Client Due Diligence policy, related circulars on anti-money laundering and SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

Ultimate Beneficiary Owner [UBO]:

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

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

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

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

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

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/ MIRSD/ 11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client.

### UBO Code Description

• UBO-1 : Controlling ownership interest of more than 10% of shares or capital or profits of the Applicant, where the Applicant is a company • UBO-2 : Controlling ownership interest of more than 15% of the capital or profits of the Applicant, where the Applicant is a partnership • UBO-3 : Controlling ownership interest of more than 15% of the property or capital or profits of the Applicant, where the Applicant is an unincorporated association or body of individuals • UBO-4 : Natural person exercising control over the Applicant through other means i.e., exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under UBO-1 to UBO-3 above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests] • UBO-5 : Natural person who holds the position of senior managing official [In case no natural person could be identified as above] • UBO-6 :The settler(s) of the trust • UBO-7 :Trustee(s) of the Trust • UBO-8 :The Protector(s) of the Trust [if applicable]. • UBO-9 :The beneficiaries with 15% or more interest in the trust if they are natural person(s) • UBO-10 : Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership.

# FATCA/CRS DECLARATION FORM - FOR INDIVIDUAL

Applicant Name \_\_\_\_\_

## PART I - Please fill in the country for each of the following :

1. Country of :
  - a) Birth \_\_\_\_\_ b) Citizenship \_\_\_\_\_
  - c) Residence for Tax Purposes \_\_\_\_\_
2. US Person\* : ☐ Yes ☐ No

## PART II - Please note :

- a. If in all fields above, the country mentioned by you is India and if you do not have US person status, please proceed to **Part III** for signature.
- b. If for any of the above field, the country mentioned by you is not India and/or if your US person status is Yes, please provide the Tax Payer Identification Number (TIN) or functional equivalent\*\* as issued in the specific country in the table below :

i) TIN _____	Country of Issue _____
ii) TIN _____	Country of Issue _____
iii) TIN _____	Country of Issue _____
- a. In case any of the parameters in **Part I** indicates that you are a US person or a person resident outside of India for tax purpose and you do not have Taxpayer Identification Numbers/functional equivalent, please complete and sign the Self-Certification section given in **Part IV**.
- b. In case you are declaring US person status as 'No' but your Country of Birth is US, please provide document evidencing Relinquishment of Citizenship. If not available provide reasons for not having relinquishment certificate  
\_\_\_\_\_

Please also fill **Part IV** Self-Certification.

## PART III - Customer Declaration (Applicable for all customers)

- (i) Under penalty of perjury, I/we certify that :
  1. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. **(This clause is applicable only if the account holder is identified as a US person)**
  2. The applicant is an applicant taxable as a tax resident under the laws of country outside India. **(This clause is applicable only if the account holder is a tax resident outside of India)**
- (ii) I/We understand that **Abhinandan Stock Broking Pvt. Ltd.** is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. **Abhinandan Stock Broking Pvt. Ltd.** is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- (iv) I/We agree that as may be required by domestic regulators/tax authorities **Abhinandan Stock Broking Pvt. Ltd.** may also be required to report, reportable details to CDBT or close or suspend my account.
- (v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Signature : \_\_\_\_\_

Name : \_\_\_\_\_ Date (DD/MM/YYYY) : \_\_\_\_\_

#### **PART IV - Self-Certification :**

To be filled only if-

- (a) Name of the country in Part I is other than India and TIN or functional equivalent is not available, or
- (b) US person is mentioned as Yes in Part I, and TIN is not available

I confirm that I am neither a US person nor a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India. Therefore, I am providing the following document as proof of my citizenship and residency in India.

---

Signature

Document Proof submitted (Please tick document being submitted)

☐ Passport ☐ Election Id Card ☐ PAN Card ☐ Driving License ☐ UIDAI Letter ☐ NREGA Job Card ☐ Govt. Issued ID Card

---

**\* U.S. Person** means,

- (a) an individual, being a citizen or resident of the United States of America;
- (b) a partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;
- (c) a trust if,-
  - (i) a court within the United States of America would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust; and
  - (ii) one or more U.S. persons have the authority to control all substantial decisions of the trust; or
- (d) an estate of a decedent who was a citizen or resident of the United States of America;

#### **\*\* Functional Equivalent of TIN**

Many countries do not issue TIN to their taxpayers. However, such countries issue some other high integrity number with an equivalent level of identification (a functional equivalent). Examples of such numbers are-

- Social Security Number
- National Insurance Number
- Citizen Or Personal Identification Code Or Number
- Resident Registration Number

## FATCA/CRS DECLARATION FORM - FOR NON-INDIVIDUAL

Applicant Name \_\_\_\_\_

### PART I

A. Is the account holder a Government body/International Organization/listed company on recognized stock exchange:

☐ Yes ☐ No

If "No", then proceed to point B. If "yes" please specify name of stock exchange, if you are listed company \_\_\_\_\_ and proceed to sign the declaration.

B. Is the account holder a (Entity/Financial Institution) tax resident of any country other than India : ☐ Yes ☐ No

If "yes", then please fill of FATCA/ CRS Self certification Form. If "No", proceed to point C.

C. Is the account holder an Indian Financial Institution : ☐ Yes ☐ No

If "yes", please provide your GIIN, if any \_\_\_\_\_. If "No", proceed to point D.

D. Are the Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian citizen : ☐ Yes ☐ No

If "yes", (then please fill FATCA/ CRS self-certification form)). If "No", proceed to sign the declaration.

### CUSTOMER DECLARATION

( ) Under penalty of perjury, I/we certify that :

1. The applicant is:

- (i) An applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District to Columbia or any other states of the U.S.,
- (ii) An estate the income of which is subject to U.S. federal income tax regardless of the source thereof. **(This clause is applicable only if the account holder is identified as a US person)**

2. The applicant is an applicant taxable as a tax resident under the laws of country outside India.

- (i) I/We understand that **Abhinandan Stock Broking Pvt. Ltd.** is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. **Abhinandan Stock Broking Pvt. Ltd.** is not able to offer any tax advice on FATCA/CRS or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- (ii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- (iii) I/We agree that as may be required by domestic regulators/tax authorities **Abhinandan Stock Broking Pvt. Ltd.** may also be required to report, reportable details to CDBT or close or suspend my account.
- (iv) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Name of the Entity \_\_\_\_\_

Signature 1 \_\_\_\_\_ Signature 2 \_\_\_\_\_

Signature 3 \_\_\_\_\_ ( As per MOP)

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

## PART II

### Self-Certification Form (Entity) for Foreign Account Tax Compliance Act ("FATCA") and Common Reporting Standards(CRS)

#### Section 1 : Entity information

Name of Entity \_\_\_\_\_

Customer id (if existing) \_\_\_\_\_ Entity Constitution Type \_\_\_\_\_

Entity Identification type : ☐ Tax Identification Number (TIN) ☐ US GIIN ☐ Company Identification Number  
☐ Global Entity Identification Number (EIN) ☐ Other

Entity Identification No. \_\_\_\_\_

Entity Identification issuing country \_\_\_\_\_ Country of Residence for tax purpose \_\_\_\_\_

#### Section 2 : Classification of Non-Financial entities

I/We (on behalf of the entity) certify that the entity is:

a) An entity incorporated and taxable in US (Specified US person) : ☐ Yes ☐ No

*If "Yes", please provide your U.S. Taxpayer Identification Number (TIN) \_\_\_\_\_*

b) An entity incorporated and taxable outside of India (other than US) : ☐ Yes ☐ No

*If "Yes", please provide your TIN or its functional equivalent \_\_\_\_\_*

*Provide your TIN issuing country \_\_\_\_\_*

c) Please provide the following additional details if you are not a Specified US Person :

##### FATCA / CRS classification for Non-financial entities (NFFE)

☐ Active NFFE ☐ Passive NFFE without any controlling Person

☐ Passive NFFE with Controlling Person(s) : US ☐ Others ☐

☐ Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus  
**Abhinandan Stock Broking Pvt. Ltd.** is not required to do the reporting)

Please provide GIIN number : \_\_\_\_\_

#### Section 3 : Classification of financial institutions (including Banks)

I/We (on behalf of the entity) certify that the entity is :

a. An entity is a U.S. financial institution : ☐ Yes ☐ No

*If "Yes", (i) Please provide your Taxpayer Identification Number (TIN)*

*(ii) Please provide GIIN, if any \_\_\_\_\_*

*If "No", please tick one of the following boxes below :*

##### FATCA classification

**Please provide the Global Intermediary  
Identification number (GIIN) or other information where**

☐ Reporting Foreign Financial Institution in a Model 1  
Inter-Governmental Agreement ("IGA") Jurisdiction \_\_\_\_\_

☐ Reporting Foreign Financial Institution in a Model 2  
IGA Jurisdiction \_\_\_\_\_

☐ Participating FFI in a Non-IGA Jurisdiction \_\_\_\_\_

☐ Non-reporting FI \_\_\_\_\_

☐ Non-Participating FI \_\_\_\_\_

☐ Owner-Documented FI with specified US owners \_\_\_\_\_

## Section 4 : Controlling person declaration

If you are classified as “**Passive NFFE with Controlling Person(s)**” or “**Owner documented FFI**” or “**Specified US person**”, please provide the following details:

Name of controlling person	Correspondence Address	Country of residence for tax purpose	TIN	TIN issuing country	Controlling person type

Details	Controlling person 1	Controlling person 2	Controlling person 3	Controlling person 4	Controlling person 5
Identification Type					
Identification Number					
Occupation Type					
Occupation					
Birth Date					
Nationality					
Country of Birth					

## Section 5 : Declaration

(i) Under penalty of perjury, I/we certify that :

1. The number shown on this form is the correct taxpayer identification number of the applicant, and
2. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America (“U.S.”) or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof, or
3. The applicant Is an applicant taxable as a tax resident under the laws of country outside India.

(ii) I/We understand that **Abhinandan Stock Broking Pvt. Ltd.** is relying on this information for the purpose of determining the status of the applicant named above in compliance with CRS/FATCA. **Abhinandan Stock Broking Pvt. Ltd.** is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

(iii) I/We agree to submit a new form within 30 days if any information or certification on this form gets changed.

(iv) I/ We agree as may be required by Regulatory authorities, **Abhinandan Stock Broking Pvt. Ltd.** shall be required to comply to report, reportable details to CBDT or close or suspend my account.

(v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct and complete including the tax payer identification number of the applicant.

**I/We hereby confirm that details provided are accurate, correct and complete**

\_\_\_\_\_  
Authorized Signatories and Company Seal (if applicable)

Name \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_

## DEMAT DEBIT AND PLEDGE INSTRUCTION [DDPI]

(Execution of this document is not mandatory)

I/We Mr./Mrs./M/s (First holder) \_\_\_\_\_ (Second holder) \_\_\_\_\_  
\_\_\_\_\_, (Third holder) \_\_\_\_\_ S/o, D/o, W/o \_\_\_\_\_  
\_\_\_\_\_ residing at/ having registered office at \_\_\_\_\_,

\_\_\_\_\_ an Individual / a Sole Proprietary Concern / a Partnership Firm / a Body Corporate / Trust, registered / incorporated, under the provisions of the \_\_\_\_\_ (hereinafter referred to as "Beneficial Owner") wish to avail / have availed the broking / E-broking facilities and other services offered (hereinafter referred to as "Services"), by **ABHINANDAN STOCK BROKING PRIVATE LIMITED**, a Company incorporated under the Companies Act, 1956 and having its Regd. Office address at CITY POINT, 95, Sarat Bose Road, 3rd Floor, Kolkata - 700 029 (hereinafter referred to as "**Member**") and is a Member of the National Stock Exchange of India Ltd. (**NSE**) having Member ID 14336 and BSE Limited (**BSE**) having Member ID 6440, bearing SEBI Regn. No. INZ000202134 (hereinafter referred to as "**the Exchange**") and is also a "**Depository Participant**" registered with Central Depository Services (India) Limited (**CDSL**) having DP ID : 12082800 SEBI Regn. No. INZ000202134.

**WHEREAS** I am / We are investor(s) engaged in buying, selling and trading of securities in Cash Segment and / or dealing in F&O and Currency Derivative Segment of NSE / BSE through Member.

**AND WHEREAS** I/We hold a Beneficiary Account No. **12082800** \_\_\_\_\_ (BO-ID) with Depository Participant.

**NOW KNOW** I / WE ALL, do hereby, jointly and severally give my / our instruction to the Member and Depository Participant to exercise and perform the following acts, deeds and things as mentioned below:

Sl. No.	Purpose	Signature of Client
1	Transfer of securities held in the abovementioned Beneficial Owner Account towards Stock Exchange related to deliveries / settlement obligations arising out of trades executed by me / us on the Stock Exchange through <b>Abhinandan Stock Broking Pvt. Ltd.</b>	✓ 1st Holder
		✓ 2nd Holder
		✓ 3rd Holder
2	Pledging / re-pledging of securities in favour of Trading Member (TM) / Clearing Member (CM) / Clearing Corporation (CC) for the purpose of meeting margin requirements in connection with the trades executed by me / us on the Stock Exchange.	✓ 1st Holder
		✓ 2nd Holder
		✓ 3rd Holder
3	Mutual Fund transactions being executed on Stock Exchange order entry platforms	✓ 1st Holder
		✓ 2nd Holder
		✓ 3rd Holder
4	Tendering shares in open offers through Stock Exchange platforms	✓ 1st Holder
		✓ 2nd Holder
		✓ 3rd Holder



2. To issue / execute instructions for the purpose mentioned hereinabove in favour of any of the following Demat Accounts of **Abhinandan Stock Broking Pvt. Ltd.** :

Account Name	Depository	DPID	CLIENT ID
NSE Pool A/c	CDSL	12082800	00000058
NSE Early Pay-In A/c	CDSL	11000011	00019781
BSE Pool (Principal) A/c	CDSL	12082800	00000077
BSE Early Pay-In A/c	CDSL	11000010	00023783
TM CM Client Margin Pledge A/c	CDSL	12082800	00003876
TM CM Client Margin Pledge A/c	NSDL	IN300958	10297945
NSE Pool / CM-BP ID	NSDL	IN300958	10169170 (CM-BP ID IN518196)
BSE Pool / CM-BP ID	NSDL	IN300958	10175416 (CM-BP ID IN664405)

Signature of the Client	In case of HUF, Signature of Karta
✓ 1st Holder	
✓ 2nd Holder	
✓ 3rd Holder	
<b>Witness 1 :</b>	<b>Witness 2 :</b>
<b>Name and Address :</b>	<b>Name and Address :</b>
<b>Date :</b>	<b>We accept :</b>
<b>Place :</b>	<b>For Abhinandan Stock Broking Pvt. Ltd.</b>
	<b>Director / Authorised Signatory</b>

PHOTOGRAPH

Please affix your recent  
passport size photograph.

1st Holder

PHOTOGRAPH

Please affix your recent  
passport size photograph.

2nd Holder

PHOTOGRAPH

Please affix your recent  
passport size photograph.

3rd Holder

✓ \_\_\_\_\_  
Specimen Signature

✓ \_\_\_\_\_  
Specimen Signature

✓ \_\_\_\_\_  
Specimen Signature

Type of Account to be opened : ☐ DP ☐ TRADING

FOR OFFICE USE ONLY

Completed Account Opening Form Received on \_\_\_\_\_ at \_\_\_\_\_.

Particulars	Sole/1st Holder	2nd Holder	3rd Holder
Name			
KRA Status	Uploaded on _____	Uploaded on _____	Uploaded on _____
	Fetchd on _____	Fetchd on _____	Fetchd on _____
CKYC No.			
Risk Category			

## FOR OFFICE USE ONLY

Account Opened by : \_\_\_\_\_

Account Verified by : \_\_\_\_\_

Client ID : \_\_\_\_\_

UCC Code allotted to the Client : \_\_\_\_\_

	Documents verified with Originals	Client Interviewed By
Name of the Employee		
Employee Code		
Designation of the employee		
Date		
Signature		

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

\_\_\_\_\_  
Signature of the Authorised Signatory

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

Seal/Stamp of the stock broker

**DISCLOSURE OF PROPRIETARY TRADING** pursuant to SEBI Circular No. : SEBI/MRD/SE/Cir-42/2003 dated 19th Nov., 2003, NSE Circular No. : NSE/INVG/PRE/2003/16 dated 25th Nov., 2003 and BSE Notice No. 20031125-7 dated 25 November, 2003 :

We, **ABHINANDAN STOCK BROKING PVT. LTD.**, are also engaged in Proprietary trading apart from Client based business.

Dated : \_\_\_\_\_

From :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To  
**Abhinandan Stock Broking Pvt. Ltd.**  
CITY POINT, 3rd Floor  
95, Sarat Bose Road  
Kolkata - 700 029

**Ref. : Acknowledgement for the receipt of documents**

Dear Sir,

This is to acknowledge and declare that

- ☐ I/We have received a photocopy of the KYC (full booklet), duly executed with you, to my/our satisfaction including my / our Unique Client Code (Trading Code).
- ☐ I/We have (☐ Physically ☐ Electronically) received, read and understood the Rights & Obligations, Risk Disclosure Documents, Guidance Note, Rights and Obligations of Beneficial Owner and Depository Participant” as prescribed by SEBI and Depositories.
- ☐ I/We have received a copy on Voluntary freezing/Blocking of Trading Accounts
- ☐ I/We have received a copy of Most Important Terms and Conditions (MITC)
- ☐ I/We have received a photocopy of DDPI.
- ☐ I/We have received Charge Structure & Client Master Report.
- ☐ I/We have received, read and understood the Policies and Procedures.
- ☐ The email id noted with you (for ECN and other purposes) is correct.

Thanking you,

Yours truly,

✓ \_\_\_\_\_  
Signature of the Client

Client Code \_\_\_\_\_



**Invest & grow**

**JULY 2025**

Regd. Office : CITY POINT, 95, Sarat Bose Road, 3rd Floor, Kolkata - 700 029  
Phone : 4005-5430 ❖ E.mail : [info@abhinandangroup.com](mailto:info@abhinandangroup.com)  
Investors' Grievances Redressal E.mail : [complaints@abhinandangroup.com](mailto:complaints@abhinandangroup.com)  
Website : [www.abhinandangroup.com](http://www.abhinandangroup.com)