



Sunidhi

Securities & Finance Limited

National Stock Exchange of India Limited Member code: 06764

SEBI Regn. No.: INZ000169235

Bombay Stock Exchange Limited Member code : 291

SEBI Regn. No.: INZ000169235

Metropolitan Stock Exchange of India Ltd. Member code : 1005

SEBI Regn. No.: INZ000169235

Registered & Correspondence office address :

Kalpataru Inspire, Unit1, 8th Floor, Opp. Grand Hyatt Hotel, Santacruz (East), Mumbai - 400 055
India. Tel. : (+91-22) 66771777 / 33222777 / Fax : (+91-22) 66771775 ♦ Web Site : www.sunidhi.com

Compliance officer Name : Mahesh Desai : Tel. : (+91-22) 66771777 / 33222777 / Fax : (+91-22) 66771775
Email : maheshdesai@sunidhi.com

For any grievance/dispute please contact stock broker **Sunidhi Securities & Finance Limited** at the above address or
Email Id : complaints.redressal@sunidhi.com and Tel. : 91-(+91-22) 66771777 / 33222777 / Fax : (+91-22) 66771775
In case not satisfied with the response, please contact the concerned exchange(s) at

NSE : Email Id : ignse@nse.co.in Tel : 022-26598190

BSE : Email Id : is@bseindia.com Tel : 022-22728097

MSEI : Email Id : investorcomplaints@mcx-sx.com Tel : 022-67318933 / 67319000

CDSL : Email Id : complaints@cdslindia.com Tel : 022-22728658

NON-INDIVIDUAL CLIENT REGISTRATION FORM

Mr. / Ms. / M/s.

PAN NUMBER

E-mail :

TERMINAL CODE

CIN NUMBER

Registration Date

D

D

M

M

Y

Y

Y

Y

Branch

Group

Index

S. No.	Name of the Document	Brief Significance of the Document	Page No
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES			
1	Account Opening Form	A. KYC form-Documents captures the basic information about the constituent and an instruction/check list. B. Document captures the additional information about the constituent relevant to trading account and an instruction/ check list.	A-1
2	Rights and Obligations	Document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	B-1
3	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities market.	B-6
4	Guidance note	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	B-10
5	Policies and Procedures	This document contains policies and procedures to be followed by the Broker relating to the various operational issues of day to day business activities. The clients are requested to go through it carefully and keep it in mind while dealing through us. Any changes in this document shall be intimated to the client through the periodic communications. The clients may any time request for the updated copies of this document or refer to it at website.	B-14
6	Tariff sheet for Trading / Tariff sheet for Depository Services	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s)/ charges for Depository Services .	B-15 B-16
7	Additional KYC Form for Opening a Demat Account	Demat Account Application Form	A-8
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER			
8	Declaration of Client	Letter of Acceptance of having received and understood the Mandatory Document	A-11
9	Authorization letter of Running Account by Client	For the operational convenience, if a client is dealing frequently and Running Account wishes to avoid exchange of funds and securities for every exchange/segment separately and on a daily/due date basis, this document may be signed by the client authorizing broker to keep the account as running account across all exchange/segment.	A-12
10	Letter Authority	Letter of General Authority for ease of Accounting Operations	A-13
11	Writeup on PMLA	(For Information Only) Brief Writeup on the provisions of prevention of money laundering Act 2002 (PMLA) which client needs to know.	B-12
12	Instruction / Check List	Instructions for filling KYC form	B-16
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Instruction for Signature :  Client Full signature () **Sb**  Sub-broker's full signature

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 or 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 a 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, FVCI, 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.

F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, as mentioned below:

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

Please Submit the KYC Documents on A4 Size Paper Only.

Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant _____ PAN of the Applicant _____

Sr. No.	PAN	Name	DIN (For Directors) / UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	* Whether Politically Exposed (Tick the Applicable)	Photograph
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	

Name & Signature of the Authorised Signatory(ies) _____ Date / /



* In case of PEP/ RPEP Annexure 2.2A to be submitted.
PEP: Politically Exposed Person RPEP: Related to Politically Exposed Person

TRADING ACCOUNT RELATED DETAILS				
BANK ACCOUNT(S) DETAILS				
Bank Name				
Branch Address & Tel. No.				
Bank Account No.				
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Other in Case of NRI/NRE/NRO			
MICR Number				
IFSC Code				
DEPOSITORY ACCOUNT(S) DETAILS				
Particulars	(1)	(2)	(3)	
DP Name				
DP Address				
DP ID				
Client ID				
2nd holder's Name				
3rd holder's Name				
Default A/c (Any One)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
TRADING PREFERENCES				
*Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.				
Exchanges	Segment			
	Cash	Derivatives	Currency Derivatives	
1. BSE	S 7	S 10	S 13	
2. NSE	S 8	S 11	S 14	
3. MCX-SX	S 9	S 12	S 15	
# If, in future, the client wants to trade on any new segment / new exchange, separate authorization / letter should be taken from the client by the stock broker.				
PAST ACTIONS				
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:				

DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS					
If client is dealing through the sub-broker, provide the following details:					
Name				BSE SEBI Reg. No.	
Regd. Off. Address				NSE SEBI Reg. No.	
				MCX-SX SEBI Reg. No.	
Signature	Sb	Tel. No.		Remisier/AP	
		Fax No.		Remisier/AP	
		Website		Remisier/AP	
Whether dealing with any other stock broker/sub-broker (if case dealing with multiple stock brokers/sub-brokers, provide details of all)					
Name of stock broker					
Name of Sub-Broker, if any					
Client Code			Exchange		
Details of disputes/dues pending from/to such stock broker/sub- broker					
ADDITIONAL DETAILS					
Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify):					<input type="checkbox"/> Yes <input type="checkbox"/> No
Specify your Email id, if applicable					
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					
INTRODUCER DETAILS					
Name of the Introducer					
	(Surname)		(Name)		(Middle Name)
Status of the Introducer:	<input type="checkbox"/> Sub-broker <input type="checkbox"/> Remisier <input type="checkbox"/> Authorized Person <input type="checkbox"/> Existing Client <input type="checkbox"/> Others (please specify)				
Introducer Address					
				Phone	
Signature of the Introducer		S			
NOMINATION DETAILS (for individuals only)					
I/We wish to nominate			I/We do not wish to nominate		
Name of the Nominee			Relationship with the Nominee		
PAN of Nominee			Date of Birth of Nominee	D	D
				M	M
				Y	Y
				Y	Y
Nominee Address					
				Phone	
If Nominee is a minor, details of Guardian:					
Name of Guardian					
Guardian Address					
				Phone	
Signature of Guardian		S			

WITNESSES (Only applicable in case the account holder has made nomination)													
Name													
Signature													
Address													
DECLARATION													
<p>1. 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.</p> <p>2. 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.</p> <p>3. 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.</p>													
Name													
Place			Date		D	D	M	M	Y	Y	Y	Y	Signature 16
FOR OFFICE USE ONLY													
UCC Code allotted to the Client													
		Documents verified with Originals				Client Interviewed By				In-Person Verification done by			
Name of the Employee													
Employee Code													
Designation of the employee													
Date													
Signature													
<p>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 nonmandatory 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.</p>													
Date : DD / MM / YYYY				Signature of the Authorised Signatory				Seal/Stamp of the stock broker					

DEMAT ACCOUNT RELATED DETAILS

For Non-Individuals

DEPOSITORY PARTICIPANT NAME / ADDRESS / DP ID

(To be filled by the Depository Participant)

Application No.	2017 -	Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.										
DP ID	1	2	0	2	3	5	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 following details :-

Holders Details

Sole/First Holder's Name		Search Name		PAN											
Second Holder's Name				PAN											
				UID											
Third Holder's Name				PAN											
				UID											
Name *															
<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"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fun <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Cleaning House <input type="checkbox"/> Other (Specify) _____										To be filled by the DP									
SEBI Registration No. (If Applicable)					SEBI Registration Date					D	D	M	M	Y	Y	Y	Y		
RBI Registration No. (If Applicable)					RBI Approval Date					D	D	M	M	Y	Y	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 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 application box, If not marked the default option would be 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]

☐ Yes☐ 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 option (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

Other Details

Gross Annual Income Details	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"/> Rs. 25,00,000 to Rs. 1,00,00,000 <input type="checkbox"/> More than Rs. 1,00,00,000									
	Net worth as on (Date)	D	D	M	M	Y	Y	Y	Y	Rs.
	(Net Worth should not be older than 1 year)									
Please tick If any of the authorized signatories / Promoters / Partners / Karta / Trustees / Whole Time Director is either Politically Exposed Person (PEP) or Related to Politically Exposed Person (RPEP) <input type="checkbox"/> Please Provide details as per annexure 2.2 A										
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 the facility, cancel this option).										
Transaction 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%;"> <tr> <th>Stock Exchanges Name ID</th> <th>Clearing Member Name</th> <th>Clearing Member ID Optional</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		Stock Exchanges Name ID	Clearing Member Name	Clearing Member ID Optional						
Stock Exchanges Name ID	Clearing Member Name	Clearing Member ID Optional									
<i>Easi</i>	To register for easi, please visit our website www.cdslindia.com Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.										

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

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

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

(Signatures should be preferably in black ink)

.....(Please Tear Here).....

Acknowledgement Receipt

Application No. :

Dates :

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

Name of the sole / First Holder	
Name of Second Holder	
Name of Third Holder	

Depository Participant Seal and Signature

Payment of DP charges - only DP

NON-MANDATORY

From										

To,

M/s. Sunidhi Securities & Finance Ltd.

Kalpataru Inspire, Unit1, 8th Floor,

Opp. Grand Hyatt Hotel,

Santacruz (East), Mumbai - 400 055

Dear Sir,

Sub : Payment of DP charges

Ref. : My / Our BO ID No.	1	2	0	2	3	5	0	0								
1st Holder																
2nd Holder																
3rd Holder																

Have demat account with your company. I / We are also your client (s) in Cash / Derivatives segments of your company.

My / our Client id is _____

I / We hereby instruct you to adjust my / our DP charges against credit in my / our account in Cash Segment or Derivatives Segments of your company towards recovery of DP chages.

These standing instructions are valid from the date the demat account is opened at your end to the day of closure of demat account.

Thanking You,

Yours Faithfully,

Signature 1st Holder	
2nd Holder	
3rd Holder	

Rubber Stamp (If applicable)

Date:

To,
Sunidhi Securities & Finance Ltd.

Kalpataru Inspire, Unit1, 8th Floor,
Opp. Grand Hyatt Hotel,
Santacruz (East), Mumbai - 400 055

Dear Sir,

I /We hereby state and declare that I have received, read and understood the below mentioned documents to my satisfaction and understood the voluntary clauses mutually agreed between us.

1. I / We have received and read the document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).
2. I / We have received and read the Document detailing risks associated with dealing in the securities market in the Risk Disclosure document.
3. I / We have received and read the Guidance note detailing do's and don'ts for trading on exchange, for the education of the investors.
4. I / We have received and read the Document describing significant policies and procedures of the stock broker and also the tariff structure.
5. I / We have received and read the Document describing Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories for the purpose of opening a Demat account.

I have got a clear idea about all brokerage, commissions, fees and other charges levied by the Sunidhi Securities & Finance Ltd for trading and Depository account as per the relevant provisions/ guidelines specified by SEBI/Stock exchanges.

I hereby acknowledge the same.

Name of Client _____

Signature : _____

Place _____

AUTHORIZED LETTER OF RUNNING ACCOUNT BY CLIENT

Non Mandatory

To,
Sunidhi Securities & Finance Ltd.
Kalpataru Inspire, Unit1, 8th Floor,
Opp. Grand Hyatt Hotel,
Santacruz (East), Mumbai - 400 055

Dear Sirs,

Re: Letter of Authority for maintaining a Running Account for me/us in the Cash, F&O, Currency Derivative segments for NSE / BSE & MCX-SX

I / We have been regularly trading and investing, or plan to do so, through you on either/all of the Exchanges i.e. BSE, NSE and MCX-SX. To facilitate and ease of the accounting operations I / we expressly authorize you as under:

Authority :

1. To maintain a running account for all my / our trades through all the Exchanges, instead of a settlement to settlement clearance of dues and/or delivery of securities to me/ us. I agree that no interest shall be payable by you on the credit balances that may arise from time to time in my/our account.
2. To retain any/all the deliveries of shares purchased by me/ us and /or the credit amounts due to me/ us, beyond the pay – out date and the time interval specified by the relevant authorities, so as to use the same towards margin deposit, inter settlement adjustment of my/our present and future obligations and also retain the funds expected to be required to meet my/our margin obligations for next 5 trading days, calculated in the manner specified by the Exchanges and or inter-Exchange adjustment of my/our obligations or up to such time that I/ we ask you to transfer / release the same to my / our account.
3. To maintain a running account through any/all Exchange(s) towards my/ our margin obligations and / or settlement obligations including those in Futures & options segment of NSE / BSE & MCX-SX.
4. To retain/hold any/all of our funds available with you on our account, till such time that I /we request you to release the same within one working day.
5. To automatically adjust/appropriate any/all my/our deliveries of securities on inter- settlement basis on my/our instructions, either oral or written for all the instances where any/all securities purchased by me/us, are still lying with you on our account. I / we agree that such inter settlement adjustment may be in the same Stock Exchange or across the Exchanges.

Declaration/ undertaking:

1. I / we also state that any dispute if arising from the statement of account or statement of securities or settlement so made as hereinabove shall be brought to your notice preferably within 7 working days from the date of receipt of funds / securities or statement, as the case may be.(the statement of funds, ie ledger and statement of securities should display all receipts and deliveries of funds and securities)
2. I/We undertake to reconcile our accounts, both financial and securities with you and carry out the actual settlement of funds & securities at least once Monthly/Every financial quarter.
3. I / we state that I / we may revoke the above authorization with written notice at any time to you. However, I /we state and confirm that the aforesaid authorization shall be subject to renewal at least once a year and shall subsist for that year in which it has been renewed.

Thanking you,

Yours truly,

Client Name



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Date : DD / MM / YYYY

Note : To be signed by client and not by POA

Letter of Authority by Client

NON MANDATORY

To,

Sunidhi Securities & Finance Ltd.

Kalpataru Inspire, Unit1, 8th Floor,
Opp. Grand Hyatt Hotel,
Santacruz (East), Mumbai - 400 055

Dear Sirs,

Re : Letter of General Authority for ease of Accounting Operations for me/us in the Cash, F&O, Currency Derivative segments for NSE/BSE & MCX-SX

I/We will be regularly trading and investing, or plan to do so, through you on either / all of the Exchanges i.e. BSE, NSE and MCX-SX. To facilitate and ease the accounting operations I / We expressly authorize you as under.

Authority :

To accept any/all of my / our orders for purchase / sale of shares & securities which shall be given on telephone, short messaging service, any electronic mode or orally during my/our visit to your office (s).

To Avoid unnecessary and cumbersome paper work, I / We authorize you not to provide me/us any order modification / cancellation slips. Also I / We authorize you not to provide me / us any order confirmation / and/or trade confirmation slips as the required details are available from contracts issued by you.

To undertake any inter-account transfers of balances available between various segments of SEBI registered Exchanges, which are BSE / NSE / MCX - SX / Capital Market segment and BSE / NSE / MCX - SX / Derivatives segment and BSE / NSE / MCX - SX / Currency Segment.

To deposit / pledge the securities given as collateral with the Exchange/Clearing Corporation / Clearing House towards margin.

Declaration / undertaking :

I / We declare that all trades entered by me/us with you on BSE / NSE / MCX-SX are for my / our personal / family account. I / We confirm that I / We do not act on behalf of any other constituent and all trades executed under my client code belong to me / us and that we do not issue any contracts / trade confirmations to any one.

Trading of all Exchange is in Electronic Mode, based on VSAT, leased line, ISDN, Modern and VPN, combination of technologies and computer systems to place and route orders. We understand that there exists a possibility of communication failure or system problems or slow or delayed response from system or trading halt, of any such other problem / glitch whereby not being able to establish access to the trading system / network, which may be beyond your control and may result in delay in processing or note processing buy or sell Orders either in part in full. I / We agree I / We shall be fully liable and responsible for any such problems / fault.

I / We undertake to abide by all the requisite Statutory Provisions and shall not violate or contravene any of the provisions of the Securities and Exchange Board of India, Act and the various Rules and Regulations framed there under. Similarly, I / We undertake to abide by all the requisite Statutory Provisions and shall not violate or contravene any of the provisions of the Exchanges, their Rules, Bye laws and Regulations and any other Statutory Act that may be in force.

Thanking you,

Yours truly,

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Client Name :

Date : DD / MM / YYYY

Note : To be signed by client and not by POA

Authority to Send Digitally Signed Documents

To,
Sunidhi Securities & Finance Ltd.
 Kalpataru Inspire, Unit1, 8th Floor,
 Opp. Grand Hyatt Hotel,
 Santacruz (East), Mumbai - 400 055

Date : DD / MM / YYYY

Dear Sirs,

1. I/We agree to receive contract Notes/bills/ledger accounts/Qty Statements/Margin Statement etc for my / our transactions in any form (physical or Electronic) as deemed fit by you. I/We confirm that once you send the said documents at my / our email ID. You may treat the same as received by me/us. Non-receipt of bounced mail notification shall amount to delivery of contract note at the our email-id. Incase of any query. I/We shall intimate you within 24 hours thereof at your designated email ID : support@sunidhi.com

E-mail ID : 1	
E-mail ID : 2	

2. Incase of any change in my / our email ID, I/We undertake to intimate the same to you in writing.
 3. The Member will arrange to pay stamp duty on contract notes on a consolidated basis at the end of month.
 4. We understand that these digital contract notes are valid legal contracts as per stock exchange / SEBI rules and recognized under Income Tax act as well as other acts in India.

Thanking you,



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Signature :

Client Name : _____

Client Code : _____

Disclosure


Proprietary Trading

The member discloses herewith that it undertakes Proprietary trading, Arbitrage as well as investment in addition to client based trading.

Signed for any on behalf of

Signed for and on behalf of Client

Name	Sunidhi Securities & Finance Ltd.
Authorised Signatory	

Name	
Authorised Signatory	

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Date : DD / MM / YYYY

Authority For Collection of Documents

To,
Sunidhi Securities & Finance Ltd.
 14th Floor, Maker Chamber - IV,
 Nariman Point, Mumbai - 400 021.

Date : DD / MM / YYYY

In reference to my/our dealings with you as your client, I/We hereby authorize the following persons to collect and acknowledge various documents such as contracts, bills, ledger statements, cheques or any other documents on my / our behalf and the same will be binding on me/us :

Sr. No.	Name	Full Signature	Initials

Thanking you,

Signature :



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Client Name :

TARIFF SHEET

CASH SEGMENT

Brokerage Slab	Rate %	Minimum Paise	
Delivery Based			
Intraday Trading			One Side / Both Sides

F & O SEGMENT

Brokerage	Futures %	Options %	Rs. Per Lot	One side/Both Sides
Delivery Square up				
Settlement Square up				

CURRENCY SEGMENT

Brokerage	Futures %	Rs. Per Lot	One Side / Both Sides
Delivery Square up			

SHARING RATIO

	Remisier - I		Remisier - II	
Segment	Delivery	Trading	Delivery	Jobbing
Cash				
Base				

	Remisier - I		Remisier - II	
Segment	Futures	Options	Futures	Optional
F & O				
Base				

	Remisier - I		Remisier - II	
Segment	Futures		Futures	
Currency				
Base				

CTCL Mapin ID	
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Annexure - A

Tariff for Depository Services (Please select one of the schemes)

Services	Scheme A	Scheme B	Scheme for NRI	Special***
Annual Maintenance Charge	Rs. 300/-	Rs. 1000/-	Rs. 1000/-	
Dematerialisation	Rs. 5/- per certificate & Rs. 50/- Postal charges per demat request			
Rematerialisation	Rs. 25/- per certificate			
Instructions (Debit) (Delivery Transaction)	0.03% (Min. Rs. 8/-)	0.02% (Min. Rs. 8/-) & Max. Rs. 100/-)	0.05% (Min. 20/- Max. Rs. 50/-)	
Pledge	Rs. 50/-	Rs. 50/-	Rs. 50/-	Rs. 50/-

Statements :

- * Client holding statement will be provided on quarterly basis, if client has not done any transaction during that quarter.
- * Charges / Service standards are subject to revision as per CDSL and SEBI guideline and will be informed by circulars sent by ordinary post or E-mail.
- * Value of transactions will be in accordance with the rates provided by CDSL.
- * Financial Year i.e. April 01 to March 31 will be considered for Annual Maintenance Charges.
- * Transaction Charges will payable monthly. Charges quoted are for services listed. Any service not quoted will be charged separately.
- * All instruction for transfer must be received at the designated office(s) of DP at least 24 hours before the execution date or the pay-in deadline. Any instruction receive beyond the specified time limit would be executed on best effort basis and DP won't be responsible for any kind of failure or non-execution of those trades.
- * Non-payment of bills within time limit will attract penal interest of 18% per annum of the bill is not paid after 1month of the due date the DP Account will be suspended temporarily till the bill is paid.
- * Incase of Corporate Account CDSL Annual maintenance charge of Rs. 500 (Pro-rata) will be charged.
- * Basic Service Charge per transaction will be Rs. 25/-

First/Sole Holder	Second Holder	Third Holder

For Office Use Only

Client Categorizations (Based on declaration of the Financial portfolio of client)

Tick whichever applicable

Categories	High	Low	Medium	Special

OPTION FORM FOR ISSUE OF DIS BOOKLET

Date

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

DP ID									Client ID								
First Holder Name																	
Second Holder Name																	
Third Holder Name																	

To,
Sunidhi Securities & Finance Ltd.
 Kalpataru Inspire, Unit1, 8th Floor,
 Opp. Grand Hyatt Hotel,
 Santacruz (East), Mumbai - 400 055
 Dear Sir / Madam,

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

OPTION 1:

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening 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.

Yours faithfully

	First Holder Name	Second Holder Name	Third Holder Name
Name			
Signature			

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.

Yours faithfully

	First Holder Name	Second Holder Name	Third Holder Name
Name			
Signature			

.....(Please Tear Here).....

Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

DP ID									Client ID								
First Holder Name																	
Second Holder Name																	
Third Holder Name																	

Depository Participant Seal and Signature



Sunidhi
Securities & Finance Limited