

|  |  |              |                |         | SARAL         |               |        |              |            |              | 9           | parouro   |
|--|--|--------------|----------------|---------|---------------|---------------|--------|--------------|------------|--------------|-------------|-----------|
| A  | ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUALS TRADING IN CASH SEGMENT  |              |                |         |               |               |        |              | GRAPH      |              |             |           |
| ιĸ   | I KYC - Please fill this form in BLOCK LETTERS. Please affix your  |              |                |         |               |               |        |              | affix your |              |             |           |
| A. IDENTITY DETAILS  |  |              |                |         |               |               |        | assport size |            |              |             |           |
| 1.   |  |              |                |         |               |               |        |              |            | aph and      |             |           |
|  | Name of the Applicant:   |              |                |         |               |               |        |              |            |              |             |           |
| 2.<br>3.   | Father's/ Spouse Name:   |              |                |         |               |               |        |              |            |              |             |           |
|  |  |              |                |         |               |               |        |              |            |              |             |           |
| 4.<br>5.   |  |              |                |         |               |               |        |              |            |              |             |           |
| 5.<br>6.   |  |              |                |         |               | -             |        |              |            |              |             |           |
|  |  | -            | of of Identity | submitt | .ea:          |               |        |              |            |              |             |           |
|  |  |              |                |         |               |               |        |              |            | 01           |             |           |
| 1.   | Residence  | e/ Cor<br>Pi | respondence    | Addres  | ss:<br>State: |               | Coun   | try:         |            | City/        | town/villag | je:       |
| 2.   |  |              |                |         |               |               |        |              |            |              | id:         |           |
| 3.   |  |              |                |         |               |               |        |              |            |              |             |           |
| 1  |  |              |                |         |               |               |        |              |            |              |             |           |
|  | 4. Specify the proof of address submitted for residence/correspondence /permanent address: DECLARATION   |              |                |         |               |               |        |              |            |              |             |           |
| to ir  | 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.           Signature of the Applicant         Date:(dd/mm/yyyy) |              |                |         |               |               |        |              |            |              |             |           |
|  | Originals ve   | rifiod       | and Self-Atte  | ted Doc | ument conie   | as received ( |        |              |            |              | 1           |           |
| Originals verified and Self-Attested Document copies received ()      Name & Signature of the Authorised Signatory      Date      I OTHER DETAILS: |  |              |                |         |               |               |        |              |            |              |             |           |
| 1. B   | ank accou  | nt det       | ails:          |         |               |               |        |              |            |              |             |           |
| Ba   | ank Name   | Brar         | nch address    | Bank a  | account no.   | Account T     | ype: S | Saving/Cu    | rrent/     | MICR<br>Numb |             | IFSC code |
|  |  |              |                | 4P      |               |               |        |              |            |              | N           |           |
|  | 2. Demat account details: (In case the client does not have DP account, this column may be crossed)         DP name       NSDL/CDSL         Beneficiary name       DP ID         BO ID   |              |                |         |               |               |        |              |            |              |             |           |
| DF   | name   |              | NODL/CDOL      |         | Denenciary    | y name        |        | טר וט        |            |              |             |           |
| 3. Whether DP account is also to be opened with the same intermediary (Yes/No)   |  |              |                |         |               |               |        |              |            |              |             |           |
| 4. T   | 4. Trading Preferences: Please sign the relevant boxes where you wish to trade.  |              |                |         |               |               |        |              |            |              |             |           |
|  | Exchange   |              | Sign           |         | Exch          | ange          | Sig    | n            | Exchange   | 9            | Sign        |           |
| NSE         BSE         MCX-SX           5. Mode of receiving Contract Note/ Statement of Account: Physical / Electronic (Please indicate your     |  |              |                |         |               |               |        |              |            |              |             |           |
| р  | preference)  |              |                |         |               |               |        |              |            |              |             |           |
| 6. S   | 6. Standing instructions to receive credits automatically into my BO account (Yes/No)  |              |                |         |               |               |        |              |            |              |             |           |

7. Nomination details (Name, PAN, Address and Phone no. of nominee); relationship with the nominee (If nominee is a minor, details of Guardian like name, address, phone no. and signature of Guardian may be obtained)

I have understood the contents of policy and procedures document, tariff sheet, 'Rights and Obligations' document and 'Risk Disclosure Document'. I do hereby agree to be bound by such provisions as outlined in these documents. I have also been informed that the standard set of documents has been displayed for information on stock broker's designated website.

| Signature of the Aplicant  | Date:                  | (dd/mm/yyyy)                      |
|--|------------------------|-----------------------------------|
| MEMBER:National Stock Exchange of India Ltd. SEBI Regn.No.:INZ000010231, Mem<br>No.:INZ000010231 Member ID:6363 Clearing No.II |                        |                                   |
| Compliance Officer Name: Mr. Ankit Doshi • E-mail: compliance@5paisa.com.•Tel.:  |                        |                                   |
| Dealing Office : Sun Infotech Park, 1st Floor, Plot No.B-23, Ro  | bad No 16V, MIDC, Thai | ne Industrial Area, Wagle Estate, |
| Thane, Maharash  | tra - 400 604          |                                   |



# FOR OFFICE USE ONLY

## UCC Code allotted to the Client: -----

| DP name | NSDL/CDSL | Beneficiary name | DP ID | BO ID |
|---------|-----------|------------------|-------|-------|
|         |           |                  |       |       |

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

I / We undertake that I/we have made the client aware of 'Policy and Procedures', tariff sheet. 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 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.

If the client chooses to avail the demat facility from the same stock broker who is also a depository participant, the stock broker may use the same form and provide the details of the demat account opened for the said client to the client while providing a copy of the KYC documents.

#### ......

## Signature of the Authorised Signatory

Date .....

### Seal/Stamp of the stock broker

**NOTE:** This form is applicable for individual investors trading in the cash segment. If such investors wish to trade in segments other than cash segment and / or wish to avail facilities such as internet trading, running account, margin trading, Power of Attorney etc., they may furnish additional details required as per prescribed regulations to the concerned intermediary.