

INA STOCK BROKING CO. PVT. LTD.

CIN : U67120MH1997PTC112247

DP ID : 30600 SEBI REGN. NO. IN-DP-CDSL-209-2003

Stock Exchange, Pm -16, Mezzanine Floor, Rotunda Bldg.,

Mumbai Samachar Marg, Fort, Mumbai - 400 001.

Tel. No.: +91 - 22- 3027 6120 - 125 ● Fax: +91 - 22 - 2272 1760

Email : ina217@gmail.com

DEPOSITORY PARTICIPANT A/c OPENING FORM

Name _____

A/c. No.

1	2	0	3	0	6	0	0									
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Ref. No. _____

Branch _____

GENERAL INSTRUCTIONS AND CHECK-LIST OF DOCUMENTS FOR FULFILLING REQUIREMENTS IN THE DEPOSITORY ACCOUNT OPENING




All INASTOCK BROKING CO. PVT. LTD. (INBCPL) staff and prospective Beneficiary Owners are requested to go through the following very carefully to ensure completion of required documentation at one go. The following are in line with the mandatory requirements stipulated by SEBI and the Depository. Constituents are to sign at all places marked "X" in the kit.

DP Form & Attachments : INDIVIDUALS




All Mandatory : (please tick the boxes / circles as applicable)

- KYC form & recent photograph affixed, duly signed across the face.
- E-mail ID / address of the BO (in view of Holdings, Transactions, bills)
- Date of stamp paper franked should not be prior to 6 months of the date of signing by the constituent or member.
- PAN Card with photograph

Any one of the following additional identity Proof : (in case of name mismatch with PAN Card)

- Passport  Passport Validity (date of expiry) more than 6 months from the date of our acceptance.
- Driving License  DL validity (date of expiry) more than 6 months from the date of our acceptance.
-  (Learner's license not acceptable as proof)
- UID (Aadhar) Card
- Voters Card
- Identity card/document with applicant's Photo issued by:
 - Central/State Government and its Departments
 - Public Sector Undertakings
 - Public Financial Institutions
 - Professional Bodies such as ICAI, ICWAI,
 - ICSI, Bar Council etc., to their members
 - Statutory / Regulatory Authorities
 - Scheduled Commercial Banks
 - Colleges affiliated to Universities
 - Credit cards / Debit cards issued by Banks

Any one of the following as Address Proof :

- Ration Card
- Passport  Passport Validity (date of expiry) more than 6 months from the date of our acceptance.
- Driving License  DL validity (date of expiry) more than 6 months from the date of our acceptance.
-  (Learner's license not acceptable as proof)
- UID (Aadhar) Card
- Voters Card
- Residence Telephone Bill (not more than three months old)
- Bank Passbook Electricity Bills (not more than three months old)
- Identity card/document with applicant's Photo issued by: Leave & License agreement/ Agreement for sale
 - Central/State Government and its Departments
 - Public Sector Undertakings
 - Public Financial Institutions
 - Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their members; and Self declaration by High Court & Supreme Court judges, giving the new address in respect of their own accounts.
 - If the correspondence address is different from the permanent address. For this purpose, in addition to the documents prescribed as proof of permanent address above, and any one of the following documents may be accepted as proof of correspondence address:
 - Electricity Bills (not more than three months old)
 - Residence Telephone Bill (not more than three months old)
 - Consumer Gas Card
 - Leave & License agreement
 - Purchase agreement
 - Office address - certificate from the employer

Individual Investor (Minor) – All Mandatory

- PAN card of Minor & Guardian
- Birth certificate
- Proof of address and identity documents of the Guardian as per list above
- One passport size photograph of minor, guardian and each of the applicant with their signatures across the photograph
- [Guardian will sign across the photograph of Minor.]

Note :

- All photocopies of proof submitted must be checked with originals and to be signed by constituent and counter signed by INA staff with stamp "Verified with Originals"
- In case where Nominee is minor his Guardian details are mandatory.
- Nominee cannot be among one of the Account Holders. Only individuals can appoint Nominee and be appointed as Nominee. Non Individuals including Society, Trust, Body Corporate, Partnership firm, or Hindu Undivided Family and holder of the POA neither can nominate nor be appointed as a Nominee.

NON - INDIVIDUALS

HUF – Mandatory points a, b, c

- a) All the documents as mentioned above for account opening of Individual investors will be applicable.
- b) Declaration giving details of the family members of the HUF with their names, date of birth and relationship with the Karta.
HUF PAN CARD
- c) [HUF accounts cannot be opened with joint holder(s) and nominee cannot be appointed.]
[In the account opening form, the Karta should sign under the HUF stamp.]
[In the event of death of Karta, his death certificate and succession certificate must be taken]

Corporates – Mandatory Points a, b, c, d, e

- a) Corporate PAN Card
- b) Certified true copy of Board Resolution for person authorised by the Board to act as Authorised Signatory(ies). [The resolution may specify the manner of operation of the account and authority given to the authorized signatories to open and operate the account.]
- c) Names of the Authorised Signatories, Designation, and their Specimen Signatures duly verified by MD / Company Secretary.
- d) Memorandum and Articles of Association of the Corporate Investor. [Original copy or Certified True copy by Company Secretary or Director]
- e) One Passport size photograph of each authorized signatory with their signatures across the photograph.
- f) Power of Attorney, if any
Note – Point a) & b) original copy on letterhead of the Company

NRI –Mandatory points a, b, c, d

- a) PAN Card
- b) Proof of foreign address and Indian address (if any)
- c) Proof of identity
- d) Bank a/c details
- e) Power of Attorney, if any
- f) Preferably a copy of passport
Note – Point a) Identity & address as per list provided in individual

Societies – Mandatory points a, b, c, d, e, f, g

- a) PAN Card
- b) Copy of Certificate of Registration under the Societies Registration Act, 1860.
- c) List of Managing Committee members.
- d) Certified true copy of Committee Resolution for persons authorised by the Committee to act as Authorised Signatory (ies).
- e) Names of the Authorised signatories, Designation, and their Specimen Signatures.
- f) Copy of Committee Rules and Bye Laws
- g) One Passport size photograph of each of the authorized signatory with their signatures across the face of the photograph.
Note – All the copies provided must be certified true copy with society seal.

Trust – Mandatory points a, c, d, e, f, g

- a) PAN Card
- b) Trust Deed and Rules, if any.
- c) Members on the Board of Trustees.
- d) Certificate of Registration of Trust under the Societies Registration Act / Public Trust Act.
- e) Certificate true copy of Board Resolution for persons authorized by the Board to act as Authorised Signatory (ies).
- f) Names of the Authorised Signatories, Designation, and their Specimen Signatures.
- g) One Passport size photograph of each of the authorised signatory with their signatures across the face of the photograph.
- h) Power of Attorney, if any
[In case the trust is unregistered, the account should be opened in the names of the trustees under “Individual” category.
The proof of address and identity documents of the trustees should be obtained for account opening. The board of trustees shall specify the names of the trustee/s who shall hold the demat account with CDSL]

**NOTE: All photocopies of proof submitted to be signed by constituent and counter signed by-INA staff with remarks “Verified
NOTE: with Originals**

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



Application No. :

Please fill in ENGLISH and in BLOCK LETTERS

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (As appearing in supporting identification document).

Name

Father's / Spouse Name

2a. Gender Male Female 2b. Marital Status Single Married 2c. Date of Birth

3. Nationality Indian Other (please specify) _____

4. Status Please tick (✓) Resident Individual Non Resident Foreign National (Passport Copy Mandatory for NRI's & Foreign Nationals)

5. PAN

 Please enclose a duly attested copy of your PAN Card

Unique Identification Number (UID) / Aadhaar No. if any: _____

6. Proof of Identity submitted for PAN exempt cases Please tick (✓)

UID (Aadhaar) Passport Votor ID Driving Licence Others _____ (please see guideline 'D' overleaf)

PHOTOGRAPH

Please affix the recent passport size photograph and sign across it

B. Address Details (please see guidelines overleaf)

1. Address of Residence / Correspondence

City/Town/Village _____ Pin Code _____

State _____ Country _____

2. Contact Details

Tel. (Off.) (ISD) (STD)		Tel. (Res) (ISD) (STD)	
Mobile (ISD) (STD)		Fax (ISD) (STD)	
E-mail Id			

3. Proof of Address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport Ration Card Aadhaar Card Registered Lease/Sale Agreement of Residence Driving License Voter Identity Card Passbook

*Latest Bank A/c Statement *Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Gas Bill Others (Please specify) _____

*Not more than 3 month old. Validity/Expiry date of proof of address submitted

4. Permanent Address of Resident Applicant if different from B1 above OR Overseas Address (Mandatory) for Non-Resident Applicant

City/Town/Village _____ Pin Code _____

State _____ Country _____

5. Proof of Address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport Ration Card Aadhaar Card Registered Lease/Sale Agreement of Residence Driving License Voter Identity Card Passbook

*Latest Bank A/c Statement *Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Gas Bill Others (Please specify) _____

*Not more than 3 month old. Validity/Expiry date of proof of address submitted

C. Other Details (please see guidelines overleaf)

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

Net-worth in ₹. (*Net woth should not be older than 1 year) _____ as on (date)

2. Occupation (please tick(✓) any one and give brief details):

Private Sector Service Public Sector Government Service Business Professional Agriculturist Retired Housewife

Student Forex Dealer Others (please specify) _____

3. Please tick, if applicable: Politically Exposed Person Related to a Politically Exposed Person

For definition of PEP, please refer guideline overleaf

4. Any other Information: _____

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.

Place : _____ Date : _____

SIGNATURE OF APPLICANT

FOR OFFICE USE ONLY

INA STOCK BROKING CO. PVT. LTD.
(POS CODE: 1200000217)

(Originals Verified) Self Certified Document Copies received

(Attested) True Copies of documents received

Main Intermediary _____

Seal/Stamp of the intermediary should contain

Staff Name

Designation

Name of the Organization

Signature

Date

IPV Done on

INA STOCK BROKING CO. PVT. LTD.

Staff Name

Designation

Signature

Date

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/ PIO Card/ OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

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

1. PAN card with photograph. This is mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D)
2. Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): - List of documents admissible as Proof of Address:

(*Documents having an expiry date should be valid on the date of submission.)

1. Passport/ Voters Identity Card/ Ration Card/ Registered Lease or Sale Agreement of Residence/ Driving License/ Flat Maintenance bill/ Insurance Copy.

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook — Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN

(*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, 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.

ACCOUNT OPENING FORM INDIVIDUALS

INA STOCK BROKING CO. PVT. LTD.
SEBI REGN. NO.: IN-DP-CDSL-209-2003 DP ID: 30600
 Stock Exchange, PM - 16, Mezzanine Floor, Rotunda Bldg.,
 Mumbai - 400 001. Tel. No. + 91 22 3027 6120 - 125
 Fax No. +91 22 2272 1760

ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT

(To be filled by the Depository Participant)

Application No.		Date														
DP Internal Reference No.																
DP ID	1	2	0	3	0	6	0	0	Client ID							

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

I/We request you to open a Depository Account in my/our names as per the following details:

HOLDER'S DETAILS :

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

Name* _____

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

TYPE OF ACCOUNT (please tick whichever is applicable)

<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual Director	<input type="checkbox"/> Individual Director's Relative
	<input type="checkbox"/> Individual HUF/AOP	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Minor
	<input type="checkbox"/> Individual Margin Trading a/c. (Mantra)		<input type="checkbox"/> Other (Specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable	<input type="checkbox"/> NRI Repatriable Promoter
	<input type="checkbox"/> NRI Non-Repatriable Promoter	<input type="checkbox"/> NRI - Depository Receipts	<input type="checkbox"/> Other (Specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National-Depository Receipts	<input type="checkbox"/> Other (Specify) _____

DETAILS OF GUARDIAN (in case the account holder is minor)

Guardian's Name	PAN								
Relationship with the applicants									

I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No

Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	

I/We wish to receive dividend/interest directly in to my bank account 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
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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.
In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

OTHER DETAILS

1. Gross Annual Income details (Please Specify): Income range per annum	
<input type="checkbox"/> Up to Rs. 1,00,000/- <input type="checkbox"/> Rs. 1,00,000/- to Rs. 5,00,000/- <input type="checkbox"/> Rs. 5,00,000/- to Rs. 10,00,000/- <input type="checkbox"/> Rs. 10,00,000/- to Rs. 25,00,000/- <input type="checkbox"/> More than Rs. 25,00,000/-	
OR	
Net worth as on Date: _____ Rs. _____ (Net worth should not be older than 1 year)	
2. Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Others (Specify)_____
3. Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP)
4. Any other information	

SMS Alert Facility Refer to Terms & Conditions given as Annexure 2.4	Mobile No.: +91-..... [Mandatory, if you are giving Power of Attorney (POA)] (if POA is not granted & you do not wish to avail of this facility, cancel this option).									
Transactions Using Secured Texting Facility (TRUST). Refer to Terms and Conditions Annexure – 2.6	I wish to avail the TRUST facility using 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 I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">Stock Exchange Name / ID</th> <th style="width: 33%;">Clearing Member Name</th> <th style="width: 33%;">Clearing Member ID (Optional)</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)						
Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)								
Easi	To register for easi, please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balance, transactions and value of the portfolio online.									

NOMINATION DETAILS (For Individual Only)

Nomination Registration No.		Date							
-----------------------------	--	------	--	--	--	--	--	--	--

I/We the Sole Holder / Joint Holders / Guardian (in case of minor) hereby declare that :

I/We **do not wish to nominate any one for this demat account.**

[Strike out what is not applicable] [Signature of all account holder should be obtained on this form]

I/We **nominate** the following person/s who is/are entitled to receive security balances lying in my/our account, particulars where of are given below, in the event of the death.

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name			
* First Name	_____	_____	_____
Middle Name	_____	_____	_____
* Last Name	_____	_____	_____
*Address			
*City			
*State			
*Pin			
*Country			
Telephone / Mobile No.			
Fax No.			
*PAN No.			
UID			
Email ID			
*Relationship with BO			
Date of Birth			
Name of the Guardian of Nominee (if the nominee is minor)			
* First Name	_____	_____	_____
Middle Name	_____	_____	_____
* Last Name	_____	_____	_____
*Address of the Guardian of nominee			
*City			
*State			
*Pin			
*Country			
Age			
Telephone / Mobile No.			
Fax No.			
Email ID			
*Relationship of the Guardian with the Nominee:			
*Percentage of allocation of securities:	[]	[]	[]
*Residential Securities [please tick any one nominee] If tick not marked default will be first nominee]:			
	[]	[]	[]

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

* **Marked is Mandatory field**

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

Note: One witness shall attest signature(s) thumb impression(s)

DETAILS OF THE WITNESS

	First Witness	Second Witness
Name of Witness		
Address of Witness		
Signature of Witness		

I/We have received and read 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 date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me/us in this form. I/We further agree that any false / misleading information given by me/us or suppression of any material information will render my account liable for termination and suitable action.

	First / Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signature			

Signature should be preferably in black ink)

ACCOUNT OPENING FORM NON-INDIVIDUALS

INA STOCK BROKING CO. PVT. LTD.
SEBI REGN. NO.: IN-DP-CDSL-209-2003 DP ID: 30600
 Stock Exchange, PM - 16, Mezzanine Floor, Rotunda Bldg.,
 Mumbai - 400 001. Tel. No. + 91 22 3027 6120 - 125
 Fax No. +91 22 2272 1760

ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT

(For entities other than Individuals)

(To be filled by the Depository Participant)

Application No.		Date														
DP Internal Reference No.																
DP ID	1	2	0	3	0	6	0	0	Client ID							

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

I/We request you to open a Depository Account in my/our names as per the following details:

HOLDER'S DETAILS :

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

Name* _____

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

TYPE OF ACCOUNT (please tick whichever is applicable)

Status	Sub-Status (To be filled by the DP)
<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"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify) _____	
SEBI Registration No. (if applicable)	SEBI Registration Date
RBI Registration No. (if applicable)	RBI Registration Date
ROC Registration No. (if applicable)	ROC Registration Date
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Other (Specify) _____

I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to share the email ID with the RTA	<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)	

CLEARING MEMBER DETAILS (To be filled by CMs only)

Name of Stock Exchange			
Name of CC / CH			
Clearing Member ID		Trading Member ID	

I/We wish to receive dividend/interest directly in to my bank account 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
---	--

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.
- In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

OTHER DETAILS**1. Gross Annual Income details (Please Specify): Income range per annum**

Up to Rs. 1,00,000/- Rs. 1,00,000/- to Rs. 5,00,000/- Rs. 5,00,000/- to Rs. 10,00,000/- Rs. 10,00,000/- to Rs. 25,00,000/-
 Rs. 25,00,000/- to Rs. 1,00,00,000/- More than Rs. 1,00,00,000/-

OR

Net worth as on Date: _____ Rs. _____ (Net worth should not be older than 1 year)

Please tick If any of the authorised signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors is either Politically Exposed Person (PEP) or Related to Politically Exposed Person (RPEP) Please provide details as per Annexure 2.2 A.

4. Any other information

SMS Alert Facility Refer to Terms & Conditions given as Annexure 2.4	Mobile No.: +91-..... [Mandatory, if you are giving Power of Attorney (POA)] (if POA is not granted & you do not wish to avail of this facility, cancel this option).									
Transactions Using Secured Texting Facility (TRUST). Refer to Terms and Conditions Annexure – 2.6	I wish to avail the TRUST facility using 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 I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">Stock Exchange Name / ID</th> <th style="width: 33%;">Clearing Member Name</th> <th style="width: 33%;">Clearing Member ID (Optional)</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)						
Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)								
Easi	To register for easi, please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balance, transactions and value of the portfolio online.									

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

	Sole / First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Designation			
Signature			

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

Signature should be preferably in black ink)

[Select one of the option given below]

I / We hereby state that:

OPTION 1:

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me/us immediately on opening my/our CDSL account though I/We have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager.

OR

OPTION 2:

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I/We have issued a POA / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

Your faithfully

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

DECLARATION BY HUF

Name: _____

Address: _____

Date: _____

To,
INA STOCK BROKING CO. PVT. LTD.
Stock Exchange, PM - 16,
Mezzanine Floor, Rotunda Bldg.,
Mumbai - 400 001.

Dear Sir,

We, the undersigned members of _____ (HUF)
are desirous of opening a Demat Account in the above-mentioned name with you. The said account will be operated by
_____ (Karta) on behalf
of _____ (HUF). We hereby
undertake that all the transaction undertaken by the said HUF shall be binding not only the present members of the said joint
family (both adults and minor) but also on all future members thereof (both adults and minor) and all persons entitled to a share
therein and ourselves personally.

Also that whenever any change occurs in the management or in the constitution of the said joint family of the whatsoever nature,
we undertake to give notice thereof to you.

Thanking you,
Yours faithfully,

Members of _____

Sr. No.	Name of Member	Relationship	Date of Birth	Signature	Sex
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

INA STOCK BROKING CO. PVT. LTD.

Stock Exchange, PM-16, Mezzanine Floor, Rotunda Bldg.,
Mumbai Samachar Marg, Fort, Mumbai - 400 001.
Tel. No.: +91-22-3027 6120 - 125 ● Fax : +91-22-2272 1760

SCHEDULE (A SCHEDULE OF CHARGES FOR CLIENTS)

Sr. No.		
1	Annual Maintenance	NIL
2	Mkt. / Off Mkt. Purchase	NIL
3	Mkt. / Off Mkt. Sales	NIL
4	Pledge (Invocation.Creation/Closure)	NIL
5	Demat	NIL
7	Remat	NIL
8	Custody Charges	NIL

BSDA REQUIRED YES NO

A/C. No.	1	2	0	3	0	6	0	0								
----------	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--

Name : _____

Sign. :   
(First Holder) (Second Holder) (Third Holder)

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

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

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

Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.
5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
6. The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.

9. If the BO finds that the information such as mobile number etc., has been changed with out proper authorization, the BO should immediately inform the DP in writing.

Fees:

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

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO’s personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository gives no warranty with respect to the quality of the service provided by the service provider. The Depository will not be liable for any unauthorized use or access to the information and/ or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by any third person.

Liability and Indemnity:

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

Amendments:

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

Governing Law and Jurisdiction:

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in Mumbai.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.

I/We have read and understood the terms and conditions mentioned above and agree to abide by them and any amendments thereto made by the depository from time to time. I/ we further undertake to pay fee/ charges as may be levied by the depository from time to time.

I/ We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the BOs would be required to take up the matter with their DP.

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

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

BOID	1	2	0	3	0	6	0	0								
	(Please write your 8 digit DPID)								(Please write your 8 digit Client ID)							

Sole / First Holder’s Name : _____

Second Holder’s Name : _____

Third Holder’s Name : _____

Mobile Number on which messages are to be sent

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

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

The mobile number is registered in the name of : _____

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

Signatures: _____ First Holder _____ Second Holder _____ Third Holder

Place : _____ Date : _____

Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories

General Clause:

1. The Beneficial Owner and the Depository participant (DP) shall be bound by the provisions of the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996, Rules and Regulations of Securities and Exchange Board of India (SEBI), Circulars/Notifications/Guidelines issued there under, Bye Laws and Business Rules/Operating Instructions issued by the Depositories and relevant notifications of Government Authorities as may be in force from time to time.
2. The DP shall open/activate demat account of a beneficial owner in the depository system only after receipt of complete Account opening form, KYC and supporting documents as specified by SEBI from time to time.

Beneficial Owner information:

3. The DP shall maintain all the details of the beneficial owner(s) as mentioned in the account opening form, supporting documents submitted by them and/or any other information pertaining to the beneficial owner confidentially and shall not disclose the same to any person except as required by any statutory, legal or regulatory authority in this regard.
4. The Beneficial Owner shall immediately notify the DP in writing, if there is any change in details provided in the account opening form as submitted to the DP at the time of opening the demat account or furnished to the DP from time to time.

Fees/Charges/Tariff:

5. The Beneficial Owner shall pay such charges to the DP for the purpose of holding and transfer of securities in dematerialized form and for availing depository services as may be agreed to from time to time between the DP and the Beneficial Owner as set out in the Tariff Sheet provided by the DP. It may be informed to the Beneficial Owner that "no charges are payable for opening of demat accounts"
6. In case of Basic Services Demat Accounts, the DP shall adhere to the charge structure as laid down under the relevant SEBI and/or Depository circulars/directions/notifications issued from time to time.
7. The DP shall not increase any charges/tariff agreed upon unless it has given a notice in writing of not less than thirty days to the Beneficial Owner regarding the same.

Dematerialization:

8. The Beneficial Owner shall have the right to get the securities, which have been admitted on the Depositories, dematerialized in the form and manner laid down under the Bye Laws, Business Rules and Operating Instructions of the depositories.

Separate Accounts:

9. The DP shall open separate accounts in the name of each of the beneficial owners and securities of each beneficial owner shall be segregated and shall not be mixed up with the securities of other beneficial owners and/or DP's own securities held in dematerialized form.
10. The DP shall not facilitate the Beneficial Owner to create or permit any pledge and /or hypothecation or any other interest or encumbrance over all or any of such securities submitted for dematerialization and/or held in demat account except in the form and manner prescribed in the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996 and Bye-Laws/Operating Instructions/Business Rules of the Depositories.

Transfer of Securities:

11. The DP shall effect transfer to and from the demat accounts of the Beneficial Owner only on the basis of an order, instruction, direction or mandate duly authorized by the Beneficial Owner and the DP shall maintain the original documents and the audit trail of such authorizations.
12. The Beneficial Owner reserves the right to give standing instructions with regard to the crediting of securities in his demat account and the DP shall act according to such instructions.

Statement of account:

13. The DP shall provide statements of accounts to the beneficial owner in such form and manner and at such time as agreed with the Beneficial Owner and as specified by SEBI/depository in this regard.
14. However, if there is no transaction in the demat account, or if the balance has become Nil during the year, the DP shall send one physical statement of holding annually to such BOs and shall resume sending the transaction statement as and when there is a transaction in the account.
15. The DP may provide the services of issuing the statement of demat accounts in an electronic mode if the Beneficial Owner so desires. The DP will furnish to the Beneficial Owner the statement of demat accounts under its digital signature, as governed under the Information Technology Act, 2000. However if the DP does not have the facility of providing the statement of demat account in the electronic mode, then the Participant shall be obliged to forward the statement of demat accounts in physical form.
16. In case of Basic Services Demat Accounts, the DP shall send the transaction statements as mandated by SEBI and/or Depository from time to time.

Manner of Closure of Demat account:

17. The DP shall have the right to close the demat account of the Beneficial Owner, for any reasons whatsoever, provided the DP has given a notice in writing of not less than thirty days to the Beneficial Owner as well as to the Depository. Similarly, the Beneficial Owner shall have the right to close his/her demat account held with the DP provided no charges are payable by him/her to the DP. In such an event, the Beneficial Owner shall specify whether the balances in their demat account should be transferred to another demat account of the Beneficial Owner held with another DP or to rematerialize the security balances held.
18. Based on the instructions of the Beneficial Owner, the DP shall initiate the procedure for transferring such security balances or rematerialize such security balances within a period of thirty days as per procedure specified from time to time by the depository. Provided further, closure

of demat account shall not affect the rights, liabilities and obligations of either the Beneficial Owner or the DP and shall continue to bind the parties to their satisfactory completion.

Default in payment of charges:

19. In event of Beneficial Owner committing a default in the payment of any amount provided in Clause 5 & 6 within a period of thirty days from the date of demand, without prejudice to the right of the DP to close the demat account of the Beneficial Owner, the DP may charge interest at a rate as specified by the Depository from time to time for the period of such default.
20. In case the Beneficial Owner has failed to make the payment of any of the amounts as provided in Clause 5&6 specified above, the DP after giving two days notice to the Beneficial Owner shall have the right to stop processing of instructions of the Beneficial Owner till such time he makes the payment along with interest, if any.

Liability of the Depository:

21. As per Section 16 of Depositories Act, 1996,
 1. Without prejudice to the provisions of any other law for the time being in force, any loss caused to the beneficial owner due to o the negligence of the depository or the participant, the depository shall indemnify such beneficial owner.
 2. Where the loss due to the negligence of the participant under Clause (1) above, is indemnified by the depository, the depository shall have the right to recover the same from such participant.

Freezing / Defreezing of accounts:

22. The Beneficial Owner may exercise the right to freeze/defreeze his/her demat account maintained with the DP in accordance with the procedure and subject to the restrictions laid down under the Bye Laws and Business Rules/Operating Instructions.
23. The DP or the Depository shall have the right to freeze/defreeze the accounts of the Beneficial Owners on receipt of instructions received from any regulator or court or any statutory authority.

Redressal of Investor grievance:




24. The DP shall redress all grievances of the Beneficial Owner against the DP within a period of thirty days from the date of receipt of the complaint.

Authorized representative:

25. If the Beneficial Owner is a body corporate or a legal entity, it shall, along with the account opening form, furnish to the DP, a list of officials authorized by it, who shall represent and interact on its behalf with the Participant. Any change in such list including additions, deletions or alterations thereto shall be forthwith communicated to the Participant.

Law and Jurisdiction:

26. In addition to the specific rights set out in this document, the DP and the Beneficial owner shall be entitled to exercise any other rights which the DP or the Beneficial Owner may have under the Rules, Bye Laws and Regulations of the respective Depository in which the demat account is opened and circulars/notices issued there under or Rules and Regulations of SEBI.
27. The provisions of this document shall always be subject to Government notification, any rules, regulations, guidelines and circulars / notices issued by SEBI and Rules, Regulations and Bye-laws of the relevant Depository, where the Beneficial Owner maintains his/ her account, that may be in force from time to time.
28. The Beneficial Owner and the DP shall abide by the arbitration and conciliation procedure prescribed under the Bye-laws of the depository and that such procedure shall be applicable to any disputes between the DP and the Beneficial Owner.
29. Words and expressions which are used in this document but which are not defined herein shall unless the context otherwise requires, have the same meanings as assigned thereto in the Rules, Bye-laws and Regulations and circulars/notices issued there under by the depository and / or SEBI.
30. Any changes in the rights and obligations which are specified by SEBI/Depositories shall also be brought to the notice of the clients at once.
31. If the rights and obligations of the parties hereto are altered by virtue of change in Rules and regulations of SEBI or Bye-laws, Rules and Regulations of the relevant Depository, where the Beneficial Owner maintains his/her account, such changes shall be deemed to have been incorporated herein in modification of the rights and obligations of the parties mentioned in this document.

	First / Sole Holder	Second Holder	Third Holder
Name			
Signature			

POWER OF ATTORNEY

TO ALL WHOME THESE PRESENT SHALL COME, I/We 1) _____
2) _____ 3) _____
residing at/having its registered office at _____
_____ send greetings.

Whereas I/We hold beneficial owner account number

1	2	0	3	0	6	0	0												
---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--

 with Central Depository Services (India) Limited (CDSL). through **INA STOCK BROKING CO. PVT. LTD.** registered with securities and Exchange Board of India (SEBI).

And Whereas I/we am/are desirous to buy and sell securities through **INA STOCK BROKING CO. PVT. LTD.** who is a stock broker registered with SEBI and member of recognized stock exchange/s.

And Whereas I/we am/are desirous of appointing **INA STOCK BROKING CO. PVT. LTD.** as my/our constituent attorney to operate my/our beneficial owner account on my/our behalf for a limited purpose in the manner hereinafter appearing and subject to conditions as provided herein.

NOW KNOW YOU ALL AND THESE PRESENTS WITNESS that I/We do hereby nominate, constitute and appoint **INA STOCK BROKING CO. PVT. LTD.**, (hereinafter referred to as "the stock broker") as my true and lawful attorney and authorise it to perform the following functions on my behalf.

- i. To transfer securities held in my/our aforementioned beneficial owner account(s) or any other account informed by me in writing to the stock broker from time to time to the demat account nos. **BSE POOL 1203060000000035, 1203060000000041 & IN602173 & NSE POOL 1203060000010284 & IN514231** of the stock broker maintained for the purpose of settlement of trades and margin obligations arising out of trades executed by me/us on any recognised stock exchange through the stock broker, However, the said power will be restricted to only transfer of securities to the Clearing Member ID allotted to the stock broker by any existing or future exchange that the stock broker has joined as a member or to any demat accounts linked to the said Clearing Member ID provided that I/we have executed a Client Member Agreement with the Stock Broker for such Exchange.
- ii. To pledge the securities in favour of the stock broker for the limited purpose of meeting my/our margin requirements in connection with the trades executed by me/us on any recognized stock exchange through the stock broker.
- iii. To return to me/us, the securities or funds that may have been received by the stock broker erroneously or those securities or funds that the stock broker was not entitled to receive from me/us.
- iv. To send consolidated summary of my/our scrip-wise buy and sell position taken with average rates to me/us by way of SMS/ email on a daily basis, notwithstanding any other document to be disseminated as specified by SEBI from time to time.
- v. To apply for various products like Mutual Funds, Public issues (shares as well as debentures), rights, offer of shares, tendering shares in open offers etc. pursuant to oral/written/electronic instructions given by me/us to the stock broker. I/We ratify the instructions given by the aforesaid stock broker to the depository participant named hereinabove in manner specified herein.

I/We further agree and confirm that the powers and authorities conferred by this Power of Attorney shall continue until it is revoked (without notice) in writing by me and that the said revocation shall be effective from the date on which the revocation notice is received by the stock broker in his office at PM 16, Rotunda Building, Stock Exchange, Mezzanine Floor, Dalal Street, Fort, Mumbai - 400 001.

Signed and delivered) _____
By the within named Beneficial Owner/s) _____
_____) _____
_____) _____
_____) _____
In the presence of) _____
_____) _____
_____) _____
_____) _____

I Accept
For **INA STOCK BROKING CO. PVT. LTD.**
PM 16, Mezzanine Floor, Stock Exchange, Rotunda Building,
Dalal Street, Fort, Mumbai - 400 001.

Authorised Signatory / Director

(First Holder)

(Second Holder)

(Third Holder)

(To be filled by the Depository Participant)

DP ID	1	2	0	3	0	6	0	0	Client ID					
--------------	---	---	---	---	---	---	---	---	------------------	--	--	--	--	--

	First / Sole Holder / Authorised Signatory	Second Holder / Authorised Signatory	Third Holder / Authorised Signatory
Name			
Specimen Signatures			

ACKNOWLEDGEMENT RECEIPT

Application No. :

Date : _____

We hereby acknowledge the receipt of the Account Opening Application Form :

Name of the Sole / First Holder _____

Name of Second joint Holder _____

Name of Third joint Holder _____

Nomination in favor of _____ Registration No. _____ Registered on _____

along with (a) Cheque No. _____ dated _____ for _____ drawn on _____ towards _____

along with (a) Cheque No. _____ dated _____ for _____ drawn on _____ towards _____

Depository Participant Seal and Signature