

# **REGISTRATION KIT**

- INDIVIDUAL
- HUF
- CORPORATE
- PARTNERSHIP FIRM

# Frontline Capital Services Ltd.

Member: NSE & BSE



# Frontline Capital Services Ltd.

CIN: U74899DL1995PLC064125

Member: National Stock Exchange of India Ltd.
Bombay Stock Exchange Ltd.

# **SEBI Registration Numbers:**

NSE (CM): INB 230792430 • Dated: 06-10-1995 NSE (F&O): INF 230792430 • Dated: 02-06-2000 NSE (CDS): INE 230792430 • Dated: 22-05-2009 BSE (CM): INB 010792431 • Dated: 03-09-2010 BSE (F&O): INF 010792431 • Dated: 03-09-2010

Depository Participant : NSDL

SEBI Regn. No.: IN-DP-NSDL-56-98 • DP ID : IN 300564

Regd. Office: M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048

Corporate Office: B-22, Sector-4, Noida, U.P. -201301

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Compliance Officer

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CEO Detail

ANIRUDH KUMAR JAIN Ph.: 0120-2534066-68 Email : fcsl@fcslindia.com

For any grievance/dispute please contact **FRONTLINE CAPITAL SERVICES LTD.** at the above address or email idgrievances@fcslindia.com and Phone No. +91-120-2534066-68. In case not satisfied with the response, please contact the concerned exchange(s) at (NSE) ignse@nse.co.in and Phone No. +91-22-26598190, (BSE) is@bseindia.com and Phone No. +91-22-22728097, (NSDL) relations@nsdl.co.in and Phone No. +91-22-24994200.

# ANNEXURE - 1 ACCOUNT OPENING KIT

# INDEX OF DOCUMENTS

# MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES

| S.No. | Name of the Document           | Brief Significance of the Document   | Page No.           |
|-------|--------------------------------|--|--------------------|
| 1.    | Account Opening Form           | A. KYC Form - Document captures the basic information about the constituent and an instruction / check list.   | 1-6                |
|       |                                | B. Document captures the additional information about the constituent relevant to trading account and an instruction / check list.   | 7-11               |
| 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). | Given to<br>Client |
| 3.    | Risk Disclosure Document (RDD) | Document detailing risks associated with dealing in the securities market.   | with<br>Welcome    |
| 4.    | Guidance Note                  | Documents detailing do's and don'ts for trading on exchange, for the education of the investors.   | Kit                |
| 5.    | Policies and Procedures        | Document describing significant policies and procedure of the stock broker.  | 12-15              |
| 6.    | Tariff Sheet                   | Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock exchange(s)  | 16                 |

# **VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER**

| S.No. | Name of the Document  | Brief Significance of the Document  | Page No. |
|-------|---|---|----------|
| 1.    | Running Account Authorisation   | Letter where in Client Authorises Stock Broker to maintain running account.                                     | 17       |
| 2.    | Authorisation for Electronic Contract Notes /<br>SMS Alerts / Authorisation | Authorisation for Electronic Contract Notes / SMS Alerts / Authorisation  | 18       |
| 3.    | Letter of Authority   | To enable the trading member to act upon the clauses mentioned in the letter of authority                       | 19       |
| 4.    | Format of Request   | Format of Request   | 20       |
| 5.    | Client Defaulter Declaration  | Declaration for being not involved in any Terrorist activity and not declared as defaulter by SEBI/NSE/BSE etc. | 21       |
| 6.    | Declaration for Name Mismatch   | For authorizing the payout as per enclosed Bank Proof.  |          |
| 7.    | FATCA & CRS Declaration   | FATCA & CRS Declaration for Individual & Non-Individual   |          |
| 8.    | Banker's Verification   | Signature verification by bank applicable in case client signature does not match with signature on PAN Card    | 25       |
| 9.    | Declaration by HUF  | To be given by the karta and coparceners of the HUF   | 26       |
| 10.   | Format of Board Resolution to be given by Corporate Client                  | Format of Board Resolution to be provided by Corporate entities on their letter head for opening of account     | 27       |
| 11.   | Format of Declaration to be given by<br>Partnership Firm                    | To be given by the Partners of the firm for opening of account  | 27       |
| 12.   | Addendum to the Client Registration Form / Key Information                  | Information regarding prevention of money laundering  | 28       |
|       | DP KYC (NSDL)   |   | 28-39    |

# DOCKET A

**MANDATORY DOCUMENTS** 

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

#### Important Instructions:

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



| For office use only   | Application Type*  | w   |                                       |                              |  |  |
|---|--|---|---------------------------------------|------------------------------|--|--|
| (To be filled by financial institution  | A T . t  |   | (Mandatory for KYC update re          | equest)                      |  |  |
|   | Account Type*  | mal Simplified (for low ris   | sk customers)                         |                              |  |  |
| ☐ 1. PERSONAL DETAIL  | -S (Please refer instruction A at the end)   |   |                                       |                              |  |  |
| _   | Prefix First Name  | Midd  | dle Name                              | Last Name                    |  |  |
| ☐ Name* (Same as ID proof)  |  |   |                                       |                              |  |  |
| Maiden Name (If any*)   |  |   |                                       |                              |  |  |
| Father / Spouse Name*   |  |   |                                       |                              |  |  |
| Mother Name*  |  |   |                                       |                              |  |  |
| Date of Birth*  | $\begin{array}{c c c c c c c c c c c c c c c c c c c $                                     |   |                                       | РНОТО                        |  |  |
| Gender*   | ☐ M- Male  | ☐ F- Female ☐ T-Tr  | ransgender                            |                              |  |  |
| Marital Status*   | ☐ Married  | ☐ Unmarried ☐ Othe  | ers                                   |                              |  |  |
| Citizenship*  | ☐ IN- Indian   | ☐ Others (ISO 3166 Country  | Code )                                |                              |  |  |
| Residential Status*   | <ul><li>☐ Resident Individual</li><li>☐ Foreign National</li></ul>                         | <ul><li>☐ Non Resident Indian</li><li>☐ Person of Indian Origin</li></ul> |                                       |                              |  |  |
| Occupation Type*  | ☐ S-Service (☐ Private Sector ☐ O-Others (☐ Professional ☐ B-Business ☐ X- Not Categorised | ☐ Public Sector ☐ Governr☐ Self Employed ☐ Retired                        | •                                     | Signature / Thumb Impression |  |  |
| ☐ 2. TICK IF APPLICABI  | -  | RPOSES IN JURISDICTION(S) OF  | OUTSIDE INDIA (Please refer instructi | ion <b>B</b> at the end)     |  |  |
|   | UIRED* (Mandatory only if section 2 is   |   |                                       | ,                            |  |  |
| ISO 3166 Country Code of Ju   |  | licked)   |                                       |                              |  |  |
| •   | equivalent (If issued by jurisdiction)*  |   |                                       |                              |  |  |
| Place / City of Birth*  | equivalent (in issued by jurisdiction)   | ISO 3166 Country Code of Bir  | rth*                                  |                              |  |  |
| Place / City of Bitti   |  | 130 3100 Country Code of Bil  | ui                                    |                              |  |  |
| ☐ 3. PROOF OF IDENTIT   | Y (Pol)* (Please refer instruction C at  | the end)  |                                       |                              |  |  |
| (Certified copy of any one of the   | following Proof of Identity [Pol] needs to b   | pe submitted)   |                                       |                              |  |  |
| A- Passport Number  |  |   | Passport Expiry Date                  | M M - Y Y Y Y                |  |  |
| ☐ B- Voter ID Card  |  |   | ,                                     |                              |  |  |
| ☐ C- PAN Card   |  |   |                                       |                              |  |  |
| ☐ D- Driving Licence  |  | Drivi   | ing Licence Expiry Date DD-           | M M - Y Y Y Y                |  |  |
| ☐ E- UID (Aadhaar)  |  | Dilvi   | ing Electrice Expiry Bate             |                              |  |  |
| F- NREGA Job Card   |  |   |                                       |                              |  |  |
|   | otified by the central government)   |   | Identification Number                 |                              |  |  |
| _   | account - Document Type code   |   | Identification Number                 |                              |  |  |
| <u> </u>  | ,.   |   |                                       |                              |  |  |
| 4. PROOF OF ADDRE   |  | Please see instruction <b>D</b> at the end)                               |                                       |                              |  |  |
| 4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction <b>D</b> at the end)  (Certified copy of <b>any one</b> of the following Proof of Address [PoA] needs to be submitted) |  |   |                                       |                              |  |  |
| <u>_</u>  |  | esidential 🗌 Busines  | ss Registered Office                  | ☐ Unspecified                |  |  |
| 5   |  |   | adhaar)                               | □ onspecilled                |  |  |
|   |  | REGA Job Card   |                                       |                              |  |  |
| ☐ Sii   | mplified Measures Account - Docum  | nent Type code  |                                       |                              |  |  |
| Address Line 1*   |  |   |                                       |                              |  |  |
| Line 2  |  |   |                                       |                              |  |  |
| Line 3  |  |   | City / Town / Village*                |                              |  |  |
| District*   | Pin / Post Co  | de* State   | e / U.T Code* ISO 316                 | 66 Country Code*             |  |  |

| ☐ 4.2 CORR                        | 4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction <b>E</b> at the end)   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|-----------------------------------|---|------------------|------------------|---------------|----------------|-------------|-----------|--------------|------------|-------------|-----------|----------------|------------|-----------------|------------|-----------|------------|---------|--|
| ☐ Same as 0                       | Current / Perman  | ent / Overse     | as Address       | details (Ir   | case of m      | ultiple co  | orrespoi  | ndence /     | local ad   | dresses     | s, pleas  | se fill 'A     | Annexu     | re A1')         |            |           |            |         |  |
| Line 1*                           |   |                  |                  | i i i         |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Line 2                            |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Line 2                            |   |                  |                  |               |                |             |           |              |            |             |           | City / T       | Town /     | Village*        |            |           |            |         |  |
| District*                         |   |                  |                  | Din /         | Post Code      | *           |           |              |            | State / l   |           | -              | TOWIT /    |                 | ISO 316    | S6 Cour   | ntry Co    | nde*    |  |
| District                          |   |                  |                  | F1117         | rosi Coue      | ž           |           |              |            | Jiaie / (   | 0.1 00    | Jue            |            |                 | 100 010    | o Coui    | ni y Oc    | de      |  |
| ☐ 4.3 ADDR                        | 4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked) |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| ☐ Same as 0                       | Current / Permane   | ent / Overse     | as Address       | details       |                |             |           | Same as      | Corresp    | ondend      | ce / Loc  | al Add         | lress de   | tails           |            |           |            |         |  |
| Line 1*                           |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Line 2                            |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Line 3                            |   |                  |                  |               |                |             |           |              |            |             | С         | ity / To       | own / \    | /illage*        |            |           |            |         |  |
| State*                            |   |                  |                  |               |                |             | Z         | ZIP / Pos    | st Code    | e*          |           |                |            | 18              | SO 3166    | 6 Coun    | try Cod    | de*     |  |
|                                   |   | /AII             |                  |               |                |             | / -       |              | <b>(D)</b> | , .         |           |                |            | 1)              |            |           |            |         |  |
| ☐ 5. CONI                         | TACT DETAILS  | (All comm        | unications w     | /III be sent  | on provide     | d Mobile    | e no. / E | :mail-ID)    | (Please    | refer in    | nstructio | on <b>F</b> at | the end    | d)              |            |           |            |         |  |
| Tel. (Off)                        |   | -                |                  |               | Tel. (Re       | s)          |           |              |            |             |           | N              | /lobile    |                 |            |           |            |         |  |
| FAX                               |   | -                |                  |               | Email ID       | )           |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| □ 6. DETA                         | ILS OF RELAT  | FD PERS          | ON (In cas       | e of additi   | onal related   | person      | s. pleas  | se fill 'Anı | nexure E   | 31') (ple   | ease re   | fer inst       | truction   | <b>G</b> at the | end)       |           |            |         |  |
| _                                 | Related Person  | _                | on of Relate     |               |                | , , , , , , |           | Number       |            |             |           |                |            |                 |            |           |            |         |  |
| Related Person                    | on Type*  |                  | dian of Mir      |               |                | Assign      |           |              |            | Autho       |           |                | ,          | ve              |            |           |            |         |  |
|                                   |   | Prefix           |                  | Firs          | st Name        |             |           |              | N          | /liddle N   | lame      |                |            |                 |            | Last N    | lame       |         |  |
| Name*                             |   |                  |                  |               |                |             |           |              | T          |             |           |                |            |                 |            |           |            |         |  |
|                                   |   | (If KYC n        | umber and r      | name are į    | provided, b    | elow det    | ails of s | section 6    | are opti   | onal)       |           |                |            |                 |            |           |            |         |  |
| PROOF C                           | OF IDENTITY [Po   | I] OF RELAT      | TED PERSO        | N* (Pleas     | se see instr   | uction (H   | (at the   | e end)       |            |             |           |                |            |                 |            |           |            |         |  |
| ☐ A- Passp                        | ort Number  |                  |                  |               |                |             |           |              |            | Pa          | ssport    | Expir          | y Date     | D               | D - M      | M —       | YY         | YY      |  |
| ☐ B- Voter I                      | ID Card   |                  |                  |               |                |             |           |              |            |             | ·         | ·              | •          |                 |            |           |            |         |  |
| ☐ C- PAN C                        |   |                  |                  |               | 1              |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| _                                 | -   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| ☐ D- Driving                      | -   |                  |                  |               |                |             |           |              | Dri        | iving Li    | icence    | Expir          | y Date     | D               | D — M      | IVI —     | YY         | Y       |  |
| ☐ E- UID (A                       | Aadhaar)  |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| ☐ F- NREG                         | A Job Card  |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Z- Others                         | (any document i   | notified by th   | ne central go    | vernment      | )              |             |           |              |            | Ide         | entifica  | tion N         | lumber     |                 |            |           |            |         |  |
| S- Simpli                         | fied Measures   | Account -        | Document         | Type co       | de             |             |           |              |            | lde         | entifica  | tion N         | lumber     |                 |            |           |            |         |  |
| ☐ 7. REMA                         | ARKS (If any)   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| 8. APPL                           | ICANT DECLA   | RATION           |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   | are that the details fur  |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| therein, imme<br>for it.          | ediately. In case any o   | f the above info | ormation is foun | d to be false | or untrue or n | nisleading  | or misrep | oresenting,  | I am awar  | re that I m | nay be he | ld liable      |            | 4               |            |           |            |         |  |
| <ul> <li>I hereby cons</li> </ul> | sent to receiving inform  | nation from Cer  | ntral KYC Regis  | stry through  | SMS/Email on   | the above   | registere | ed number/   | email addı | ress.       |           |                | <b>L</b> D | I               |            |           |            |         |  |
|                                   | D - M M -   |                  | Y                | Place         |                |             |           |              |            |             |           |                |            | Signatu         | re / Thuml | b Impress | sion of Ar | plicant |  |
| Date .                            |   |                  |                  | i idoc        |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| 9. ATTE                           | STATION / FOI   | ROFFICE          | USE ONL          | Y             |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Documents Received                |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   | KYC VER   | IFICATION        | CARRIED C        | OUT BY        |                |             |           |              |            |             |           | INST           | TITUTIO    | N DETA          | ILS        |           |            |         |  |
| Date                              |   | D — M N          |                  | V V           |                |             |           | Macon        | FROM       | NTI IN      | F CA      | DITA           | I SED      | VICES           | מדו        |           |            |         |  |
|                                   |   | D — M N          |                  |               |                |             |           | Name         | 11101      | 41 1114     | LUA       | · IIA          | LULI       | VIOLO           | , LID.     |           |            |         |  |
| Emp. Name                         |   |                  |                  |               |                |             |           | Code         |            |             |           |                |            |                 |            |           |            |         |  |
| Emp. Code                         |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Emp. Design                       | nation  |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
| Emp. Brancl                       | h   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |
|                                   |   |                  |                  |               |                |             |           |              |            |             |           |                |            |                 |            |           |            |         |  |

# CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

#### General Instructions:

- 1 Fields marked with '\*' are mandatory fields.
- 2 Tick '✓ 'wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick ( ) in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of 'Small Account type' only personal details at section number 1 and 2, photograph, signature and self-certification required.

#### A Clarification / Guidelines on filling 'Personal Details' section

- 1 Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

# B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1 Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

#### C Clarification / Guidelines on filling 'Proof of Identity [Pol]' section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if 'Z-Others (any document notified by the central government)' is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

| Document Code | Description  |
|---------------|--|
| 01            | Identity card with applicant's photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions. |
| 02            | Letter issued by a gazetted officer, with a duly attested photograph of the person.  |

# D Clarification / Guidelines on filling 'Proof of Address [PoA] - Current / Permanent / Overseas Address details' section

- 1 PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

| Document Code | Description  |
|---------------|--|
| 01            | Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).  |
| 02            | Property or Municipal Tax receipt.   |
| 03            | Bank account or Post Office savings bank account statement.  |
| 04            | Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.  |
| 05            | Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation. |
| 06            | Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.  |

#### E Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

- 1 To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2 In case of multiple correspondence / local addresses, Please fill 'Annexure A1'

# F Clarification / Guidelines on filling 'Contact details' section

- 1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
- 2 Do not add '0' in the beginning of Mobile number.

#### G Clarification / Guidelines on filling 'Related Person details' section

1 Provide KYC number of related person if available.

# H Clarification / Guidelines on filling 'Related Person details - Proof of Identity [Pol] of Related Person' section

1 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

# List of two - digit state / U.T codes as per Indian Motor Vehicle Act, 1988

| State / U. T.          | Code | State / U. T.    | Code |
|------------------------|------|------------------|------|
| Andaman & Nicobar      | AN   | Himachal Pradesh | HP   |
| Andhra Pradesh         | AP   | Jammu & Kashmir  | JK   |
| Arunachal Pradesh      | AR   | Jharkhand        | JH   |
| Assam                  | AS   | Karnataka        | KA   |
| Bihar                  | BR   | Kerala           | KL   |
| Chandigarh             | CH   | Lakshadweep      | LD   |
| Chattisgarh            | CG   | Madhya Pradesh   | MP   |
| Dadra and Nagar Haveli | DN   | Maharashtra      | MH   |
| Daman & Diu            | DD   | Manipur          | MN   |
| Delhi                  | DL   | Meghalaya        | ML   |
| Goa                    | GA   | Mizoram          | MZ   |
| Gujarat                | GJ   | Nagaland         | NL   |
| Haryana                | HR   | Orissa           | OR   |
|                        |      |                  |      |

| State / U. T. | Code |
|---------------|------|
| Pondicherry   | PY   |
| Punjab        | PB   |
| Rajasthan     | RJ   |
| Sikkim        | SK   |
| Tamil Nadu    | TN   |
| Telangana     | TS   |
| Tripura       | TR   |
| Uttar Pradesh | UP   |
| Uttarakhand   | UA   |
| West Bengal   | WB   |
| Other         | XX   |
|               |      |

# List of ISO 3166 two - digit Country Code

| Country                          | Country<br>Code | Country                             | Country<br>Code | Country   | Country<br>Code | Country   | Count<br>Cod |
|----------------------------------|-----------------|-------------------------------------|-----------------|---|-----------------|---|--------------|
| fghanistan                       | AF              | Dominican Republic                  | DO              | Libya   | LY              | Saint Pierre and Miquelon                       | PM           |
| land Islands                     | AX              | Ecuador                             | EC              | Liechtenstein                                   | LI              | Saint Vincent and the Grenadines                | VC           |
| Ibania                           | AL              |                                     | EG              | Lithuania                                       | LT              | Samoa   | WS           |
|                                  |                 | Egypt                               | SV              |   | LU              |   | SM           |
| lgeria                           | DZ              | El Salvador                         |                 | Luxembourg                                      |                 | San Marino                                      |              |
| merican Samoa                    | AS              | Equatorial Guinea                   | GQ              | Macao   | MO              | Sao Tome and Principe                           | ST           |
| ndorra                           | AD              | Eritrea                             | ER              | Macedonia, the former Yugoslav Republic of      | MK              | Saudi Arabia                                    | SA           |
| ngola                            | AO              | Estonia                             | EE              | Madagascar                                      | MG              | Senegal   | SN           |
| nguilla                          | Al              | Ethiopia                            | ET              | Malawi  | MW              | Serbia  | RS           |
| ntarctica                        | AQ              | Falkland Islands (Malvinas)         | FK              | Malaysia  | MY              | Seychelles                                      | SC           |
|                                  |                 |                                     |                 |   |                 |   |              |
| ntigua and Barbuda               | AG              | Faroe Islands                       | FO              | Maldives  | MV              | Sierra Leone                                    | SL           |
| rgentina                         | AR              | Fiji                                | FJ              | Mali  | ML              | Singapore                                       | SG           |
| rmenia                           | AM              | Finland                             | FI              | Malta   | MT              | Sint Maarten (Dutch part)                       | SX           |
| ruba                             | AW              | France                              | FR              | Marshall Islands                                | MH              | Slovakia  | SK           |
| ustralia                         | AU              | French Guiana                       | GF              | Martinique                                      | MQ              | Slovenia  | SI           |
| ustria                           | AT              |                                     | PF              |   | MR              | Solomon Islands                                 | SB           |
|                                  |                 | French Polynesia                    |                 | Mauritania                                      |                 |   |              |
| zerbaijan                        | AZ              | French Southern Territories         | TF              | Mauritius                                       | MU              | Somalia   | SO           |
| ahamas                           | BS              | Gabon                               | GA              | Mayotte   | YT              | South Africa                                    | ZA           |
| ahrain                           | ВН              | Gambia                              | GM              | Mexico  | MX              | South Georgia and the South Sandwich<br>Islands | GS           |
| angladesh                        | BD              | Georgia                             | GE              | Micronesia, Federated States of                 | FM              | South Sudan                                     | SS           |
| arbados                          | BB              | Germany                             | DE              | Moldova, Republic of                            | MD              | Spain   | ES           |
|                                  |                 |                                     |                 |   |                 | •   | LK           |
| elarus                           | BY              | Ghana                               | GH              | Monaco  | MC              | Sri Lanka                                       |              |
| elgium                           | BE              | Gibraltar                           | GI              | Mongolia  | MN              | Sudan   | SD           |
| elize                            | BZ              | Greece                              | GR              | Montenegro                                      | ME              | Suriname  | SR           |
| enin                             | BJ              | Greenland                           | GL              | Montserrat                                      | MS              | Svalbard and Jan Mayen                          | SJ           |
| ermuda                           | BM              | Grenada                             | GD              | Morocco   | MA              | Swaziland                                       | SZ           |
| nutan                            | BT              | Guadeloupe                          | GP              | Mozambique                                      | MZ              | Sweden  | SE           |
|                                  |                 |                                     |                 |   |                 |   |              |
| olivia, Plurinational State of   | ВО              | Guam                                | GU              | Myanmar   | MM              | Switzerland                                     | CH           |
| onaire, Sint Eustatius and Saba  | BQ              | Guatemala                           | GT              | Namibia   | NA              | Syrian Arab Republic                            | SY           |
| osnia and Herzegovina            | BA              | Guernsey                            | GG              | Nauru   | NR              | Taiwan, Province of China                       | TW           |
| otswana                          | BW              | Guinea                              | GN              | Nepal   | NP              | Tajikistan                                      | TJ           |
| puvet Island                     | BV              | Guinea-Bissau                       | GW              | Netherlands                                     | NL              | Tanzania, United Republic of                    | TZ           |
|                                  |                 |                                     |                 |   |                 |   |              |
| razil                            | BR              | Guyana                              | GY              | New Caledonia                                   | NC              | Thailand  | TH           |
| ritish Indian Ocean Territory    | 10              | Haiti                               | HT              | New Zealand                                     | NZ              | Timor-Leste                                     | TL           |
| runei Darussalam                 | BN              | Heard Island and McDonald Islands   | HM              | Nicaragua                                       | NI              | Togo  | TG           |
| ulgaria                          | BG              | Holy See (Vatican City State)       | VA              | Niger   | NE              | Tokelau   | TK           |
| urkina Faso                      | BF              | Honduras                            | HN              | Nigeria   | NG              | Tonga   | TO           |
| urundi                           | BI              | Hong Kong                           | НК              | Niue  | NU              | Trinidad and Tobago                             | TT           |
|                                  |                 |                                     |                 |   |                 |   |              |
| abo                              | CV              | Hungary                             | HU              | Norfolk Island                                  | NF              | Tunisia   | TN           |
| ambodia                          | KH              | Iceland                             | IS              | Northern Mariana Islands                        | MP              | Turkey  | TR           |
| ameroon                          | CM              | India                               | IN              | Norway  | NO              | Turkmenistan                                    | TIV          |
| anada                            | CA              | Indonesia                           | ID              | Oman  | OM              | Turks and Caicos Islands                        | TC           |
| ayman Islands                    | KY              | Iran, Islamic Republic of           | IR              | Pakistan  | PK              | Tuvalu  | TV           |
|                                  |                 |                                     |                 |   |                 |   |              |
| entral African Republic          | CF              | Iraq                                | IQ              | Palau   | PW              | Uganda  | UG           |
|                                  | TD              | Ireland                             | IE              | Palestine, State of                             | PS              | Ukraine   | UA           |
|                                  | CL              | Isle of Man                         | IM              | Panama  | PA              | United Arab Emirates                            | AE           |
| nina                             | CN              | Israel                              | IL              | Papua New Guinea                                | PG              | United Kingdom                                  | GE           |
| nristmas Island                  | CX              | Italy                               | IT              | Paraguay  | PY              | United States                                   | US           |
| ocos (Keeling) Islands           | CC              | Jamaica                             | JM              | Peru  | PE              | United States Minor Outlying Islands            | UN           |
|                                  |                 |                                     |                 |   |                 | · -   |              |
| olombia                          | СО              | Japan                               | JP              | Philippines                                     | PH              | Uruguay   | UY           |
| omoros                           | KM              | Jersey                              | JE              | Pitcairn  | PN              | Uzbekistan                                      | UZ           |
| ongo                             | CG              | Jordan                              | JO              | Poland  | PL              | Vanuatu   | VL           |
| ongo, the Democratic Republic of | CD              | Kazakhstan                          | KZ              | Portugal  | PT              | Venezuela, Bolivarian Republic of               | VE           |
| ook Islands                      | CK              | Kenya                               | KE              | Puerto Rico                                     | PR              | Viet Nam  | VN           |
| osta Rica                        | CR              | Kiribati                            | KI              | Qatar   | QA              | Virgin Islands, British                         | VG           |
| ote d'Ivoire !Côte d'Ivoire      | CI              | Korea, Democratic People's Republic | KP              | Reunion !Réunion                                | RE              | Virgin Islands, U.S.                            | VI           |
| oatia                            | HR              | Korea, Republic of                  | KR              | Romania   | RO              | Wallis and Futuna                               | WF           |
|                                  | CU              | Kuwait                              | KW              | Russian Federation                              | RU              | Western Sahara                                  | EH           |
| uracao !Curaçao                  | CW              | Kyrgyzstan                          | KG              | Rwanda  | RW              | Yemen   | YE           |
|                                  | CY              | Lao People's Democratic Republic    | LA              | Saint Barthelemy !Saint Barthélemy              | BL              | Zambia  | ZN           |
| /prus                            |                 |                                     |                 |   |                 |   |              |
| zech Republic                    | CZ              | Latvia                              | LV              | Saint Helena, Ascension and Tristan da<br>Cunha | SH              | Zimbabwe  | ZV           |
| enmark                           | DK              | Lebanon                             | LB              | Saint Kitts and Nevis                           | KN              |   |              |
| ibouti                           | DJ              | Lesotho                             | LS              | Saint Lucia                                     | LC              |   |              |
|                                  |                 |                                     |                 |   |                 |   |              |

# Frontline Capital Services Ltd.

Date

# **Know Your Client (KYC)**

| _    | egd. Office: M-6, M-Block Market, 2nd Floor, reater Kailash-II, New Delhi-110048  Application Form (For Non-Individuals Only)  |                      |
|------|--|----------------------|
| Plea | reater Kailash-II, New Delhi-110048 Application Form (For Non-Individuals Only)  ease fill this form in ENGLISH and in BLOCK LETTERS  ease tick ✓ the box on left margin of appropriate row where CHANGE/CORRECTION is required and provide the details in the corresponding row)  Application   | on No.               |
| Α    | _  |                      |
|      | Name of the Applicant  Date of Incorporation  Date of commencement of business  Please a   |                      |
|      | Permanent Account Number (PAN)  Registration No. (e.g. CIN)  Status (Please tick any one)  Private Limited Co. Public Ltd. Co. Body Corporate Trust Charities NGO's FI FII HUF AOP Bank Government Body Non-Government Organization Defense Establishment BOI Society LLP Others (Please specify)  | passport<br>raph and |
| В    | ADDRESS DETAILS  |                      |
| С    | City / Town / Village   Pin Code   State   Country   Pin Code   State   Country   Pin Code   Pin Co |                      |
|      | AADHAR No. OF Promoters/Partners/Karta:  |                      |
| D    | If space is insufficient, enclosed these details separately (illustrative format enclosed)  DECLARATION  I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertak you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepriam/ We are aware that I/we may be held liable for it.  Date  Date  Name & Signature of the Director/Authorised Signature of Signature of the Director/Authorised Signature of  | resenting, I         |
|      | FOR OFFICE USE ONLY  |                      |
|      | ☐ Originals Verified & Self Attested Document copies received  |                      |
|      | Name & Signature of the Authorised Signatory  Seal/Stamp of the Intermed   | diary                |

Place:

# Details of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals 1. Name **PHOTOGRAPH** 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) 3b. DIN/ UID Please affix your recent passport 4. Residential/ Registered Address size photograph and sign across it City / Town / Village Pin Code Country State 1. Name **PHOTOGRAPH** 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) 3a. PAN 3b. DIN/ UID Please affix your recent passport 4. Residential/ Registered Address size photograph and sign across it City / Town / Village Pin Code Country State 1. Name **PHOTOGRAPH** 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) 3b. DIN/ UID 3a. PAN Please affix your recent passport 4. Residential/ Registered Address size photograph and sign across it City / Town / Village Pin Code State Country 1. Name **PHOTOGRAPH** 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) 3a. PAN 3b. DIN/ UID Please affix your recent passport 4. Residential/ Registered Address size photograph and sign across it City / Town / Village Pin Code State Country 1. Name **PHOTOGRAPH** 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) 3b. DIN/ UID 3a. PAN Please affix your recent passport 4. Residential/ Registered Address size photograph and

**L**i

Name & Signature of the Authorised Signatory (ies)

City / Town / Village

State

Date: | D | D | / | M | M | / | Y | Y | Y | Y |

sign across it

Country

Pin Code

# **ANNEXURE - 3**

# TRADING ACCOUNT RELATED DETAILS

FOR INDIVIDUALS & NON-INDIVIDUALS

| BANK ACCOUNT DETAILS (Through which trans  | actions will generally be routed)      |
|--|--|
| Primary Bank Details (for DP and Trading) :  |  |
| Bank Name :  |  |
| Account No.: Branch:   |  |
| Address:   |  |
|  | Pin Code :                             |
| MICR Code of Branch: IFS Code: IFS Code  |  |
| Account Type : Savings Current NRE/NRO OTHERS : (P   | Please Specify)                        |
| Pay-Out Option : Cheque Fund Transfer Bank Draft CMS NEF   | T RTGS As Per Group                    |
| Secondary Bank Details (for Trading, if any) :   |  |
| Bank Name :  |  |
| Account No.: Branch:   |  |
| Address:   |  |
|  | Pin Code :                             |
| MICR Code of Branch: IFS Code:   |  |
| Account Type : Savings Current NRE/NRO OTHERS : (P   | lease Specify)                         |
| Pay-Out Option : Cheque Fund Transfer Bank Draft CMS NEI   | RTGS As Per Group                      |
| DEPOSITORY ACCOUNT DETAILS (Through which to   | ransactions will generally be routed.) |
| Depository Name : CDSL NSDL  |  |
| Name of Depository Participant :   |  |
| Beneficiary Name :   |  |
| DP ID : Beneficiary ID (BOID) :  |  |
| OTHER DETAILS  |  |
| (please specify)  OR  Rs. 10 Lac to 25 Lac  Rs. 25 Lac to 1 Crore  | Rs. 5 Lac to 10 Lac<br>>1 Crore        |
| Net Worth (Net worth should not be older than 1 year) Amount Rs.  as on (date)    D   M   M   Y   Y   Y   Y   (Compulsory for Non-Individuals) |  |
| ■ Occupation : Private Sector Public Sector Government Servi   | ce Business Professional               |
| (please tick any one and give brief details)  Agriculturist Retired Housewife Student  | OthersPlease Specify                   |
| ■ Please tick, if applicable : ☐ Politically Exposed Person (PEP) ☐ Related to a P   | Politically Exposed Person (PEP)       |
| ■ Any other information :  |  |

# TRADING PREFERENCE

Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.

| EXCHANGE  | SEGMENT                         | SIGNATURE   |  |  |
|---|---------------------------------|---|--|--|
|   | Cash                            | <b>1</b> 3(a)   |  |  |
| National Stock Exchange (NSE)   | F&O                             | <b>£</b> 3(b)   |  |  |
|   | Currency Derivative             | <b>2</b> 3(c)   |  |  |
| Bombay Stock Exchange (BSE)   | Cash                            | <b>(L)</b> 3(d)   |  |  |
|   | F&O                             | <b>2</b> 3(e)   |  |  |
| PAST ACTIONS  Details of any action / proceedings initiated / pending / taken by SEBI / Stock Exchange / any other authority against the applicant / constituent or its patners / promoters / whole time directors / authorised persons in charge of dealing in securities during last three years.  (Please Specify) |                                 |   |  |  |
| DEALING THROUGH SUB-BROKERS   | AND OTHER STOCK BROKERS         |   |  |  |
| If client is dealing through the sub-   | broker, provide the following d | etails :  |  |  |
| Name of the sub-broker  |                                 |   |  |  |
| Sub-broker SEBI Registration No.  |                                 |   |  |  |
| Sub-Broker's Address  |                                 |   |  |  |
| Sub-Broker's Phone/Fax No.  |                                 |   |  |  |
| Sub-Broker's Website  |                                 |   |  |  |
| Whether dealing with any other stock broker / sub-broker (In case dealing with multiple stock brokers / sub-brokers, please provide details of all)   |                                 |   |  |  |
| Name of the stock broker  |                                 |   |  |  |
| Name of Sub-Broker (If any)   |                                 |   |  |  |
| Client Code (UCC)   |                                 |   |  |  |
| Exchange  |                                 |   |  |  |
| Details of disputes / dues pending from / to such stock broker / sub-broker   |                                 |   |  |  |
|   | (Please Specify)                |   |  |  |
| ADDITIONAL DETAILS  |                                 |   |  |  |
| SMS and E-mail alerts to investors by stock exchanges : Yes No  Type of Facility SMS Alert E-mail Alert Both  |                                 |   |  |  |
|   |                                 |   |  |  |
| Whether you wish to receive: Physical Contract Note Electronic Contract Note (ECN)  E-mail (If Aplicable):  |                                 |   |  |  |
| Whether you wish to avail of the facility of internet trading / wireless technology : Yes No  |                                 |   |  |  |
| Trading Experience / Number of Years of Investment  No Prior Investment ExperienceYears in EquitiesYears in Derivatives  Years in other Investment related fields   |                                 |   |  |  |
| In case of Non-Individual, Name, I authorised to deal in securities of Places provide the details in Appendix A as  | on behalf of the company / Fir  | re, Residential Address and Photographs of persons m/ others. |  |  |

# DETAILS OF AUTHORISED PERSON/AUTHORISED SIGNATORY(IES) TO DEAL IN SECURITIES ON BEHALF OF COMPANY/FIRM/OTHERS

| Name (1)         :   | Please affix<br>your recent<br>passport size<br>photograph and<br>sign across it |
|--|--|
| Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/whole tin  Politically Exposed Person (PEP)  Any Other Information:               |  |
| Name (2)         :   | Please affix<br>your recent<br>passport size<br>photograph and<br>sign across it |
| Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/whole tin  Politically Exposed Person (PEP)  Any Other Information:               |  |
| Name (3)         :   | Please affix<br>your recent<br>passport size<br>photograph and<br>sign across it |
| DIN / UID :  Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/whole tin  Politically Exposed Person (PEP)  Any Other Information : | ne directors:  |
| DETAIL OF INTRODUCED (ORTIONAL)  |  |
| DETAIL OF INTRODUCER (OPTIONAL)  |  |
| Introduced by: Existing Client Sub-Broker Remisier Authorised Person  Name of Introducer: UCC: Employee  | Others (Please Specify)  |

| NOMINATION FORM   | (FOR INDIVIDUAL ONLY)                                 |
|---|---|
| ☐ I/We wish to nominate ☐ I / We do not wish to nominate  |   |
| [Strike off which is not applicable]  |   |
| Nominee Details   |   |
| Name of Nominee : Mr. / Ms. / Mrs. :  |   |
| PAN of Nominee : Date of Birth :  | 1 M Y Y Y Y   |
| Relationship with the Nominee :   |   |
| Address of Nominee :  |   |
|   |   |
| City:   | Pin :   |
| State : Ph. :   |   |
| If Nominee is minor, details of Guardian :  |   |
| Name of Guardian : Mr. / Mrs. :   |   |
| Address of Guardian :   |   |
| City:   |   |
|   | Country:  |
|   | Mobile:   |
| Signature of Guardian :   |   |
| Name & Address Of Witness   | (in Case Of Nominee)                                  |
|   | <br> W i t n e s s                                    |
|   |   |
|   |   |
|   |   |
| 0-0   | 0   |
| Signature of 1st witness  | Signature of 2nd witness                              |
|   |   |
| DECLARATION   |   |
| 1. I/We hereby declare that the details furnished above are true and correct undertake to inform you of any changes therein, immediately. In case any |   |
| or misleading or misrepresenting, I am/we are aware that I/We may be hel  |   |
| 2 I/We confirm having read/been explained and understood the contents o broker and the tariff sheet.  | f the document on policy and procedures of the stock  |
| 3. I/We further confirm having read and understood the contents of the 'Righ  | nts and Obligations' document(s) and 'Risk Disclosure |
| Document'. I/We do hereby agree to be bound by such provisions as outling that the standard set of documents has been displayed for information and   |   |
| that the standard set of documents has been displayed for Information on s  | stock broker's designated website, if any.            |
| Name of Academa and I all all all all all all all all all a   |   |
| Name of Applicant :   |   |
|   | Date: DDMMYYYY  |
| Signature: 4  | Place :   |
| Signature of Applicant / authorised Signatory(s) with rubber stamp  |   |

|  | FOR OFFICE  | USE ONLY   |   |
|--|---|--|---|
| UCC Code allotted to the Client :  |   |  |   |
|  | Document verified with 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 we have made th<br>have also made the client aware of 'Rig<br>all the KYC documents. I/We undertake<br>would be duly intimated to the clients.<br>available on my/our website, if any, for t | ghts and Obligations' documer<br>that any change in the 'Policy<br>I/We also undertake that any | nt (s), RDD and Guidance Note<br>and Procedures', tariff sheet a | e. I/We have given/sent him a copy ound all the non-mandatory documents |
| For Frontline Capital Services Lt  | d.  |  |   |
| Signature of the Authorised Signatory  | <u>,                                      </u>  |  |   |

Date \_\_\_\_\_

Seal / Stamp of the Stock Broker

# 1. Refusal of orders for penny/illiquid stock

The stock broker may from time to time limit (quantity/ value)/refuse orders in one or more securities due to various reasons including market liquidity, value of security(ies), the order being for securities which are not in the permitted list of the stock broker/exchange(s) /SEBI. Provided further that stock broker may require compulsory settlement/advance payment of expected settlement value/ delivery of securities for settlement prior to acceptance/placement of order(s) as well. The client agrees that the losses, if any on account of such refusal or due to delay caused by such limits, shall be borne exclusively by the client alone. The stock broker may require reconfirmation of orders, which are larger than that specified by the stock broker's risk management, and is also aware that the stock broker has the discretion to reject the execution of such orders based on its risk perception.

# Setting up client's exposure limits and conditions under which a client may not be allowed to take further position or the broker may close the existing position of a client.

The stock broker may from time to time impose and vary limits on the orders that the client can place through the stock broker's trading system (including exposure limits, turnover limits, limits as to the number, value and/or kind of securities in respect of which orders can be placed etc.). The client is aware and agrees that the stock broker may need to vary or reduce the limits or impose new limits urgently on the basis of the stock broker's risk perception and other factors considered relevant by the stock broker including but not limited to limits on account of exchange/ SEBI directions/limits ( such as broker level/ market level limits in security specific/volume specific exposures etc.), and the stock broker may be unable to inform the client of such variation, reduction or imposition in advance. The client agrees that the stock broker shall not be responsible for such variation, reduction or imposition or the client's inability to route any order through the stock broker's trading system on account of any such variation, reduction or imposition of limits. The client further agrees that the stock broker may at any time, at its sole discretion and without prior notice, prohibit or restrict the client's ability to place orders or trade in securities through the stock broker, or it may subject any order placed by the client to a review before its entry into the trading systems and may refuse to execute/allow execution of orders due to but not limited to the reason of lack of margin/securities or the order being outside the limits set by stock broker/exchange/ SEBI and any other reasons which the stock broker may deem appropriate in the circumstances.

The client agrees that the losses, if any on account of such refusal or due to delay caused by such review, shall be borne exclusively by the client alone.

The stock broker is required only to communicate/advise the parameters for the calculation of the margin/security requirements as rate(s)/percentage(s) of the dealings, through anyone or more means or methods such as post /speed post/courier/registered post/registered A.D/facsimile/ telegram/cable/e-mail/ voice mails/ telephone (telephone includes such devices as mobile phones etc.) including SMS on the mobile phone or any other similar device; by messaging on the computer screen of the client's computer; by informing the client through employees/agents of the stock broker; by publishing/displaying it on the website of the stock broker/making it available as a download from the website of the stock broker; by displaying it on the notice board of the branch/office through which the client trades or if the circumstances, so require, by radio broadcast/television broadcast/newspapers advertisements etc; or any other suitable or applicable mode or manner. The client agrees that the postal department/the courier company /newspaper company and the e-mail/voice mail service provider and such other service providers shall be the agent of the client and the delivery shall be complete when communication is given to the postal department/the courier company/the e-mail/voice mail service provider, etc. by the stock broker and the client agrees never to challenge the same on any grounds including delayed receipt/non receipt or any other reasons whatsoever and once parameters for margin/security requirements are so communicated, the client shall monitor his/her/its position (dealings/trades and valuation of security) on his/her/its own and provide the required/deficit margin/security forthwith as required from time to time whether or not any margin call or such other separate communication to that effect is sent by the stock broker to the client and /or whether or not such communication is received by the client.

The client is not entitled to trade without adequate margin/security and that it shall be his/her/its responsibility to ascertain beforehand the margin /security requirements for his/ her /its orders/trades/ deals and to ensure that the required margin/security is made available to the stock broker in such form and manner as may be required by the stock broker. If the client's order is executed despite a shortfall in the available margin, the client, shall, whether or not the stock broker intimates such shortfall in the margin to the client, make up the shortfall suo moto immediately. The client further agrees that he /she/it shall be responsible for all orders (including any orders that may be executed

without the required margin in the client's account) &/or any claim /loss/ damage arising out of the non availability /shortage of margin/security required by the stock broker &/or exchange &/or SEBI.

The stock broker is entitled to vary the form (i.e., the replacement of the margin/security in one form with the margin/security in any other form, say, in the form of money instead of shares) &/or quantum &/or percentage of the margin &/or security required to be deposited/made available, from time to time.

The margin/security deposited by the client with the stock broker are not eligible for any interest.

The stock broker is entitled to include/appropriate any/all payout of funds &/or securities towards margin/security without requiring specific authorizations for each payout.

The stock broker is entitled to transfer funds &/ or securities from his account for one exchange &/or one segment of the exchange to his/her/its account for another exchange &/or another segment of the same exchange whenever applicable and found necessary by the stock broker.

The client also agrees and authorises the stock broker to treat/adjust his/ her/its margin/security lying in one exchange &/or one segment of the exchange/towards the margin/security/pay in requirements of another exchange &/or another segment of the exchange.

The stock broker is entitled to disable/freeze the account &/or trading facility/any other service. facility, if, in the opinion of the stock broker, the client has committed a crime/fraud or has acted in contradiction of this agreement or/is likely to evade/violate any laws, rules, regulations, directions of a lawful authority whether Indian or foreign or if the stock broker so apprehends.

# 3. Applicable brokerage rate

The stock broker is entitled to charge brokerage within the limits imposed by exchange which at present is as under:

- a. For Cash Market Segment: The maximum brokerage chargeable in relation to trades effected in the securities admitted to dealings on the Capital Market segment of the Exchange shall be 2.5 % of the contract price exclusive of statutory levies. It is hereby further clarified that where the sale/purchase value of a share is Rs.10/ - or less, a maximum brokerage of 25 paise per share may be collected.
- b. For Option contracts: Brokerage for option contracts shall be charged on the premium amount at which the option contract was bought or sold and not on the strike price of the option contract. It is hereby clarified that brokerage charged on options contracts shall not exceed 2.5% of the premium amount or Rs 100/- (per lot) whichever is higher.

# 4. Imposition of penalty/delayed payment charges

The client agrees that any amounts which are overdue from the client towards trading or on account of any other reason to the stock broker will be charged with delayed payment charges at such rates not exceeding 2% p.m. as may be determined by the stock broker. The client agrees that the stock broker may impose fines/penalties for any orders/trades/deals/actions of the client which are contrary to this agreement/rules/ regulations/bye laws of the exchange or any other law for the time being in force, at such rates and in such form as it may deem fit. Further where the stock broker has to pay any fine or bear any punishment from any authority in connection with/as a consequence of/in relation to any of the orders/trades/deals/actions of the client, the same shall be borne by the client. The client agrees to pay to the stock broker brokerage, commission, fees, all taxes, duties, levies imposed by any authority including but not limited to the stock exchanges (including any amount due on account of reassessment/backlogs etc.), transaction expenses, incidental expenses such as postage, courier etc. as they apply from time to time to the client's account/ transactions/services that the client avails from the stock broker.

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

The stock broker maintains centralized banking and securities handling processes and related banking and depository accounts at designated place. The client shall ensure timely availability of funds/securities in designated form and manner at designated time and in designated bank and depository account(s) at designated place, for meeting his/her/its pay in obligation of funds and securities. The stock broker shall not be responsible for any claim/loss/damage arising out of non availability/short availability of funds/securities by the client in the designated account(s) of the stock broker for meeting the pay in obligation of either funds or securities. If the client gives orders/trades in the anticipation of the required securities being available subsequently for pay in through anticipated payout from the exchange or through borrowings or any off market delivery(s) or market delivery(s) and if such anticipated availability does not materialize in actual availability of securities/funds for pay in for any reason whatsoever including but not limited to any delays/ shortages at the exchange or stock broker level/non release of margin by the stock broker etc., the losses which may occur to the client as a consequence of such shortages in any manner such as on account of auctions/square off/closing outs etc., shall be solely to the account of the client and the client agrees not to hold the stock broker responsible for the same in any form or manner whatsoever.

In case the payment of the margin/security is made by the client through a bank instrument, the stock broker shall be at liberty to give the benefit/credit for the same only on the realization of the funds from the said bank instrument etc. at the absolute discretion of the stock broker.

Where the margin /security is made available by way of securities or any other property, the stock broker is empowered to decline its acceptance as margin/security &/or to accept it at such reduced value as the stock broker may deem fit by applying haircuts or by valuing it by marking it to market or by any other method as the stock broker may deem fit in its absolute discretion.

The stock broker has the right but not the obligation, to cancel all pending orders and to sell/close/liquidate all open positions/ securities/shares at the pre-defined square off time or when Mark to Market (M-T-M) percentage reaches or crosses stipulated margin percentage mentioned on the website, whichever is earlier. The stock broker will have sole discretion to decide referred stipulated margin percentage depending upon the market condition. In the event of such square off, the client agrees to bear all the losses based on actual executed prices. In case open position (Le. short/long) gets converted into delivery due to non square off because of any reason whatsoever, the client agrees to provide securities/funds to fulfill the payin obligation failing which the client will have to face auctions or internal close outs; in addition to this the client will have to pay penalties and charges levied by exchange in actual and losses, if any. Without prejudice to the foregoing, the client shall also be solely liable for all and any penalties and charges levied by the exchange(s).

The stock broker is entitled to prescribe the date and time by which the margin/security is to be made available and the stock broker may refuse to accept any payments in any form after such deadline for margin/security expires.

Notwithstanding anything to the contrary in the agreement or elsewhere, if the client fails to maintain or provide the required margin/fund/security or to meet the funds/margins/ securities pay in obligations for the orders/trades/deals of the client within the prescribed time and form, the stock broker shall have the right without any further notice or communication to the client to take any one or more of the following steps:

- i. To withhold any payout of funds/securities.
- ii. To withhold/disable the trading/dealing facility to the client.
- iii. To liquidate one or more security(s) of the client by selling the same in such manner and at such rate which the stock broker may deem fit in its absolute discretion. It is agreed and understood by the client that securities here includes securities which are pending delivery/receipt.

- iv. To liquidate/square off partially or fully the position of sale &/or purchase in anyone or more securities/contracts in such manner and at such rate which the stock broker may decide in its absolute discretion.
- v. To take any other steps which in the given circumstances, the stock broker may deem fit.

The client agrees that the loss(s) if any, on account of anyone or more steps as enumerated herein above being taken by the stock broker, shall be borne exclusively by the client alone and agrees not to question the reasonableness, requirements, timing, manner, form, pricing etc., which are chosen by the stock broker.

# Shortages in obligations arising out of internal netting of trades

Stock broker shall not be obliged to deliver any securities or pay any money to the client unless and until the same has been received by the stock broker from the exchange, the clearing corporation/ clearing house or other company or entity liable to make the payment and the client has fulfilled his/her/its obligations first.

The policy and procedure for settlement of shortages in obligations arising out of internal netting of trades is as under:

- a. The securities delivered short are purchased from market on T+3 day which is the Auction Day on Exchange, and the purchase consideration (inclusive of all statutory taxes & levies) is debited to the short delivering seller client.
- b. If securities cannot be purchased from market due to any reason whatsoever on T+3 day they can be covered from the market on any subsequent trading days. In case any reason whatsoever (any error or omission) any delay in covering of securities leads to higher losses, stock broker will not be liable for the same. Where the delivery is matched partially or fully at the Exchange Clearing, the delivery and debits/credits shall be as per Exchange Debits and Credits.
- c. In cases of securities having corporate actions all cases of short delivery of cum transactions which cannot be auctioned on cum basis or where the cum basis auction payout is after the book closure/record date, would be compulsory closed out at higher of 10% above the official closing price on the auction day or the highest traded price from first trading day of the settlement till the auction day

# Conditions under which a client may not be allowed to take further position or the broker may close the existing position of a client.

We have margin based RMS System. Client may take exposure upto the amount of margin available with us.

Client may not be allowed to take position in case of non-availability/ shortage of margin as per our RMS policy of the company. The existing position of the client is also liable to square off/ close out without giving notice due to shortage of margin/non making of payment for their pay-in obligation/outstanding debts.

# 8. De-registering a client

Notwithstanding anything to the contrary stated in the agreement, the stock broker shall be entitled to terminate the agreement with immediate effect in any of the following circumstances:

- If the action of the Client are prima facie illegal/improper or such as to manipulate the price of any securities or disturb the normal/ proper functioning of the market, either alone or in conjunction with others.
- ii. If there is any commencement of a legal process against the Client under any law in force;
- iii. On the death/lunacy or other disability of the Client;
- iv. If a receiver, administrator or liquidator has been appointed or allowed to be appointed of all or any part of the undertaking of the Client;
- If the Client has voluntarily or compulsorily become the subject of proceedings under any bankruptcy or insolvency law or being a company, goes into liquidation or has a receiver appointed in respect of its assets or refers itself to the Board for Industrial and Financial Reconstruction or under any other law providing protection as a relief undertaking;
- vi. If the Client being a partnership firm, has any steps taken by the Client and/ or its partners for dissolution of the partnership;
- vii. If the Client have taken or suffered to be taken any action for its reorganization, liquidation or dissolution;
- viii. If the Client has made any material misrepresentation of facts, including (without limitation) in relation to the Security;
- ix. If there is reasonable apprehension that the Client is unable to pay its debts or the Client has admitted its inability to pay its debts, as they become payable;
- x. If the Client suffers any adverse material change in his/her/its financial position or defaults in any other agreement with the Stock broker;
- xi. If the Client is in breach of any term, condition or covenant of this Agreement;
- xii. If any covenant or warranty of the Client is incorrect or untrue in any material respect; However notwithstanding any termination of the agreement, all transactions made under/pursuant to this agreement shall be subject to all the terms and conditions of this agreement and parties to this agreement submit to exclusive jurisdiction of courts of law at the place of execution of this agreement by Stock Broker.

# 9. Policy regarding treatment of inactive accounts:

When Trade is not done in an account for more than 6 months, Stock Broker reserves the right to temporary suspend the operations. The Management may allow operations in such account after making such verification as it deems fit. The balance of securities/funds will be transferred to client after due verification.

# Client Acceptance of Policies and Procedures stated hereinabove:

I/We have fully understood the same and do hereby sign the same and agree not to call into question the validity, enforceability and applicability of any provision/clauses this document any circumstances what so ever. These Policies and Procedures may be amended/changed unilaterally by the broker, provided the change is informed to me/us with through anyone or more means or methods such as post/speed post/courier/registered post/registered AD/facsimile/telegram/cable/e-mail/voice mails/telephone (telephone includes such devices as mobile phones etc.) including SMS on the mobile phone or any other similar device; by messaging on the computer screen of the client's computer; by informing the client through employees/agents of the stock broker; by publishing/displaying it on the website of the stock broker/making it available as a download from the website of the stock broker; by displaying it on the notice board of the branch/office through which the client trades or if the circumstances, so require, by radio broadcast/ television broadcast/newspapers advertisements etc; or any other suitable or applicable mode or manner. I/we agree that the postal department/the courier company /newspaper company and the email/voice mail service provider and such other service providers shall be my/our agent and the delivery shall be complete when communication is given to the postal department/the courier company/the e-mail/voice mail service provider, etc. by the stock broker and I/we agree never to challenge the same on any grounds including delayed receipt/non receipt or any other reasons whatsoever. These Policies and Procedures shall always be read along with the agreement and shall be compulsorily referred to while deciding any dispute/ difference or claim between me/ us and stock broker before any court of law/judicial/adjudicating authority including arbitrator/ mediator etc.

| <b>£</b> 15 |                  |  |
|-------------|------------------|--|
|             | Client Signature |  |

|  |  | TARIFF                    | SHEET                 |                                  |  |                                     |
|--|--|---------------------------|-----------------------|----------------------------------|--|-------------------------------------|
| To, Frontline Capital Read, Office: M-6, M-6   | Services Ltd. Block Market, 2nd Floor            | :                         |                       |                                  | Dated  | :                                   |
| Greater Kailash-II, New  |  | Subject : Br              | okerage               | Slab                             |  |                                     |
| Dear Sir,  |  |                           | <u> </u>              | <u></u>                          |  |                                     |
| Please make a note of l  | Brokerage slab of the fo                         | llowing client for branch | concept               | :                                |  |                                     |
| Name of Client :   |  |                           |                       | Client Code :                    |  |                                     |
|  |  | BROK                      | ERA                   | G E                              |  |                                     |
|  | NSE / BSE  |                           |                       |                                  | F&O NSE  | / BSE                               |
| Jobbing<br>%   | Minimum<br>Paisa                                 | Delivery<br>%             | N                     | /linimum<br>Paisa                | F & O<br>Brok. % (NSE/BSE)   | F & O Min. Paisa<br>Brok. (NSE/BSE) |
|  |  |                           |                       |                                  |  |                                     |
|  | GE : Rs. 100 or 1.5% or<br>⊋0.01% in Cash Market |                           |                       | t.                               | er as per contract. cepted and Confirmed   |                                     |
| For(Signature of Broker / A  | uthorised Person with S                          | Stamn)                    |                       |                                  | <u>-</u>   | ent Signature                       |
| <ol> <li>Please note the rul</li> <li>Margin required 3.</li> </ol>                    | es and regulation of NSI                         | E/BSE as amended from     | ntimetoti<br>Lapplica | ime will be app<br>ble from time | erage as applicable from t<br>licable for all transaction<br>to time. In present envir | done on NSE/BSE.                    |
| Sir, This is to inform you Bombay Stock Excha Thanks and best reg For Frontline Capita | ange Ltd. (BSE).<br>jards.                       | ed trading and Pro-a      | account               | trading in Na                    | tional Stock Exchang   | e of India Ltd. (NSE)/              |
| Authorised Signatory I acknowledge the re Pro-account trading.                         | eceipt of information                            | given above by Fron       | tline Ca              | pital Service                    | s Ltd. that they do Cli  | ent base trading and                |
|  | ture y person himself/hers                       |                           | his/her               | <br>attorney/auth                | orised person etc.]  |                                     |

# DOCKET B

**VOLUNTARY DOCUMENTS** 

# RUNNING ACCOUNT AUTHORISATION

| To, | Date:  |
|-----|--|
| Reg | rontline Capital Services Ltd. gd. Office: M-6, M-Block Market, 2nd Floor, eater Kailash-II, New Delhi-110048  |
| Dea | ar Sir,  |
|     | e are dealing through you as a client in Capital Market and/or Future & Option segment and/or Currency Derivative Segment and/or erest Rate future Segment & in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as ler:   |
| 1.  | I/we request and authorise you to maintain running account(s) for me/us and from time to time debit these securities and funds from running accounts and make pay-in of securities and funds to exchanges/clearing corporations/other receiving party(ies) to settle my/our trades/ dealings. Similarly, where I/we have to receive securities/ funds in settlement of trades/ dealings please keep the securities and funds with you and make credit entries for the same in running accounts of securities and funds maintained by you. Further, the funds & securities can be transferred from one segment to other and from one exchange to another as per the requirements. |
| 2.  | In case I/We have an outstanding obligation on the settlement date, you may retain the requisite securities/funds towards such obligations and may also retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the exchanges.  |
| 3.  | I/We request you to retain securities and funds lying to my/our credit in running accounts as margin/collateral/pay-in/other-future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing Corporation unless I/We instruct you to transfer the same to my/our account.  |
| 4.  | The stock broker is authorize to transfer funds &/ or securities from his/her/its account for one exchange & / or one segment of the exchange to his / her / its account for another exchange & / or another segment of the same exchange whenever applicable and found necessary by the stock broker. The client also agrees and authorises the stock broker to treat / adjust his/ her / its margin / security lying in one exchange & /or one segment of the exchange / towards the margin / security / pay in requirements of another exchange & / or another segment of the exchange.   |
| 5.  | I/We request you to settle my fund and securities account  Once in every calendar Quarter or  Once in a calendar Month or such other higher period as allowed by SEBI/Stock Exchange time to time except the funds given towards collaterals/margin in form of Bank Guarantee and/or Fixed Deposit Receipt.  |
| 6.  | I/We further authorize you to retain an amount of upto Rs. 10,000/- (net amount across segment and across stock exchanges) in order to avoid administrative/operational difficulties in settling my/our account. The same may be released on my/our specific request.  |
| The | erunning account authorization provided by me shall continue and remain valid until it is revoked by me anytime in writing.  |
| Tha | anking you   |
| You | urs Faithfully   |
| L   | 8  |
|     | Client Signature Name:   |
| [No | ote: To be signed by person himself/herself not to be signed by his/her attorney/ authorised person etc.]  |

| AUTHORISATION FOR ELECTRONIC CONTRACT   | NOTES / SMS ALERTS   |
|---|--|
| To,   | _  |
| Frontline Capital Services Ltd.   | Dated :  |
| Regd. Office: M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048  |  |
| Dear Sir,   |  |
| I/We have been / shall be dealing through you as my / our broker on the Capital Mar<br>Derivative Segments, Mutual Fund. This instruction is applicable for all the exchanges / s<br>As my/our broker i.e. agent I/ We direct and authorize you to carry out trading / dealings or  | egments in which I/we have opened account with you.  |
| I/ We understand that, I / we have the option to receive the contract notes in physical for hereby opt for receipt of contract notes in electronic form. I// We hereby also give my/othrough your SMS alert services. Accordingly, please note my current email id accommunication to me / us.  | our consent for providing me/ us Trade Confirmations   |
| Email Id:   |  |
| Mobile No.:   |  |
| I/ We agree not to hold you responsible for late / non-receipt of contract notes sent in reason including but not limited to failure of email servers, loss of connectivity, email dispatching software shall be a conclusive proof of dispatch of contract notes to me/us a me/us and shall not be disputed by me/us on account of any non-receipt/ delayed receipt  | in transit etc. I/ we agree that the log reports of your and such dispatch shall be deemed to mean receipt by  |
| I/We also agree that non-receipt of bounced mail notification by you shall amount to delive I/ We understand that SMS Alert service is purely a voluntary facility provided by you to u with the actual contract notes/financial ledger given by you. The messages flashed shall be agree not to hold you liable for any incompleteness/ inaccuracies in the messages sent normal confirmations received by me/us.  | s and it shall be my/our responsibility to check the data<br>be merely reminders for my/our convenience and I/ We  |
| In case, in any of the above segments / exchanges due to any reason, whatsoever, if you by permit you to send the same in physical mode.  | want to send contract notes in physical form, I/we here  |
| I/We understand that I am required to intimate any change in the email id/ mobile number letter in original to you, provided however that if I/we am/are an internet client then in that can be made by me/ us through a secured access using client specific user id and passwo of my / our verbal directions / authorizations given and carried out by you earlier. I/We shay arise as a consequence of your adhering to and carrying out my / our directions given | event the request for change in email id/email account<br>ord. Please treat this authorization as written ratification<br>nall be liable for all losses, damages and actions which |
| Thanking you Yours Faithfully   |  |
| <b>∠</b> n 9  |  |
| Client Signature  |  |
| C   | ent Code   |
| [Note: To be signed by person himself/herself not to be signed by his/her attorne   |  |
| To,   |  |
| Frontline Capital Services Ltd.  Regd. Office: M-6, M-Block Market, 2nd Floor,  Greater Kailash-II, New Delhi-110048  | AUTHORISATION  |
| Dear Sir,  I/We have been / shall be dealing through you as my / our broker on the Capital instruction is applicable for all the exchanges / segments in which I / we have opened the option to receive the contract notes in physical form or electronic form. In purs contract notes in physical form. I hereby authorize you to debit my account with Rs. 25 other statutory charges as stationary and postage charges.  Thanking you  Yours Faithfully            | l account with you. I/ We understand that, I / we have suance of the same, I/ we hereby opt for receipt of   |

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

Client Signature <u>£10</u> 10

Client Name\_\_\_\_\_

# **LETTER OF AUTHORITY**

Dated:

To.

# Frontline Capital Services Ltd.

Regd. Office: M-6, M-Block Market, 2nd Floor,

Greater Kailash-II, New Delhi-110048

# Sub: Letter of Authority Cash/F&O/ Currency Derivative/Mutual Fund Segment of the Exchange

I/we dealing with you as client at NSE/BSE in Cash, F&O & Currency Derivative Segment and in order to facilitate ease of operations, I/We authorise you as under:

- 1. I/We authorise you to set off outstanding in any of my/our accounts against credits available or arising in any other accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the Exchange or in any other exchange and/or against the value of cash margin or collateral shares provided to you by me/us.
- 2. I/We hereby authorise you not to provide me/us Order Confirmation/ Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We shall get the required details from contract notes issued by you.
- 3. I/We hereby authorise you to keep all the securities which I/We have given you in margin including the payout securities received by us for meeting margin / order obligation in any of the stock exchanges in whatever manner which may include pledging of shares in favour of bank and / or taking loan against the same or meeting margin/ pay in obligation on my/our behalf or for giving the same as margin to the any of the Stock Exchanges or otherwise.
- 4. I/We request you to retain credit balance in any of my/our account and to use the unused funds towards my/our margin/future obligation at any or both the Exchanges unless I/We instruct you otherwise. I/we also authorize you to debit the necessary demat charges from time to time, for keeping the shares in your client demat beneficiary account on my behalf. I/We also authorise you to debit the financial charges @2% p.m., for the debit balances, if any, in my account and not settled as per the exchange requirements.
- 5. I/We request you to retain Securities in your demat account for my/our margin/future obligations at all Exchanges, unless I/We instruct you to transfer the same to my/our account.
- 6. I/We request you to consider my/our telephonic instructions for order placing/order modification/order cancellation as a written instruction and give me/us all the confirmation on telephonic unless instructed otherwise in writing. I/We am/are getting required details from contracts issued by you.
- 8. I/We will inform you the change of my/our email: ID, if any, in future either by regd. Post or through a digitally signed e-mail.
- 9. I/We are aware and acknowledge that trading of all exchanges is in Electronic mode, based on Vsat, lease line, ISDN, Modem, VPN, Internet and/or combination of technologies and computer system to place and route order and also involves many uncertain factors and complex hardware, software, systems, communication lines, peripherals, pay in payout of funds & securities, online & offline banking etc. these are susceptible to interruptions, delay, mistake and dislocations; and your services may at any time be unavailable without further notice and I/we understand that there exists a possibility of communication failure or system problems or slow or delay response from system or trading half, or any such other problem/glitch whereby not been able to establish access to the trading system/network or delay in execution of trades, which may be beyond your control any may result in delay in processing or not processing of any orders either in part or in full. I understand that you are not making any representation or warranty that your service will be available to the Client at all times without any interruption. I/We agree that I/We shall not have any claim for any loss incurred by me/us against you on account of any suspension, delay, interruption, non-availability or malfunctioning of your System or Service for any reason whatsoever.
- 10. I/We confirm that I/We never sublet the trading terminal on any term of connectivity from my place to any other place without your prior approval.
- 11. I/We am/are agreeable for inter-settlement transfer of securities towards settlement.
- 12. I/we am/are agreeable for & authorise you to with hold funds pay-out towards all the applicable margins and debits.
- 13. All fines/penalties and charges/Bank charges levied upon you due to my acts / deeds or transaction may be recovered by you from my account.
- 14. I have a Trading relationship with **Frontline Capital Services Ltd.** Please debit the charges relevant with depository services from my trading account on monthly basis. I also agree to maintain the adequate balance in my trading account/ pay adequate advance fee for the said reason.

| Thanking you                              |             |  |
|---|-------------|--|
| Yours Faithfully                          |             |  |
| <b>4</b> 0 11                             |             |  |
| Client Signature                          |             |  |
| Client Name                               | Client Code |  |
| The T   1   1   1   1   1   1   1   1   1 |             |  |

# FORMAT OF REQUEST

[Please tick (✓) wherever applicable]

| DP ID   | Client ID  | Date  |
|---|--|---|
| Name of Account Ho  | older  |   |
| Mobile No   | ).   |   |
| E-mail ID   |  |   |
| I hereby declare tha (Spouse, dependent co                      | t the aforesaid mobile<br>hildren and dependent pa | number or E-mail ID belongs to   Me or  My Family arents)   |
| Signature of Account Holder                                     | <b>£</b> 012                                       |   |
| Name of Account Ho  | older  |   |
|   |  |   |
|   |  | TERE HERE   |
|   |  | ACKNOWLEDGEMENT   |
| To, Frontline Ca Regd. Office: M-6, M-E Greater Kailash-II, New |  | b Ltd.  Dated:  |
| Trading Code:   |  |   |
| Obligations, Policies an  | d Procedures, Terms & pital Market Segment, Fu     | d Client Registration Form, Combined Risk Disclosure Document, Investors Rights & Conditions of Broking Services and Annexures signed and executed by me/ us fouture and Option Segment, Currency Derivative Segment and Wholesale Debt Marke |
| <u>∠n13</u> Client Signatu                                      | ure  |   |
| Client Name   |  | Client Code   |

[Note: To be signed by person himself/herself not to be signed by his/her attorney/authorized person etc.]

|                                       | CLIENT DEFAULTER DECLARATION  |                                      |
|---------------------------------------|---|--------------------------------------|
| that I have not been involved in a    | having PAN Noany terrorist activity and I have not been declared as defa arious Exchanges/Regulatory bodies/CIBIL (Credit Informa | ulter or my name is not appearing in |
| I further declare that the above m    | entioned declaration/statement is true and correct.   |                                      |
| Thanks                                |   |                                      |
| Client Signature                      | Date  |                                      |
| Client Name                           | Client Code   |                                      |
| [Note: To be signed by person him     | nself/herself not to be signed by his/her attorney/authorized   | person etc.]                         |
|                                       | DECLARATION FOR NAME MISMATCH   |                                      |
| I hereby declare that                 |   |                                      |
| 1. My name mentioned in PAN Ca        | ard is  |                                      |
| 2. In additional I D Proof i.e. Voter | r Id / Passport / Driving License it is   |                                      |
| 3. In Bank A/c No                     | it is   |                                      |
|                                       | is this   |                                      |
|                                       | mentioned in above details document pertains to me, there as mentioned in my bank proof.  | efore I request my account and       |
| <u>✓□15</u> Client Signature          | Date  |                                      |
| Client Name                           | Client Code   |                                      |
|                                       | nself/herself not to be signed by his/her attorney/authorized   |                                      |

| FR  | CSL   | FATCA & CRS Declara                       | tion - Individual  |
|---|---|---|--|
| PAN   |   | Trading                                   | DP Code  |
| Nar   |   |   |  |
| Plac  | te of Birth   | Country of Birth                          |  |
| Nat   | ionality  |   |  |
| Anr   | nual Income Below Rs. I Lac Rs. 10 Lac to 25 La                   | Rs. I Lac to 5 Lac  Rs. 25 Lac to I Crore | Rs. 5 Lac to 10 Lac > 1 Crore                              |
|   | : Worth <b>Amount Rs</b> t worth should not be older than I year) | Net Wor                                   | th as on DDMMMYYYY   |
| Occ<br>Det  |   |   | ernment Service Public Sector  x Dealer Others Pl. Specify |
| Poli  | tically Exposed Person (PEP)                                      | Related to Politically Exposed Per        | rson (RPEP)  |
|   | you a tax resident of any country oth                             | <u> </u>                                  |  |
| If ye   | •   | which you are resident for tax purpose    | e and the associated Tax ID number                         |
| Sr.<br>No.  | Country   | Tax Identification Number                 | Identification Type<br>(TIN or Other, please specify)      |
| I.  |   |   |  |
| 2.  |   |   |  |
| 3.  |   |   |  |
|   |   | DECLARATION                               |  |
| I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Frontline Capital Services Ltd. for any modification to this information promptly. |   |   |  |
| I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).  |   |   |  |
| (Client Signature)  |   |   |  |
| Date : D D M M Y Y Y Y Y P  |   |   |  |
| For Investor convenience, Frontline Capital Services Ltd. collecting this mandatory information for updating across all Group Companies of Frontline Capital Services Ltd. whether you are already an investor or would become an investor in future.   |   |   |  |
| Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest Frontline Capital Services Ltd branch or you can dispatch the hard copy to-  |   |   |  |
| Frontline Capital Services Ltd. B-22, Sector-4, Noida, U.P201301  |   |   |  |
|   |   |   |  |

| Please tick the applicable tax resident declaration  I. Is "Entry" a tax resident of any country other than India  | FF    | CSL   | FATCA                      | & CRS Declaration                       | on - Non Individual                                  |
|--|-------|---|----------------------------|---|--|
| I. Is "Entity" a tax resident of any country other than India  |       |   | Tradi                      | ng                                      | DP Code  |
| (If yes, please provide country/lies in which the entity is a resident for tax purposes and the associated Tax ID number below.)   Sr. No.   Country   Tax Identification Number   Identification Type (TIN or Other'; please specify)   I.  | Plea  | se tick the applicable tax resident declaration   | ۱ -                        |   |  |
| Sr. Country  Tax Identification Number  (TIN or Other', please specify)  I.  I.  In case Tax Identification Number is not available, kindly provide its functional equivalent. In case Thy or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GillN, etc.  In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here  PART A (to be filled by Financial Institutions or Direct Reporting NFEs)  I. We are a.  Financial Institution (Refer 1 of Part C)  Or Or Direct reporting NFE (Refer 3(ni) of Part C) (C) (C) (please tick as appropriate)  GIIN Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's or or Direct exporting NFE (Refer 3(ni) of Part C) (C) (please tick as appropriate)  GIIN not available (please tick as appropriate)  GIIN not available (please tick as appropriate)  GIIN not available (please tick as appropriate)  Applied for Not obtained - Non-participating FI Not required to apply for - please specify 2 digits sub-category (Refer I A of Part C)  PART B (please fill any one as appropriate) to be filled by NFEs other than Piece Reporting NFEs)  I. Is the Entity a publicly traded company (fant is a company whose shores are regularly traded on an established securities market) (Refer 2 to f Part C)  Yes [ (If yes, please specify mme of the listed company or me stock exchange on which the stock is regularly traded company (a campany whose shores are regularly traded on an established securities market) (Refer 2 to f Part C)  Yes [ Nature of Business Please specify the sub-category of Active NFE [ (Mention code - refer 2 c of Part C)  Yes [ Nature of Business Please specify of Active NFE [ Mention code - refer 2 c of Part C]  Yes [ Nature of Business Please specify in the Listed Company or a related entity of Publicly Traded Company)  Linited Libblity Partnership Company  Unincorporated association / | 1.1   | s "Entity" a tax resident of any country other  | than India                 | Yes No                                  |  |
| In case Tax Identification Number is not available, kindly provide its functional equivalent.  In case Tax Identification Number is not available, kindly provide its functional equivalent.  In case TN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GliN, etc.  In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here  PART A (to be filled by Financial Institutions or Direct Reporting NFEx)    We are a, Financial Institution (Rafer 1 of Part C)  | (If   | yes, please provide country/ies in which th   | ne entity is a r           | esident for tax purposes and the asso   | ociated Tax ID number below.)                        |
| In case Tax Identification Number is not available, kindly provide its functional equivalent.  In case Tix or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GlIN, etc.  In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here  PART A (to be filled by Financial Institutions or Direct Reporting NFEs)  I. We are a. Financial institution (Refer I of Part C.)  Or Direct reporting NFE (Refer 3(vii) of Part C.)  (GliN above and indicate your sponsor's name below  Name of sponsoring entity  (GliN not available (please tick as applicable)  Applied for Not required to apply for - please specify 2 digits sub-category (Refer I A of Part C.)  PART B (please fill any one as appropriate)  Is the Entity a publicly traded company (that is, a company whose shares are regularly traded company (a company whose shares  |       | Country   |                            | Tax Identification Number               |  |
| In case Tax Identification Number is not available, kindly provide its functional equivalent.  In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.  In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here  PART A (to be filled by Financial Institutions or Direct Reporting NFEs)  I. Weare a, Financial Institution (Refer I of Part C)  | ı.    |   |                            |   |  |
| In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.  In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here  PART A (to be filled by Financial Institutions or Direct Reporting NFEs)  1. We are a, Financial Institution (Refer I of Part C) or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate)  GIIN Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's name below Name of sponsoring entity  GIIN not available (please tick as appropriate)  Applied for Not required to apply for - please specify 2 digits sub-category (Refer I A of Part C)  PART B (please fill any one as appropriate "to be filled by NEEs other than Direct Reporting NEEs")  1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2 and Part C)  2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2 b of Part C)  Yes   If yes, please specify any one stock exchange on which the stock is regularly traded on an established securities market) (Refer 2 b of Part C)  Yes   If yes, please specify on one of the listed company on done stock exchange on which the stock is regularly traded on an established securities market) (Refer 2 b of Part C)  Yes   Nature of Business  Please specify the sub-category of Active NFE   (Mention code – refer 2c of Part C)  4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  Yes   Nature of Business  Please specify the sub-category of Active NFE   (Mention code – refer 2c of Part C)  Yes   Nature of Business  Please specify the sub-category of Active NFE   (Mention code – refer 2c of Part C)  Yes   Nature of Business  Please specify the sub-category of Active NFE   (Mention code –  | 2.    |   |                            |   |  |
| In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.  In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here  PART A (to be filled by Financial Institutions or Direct Reporting NFEs)  I. We are a, Financial Institution (Refer I of Part C) Or Direct reporting NFE (Refer 3(wi) of Part C) (please tick as appropriate)  GIIN Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's name below Name of sponsoring entity  [GIIN not available (please tick as appropriate)  Applied for Not required to apply for - please specify 2 digits sub-category [Refer I A of Part C)  PART B (please fill any one as appropriate "to be filled by NEEs other than Direct Reporting NEEs")  I. Is the Entity a publicly traded company (that is, a complany whose shares are regularly traded on an established securities market) (Refer 2a of Part C)  2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)  Yes  [If yes, please specify any one stock exchange on which the stock is regularly traded on an established securities market) (Refer 2b of Part C)  Yes  Name of stock exchange  3. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)  Yes  Nature of relation:  Subsidiary of the Listed Company or Controlled by a Listed Company Name of stock exchange  1. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  Yes  Nature of Business  Please specify the sub-category of Active NFE  (Mention code – refer 2c of Part C)  Yes  Nature of Business  UBO Declaration (Mandatory for all entities except, a Publicly Traded Company)  Partnership Firm  Limited Liability Partnership Company  Unincorporated assoc |       |   |                            |   |  |
| I. We are a, Financial institution (Refer 1 of Part C)   | In ca | ase TIN or its functional equivalent is not avail   | able, please pro           | ovide Company Identification number or  | ,  |
| I. We are a, Financial institution (Refer I of Part C) or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate)  GIIN not available (please tick as applicable)  GIIN not available (please tick as applicable)  Applied for Not obtained – Non-participating FI Not required to apply for - please specify 2 digits sub-category (Refer I A of Part C) Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2 of Part C)  Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2 of Part C)  Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2 of Part C)  Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2 of Part C)  Is the Entity a passiveNFE (Refer 2 of Part C)  Yes Nature of Business  Please specify the sub-category of Active NFE (Mention code – refer 2c of Part C)  Yes Nature of Business  UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)  Category (Please tick applicable category):  Unincorporated association / body of individuals  Public Charitable Trust  RIP (Not required to not have a GIIN but you are sponsored by another entity, please provide your sponsor's name below  Name of sponsor's name below  Name of sponsor's name below  Name of sponsoring entity  Public Charitable Trust  Rot of Business  Private Trust  Private Trust  Private Trust   |       |   |                            |   |  |
| Financial institution (Refer I of Part C) or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate)  GIIN not available (please tick as appropriate)  Applied for Not required to apply for - please specify 2 digits sub-category (Refer I A of Part C)  PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")  I. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)  2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)  3. Is the Entity an active NFE (Refer 2c of Part C)  4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  Part B (please tick as applicable category): Unlisted Company Partnership Firm Uninted Liability Partnership Company Unincorporated association / body of individuals  Public Charitable Trust  Private Trust  | PAF   | RT A (to be filled by Financial Institutions or Direct R                                      | eporting NFEs)             |   |  |
| PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")  1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)  2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)  3. Is the Entity an active NFE (Refer 2c of Part C)  4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  Whose shares are regularly traded on an established securities market)  Yes (If yes, please specify any one stock exchange on which the stock is regularly traded)  Name of stock exchange  Yes (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)  Name of listed company  Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company  Name of stock exchange  Yes Nature of Business  Please specify the sub-category of Active NFE (Mention code – refer 2c of Part C)  Yes Nature of Business  UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)  Category (Please tick applicable category): Unlisted Company Partnership Firm Limited Liability Partnership Company  Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust   | I.    | Financial institution (Refer I of Part C) or Direct reporting NFE (Refer 3(vii) of Part C)    | Note: If you<br>GIIN above | and indicate your sponsor's name below  |  |
| PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")  1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)  2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)  3. Is the Entity an active NFE (Refer 2c of Part C)  4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  UBO Declaration (Mandatory for all entities except, a Publicly Traded Company Public Partnership Firm Limited Liability Partnership Company Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust   |       | GIIN not available (please tick as applicable)  |                            |   |  |
| 1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)   2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)   3. Is the Entity an active NFE (Refer 2c of Part C)   4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)   5. The Entity and passiveNFE (Refer 3(ii) of Part C)   6. The Entity and passiveNFE (Refer 3(ii) of Part C)   7. The Entity and PassiveNFE (Refer 3(ii) of Part C)   8. The Entity and PassiveNFE (Refer 3(ii) of Part C)   9. The Entity and PassiveNFE (Refer 3(ii) of Part C)   9. The Entity and PassiveNFE (Refer 3(ii) of Part C)   9. The Entity and PassiveNFE (Refer 3(ii) of Part C)   9. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   1. The Entity and PassiveNFE (Refer 3(iii) of Part C)   2. The Entity and PassiveNFE (Refer 3(iii) of Part C)   3. The Entity and PassiveNFE (Refer 3(iii) of Part C)   4. The Entity and PassiveNFE (Refer 3(iii) of Part C)   5. The Entity and PassiveNFE (Refer 3(iii) of Part C)   6. The Entity and PassiveNFE (Refer 3(iii) of Part C)   7. The Entity and PassiveNFE (Refer 3(iii) of Part C)   8. The Entity and PassiveNFE (Refer 3(iii) of Part C)   9. The Entity and PassiveNFE (Refer 3(iii) of PassiveNFE (Refer 3(iii) of PassiveNFE (Refer 3(iii) of Pa   | ΡΔΕ   | RT B (blease fill any one as abbrobriate "to be filled b                                      |                            |   | (  |
| (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)  Name of listed company Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company Name of stock exchange  3. Is the Entity an active NFE (Refer 2c of Part C)  Yes Nature of Business Please specify the sub-category of Active NFE (Mention code – refer 2c of Part C)  4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  Yes Nature of Business  UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)  Category (Please tick applicable category): Unlisted Company Partnership Firm Limited Liability Partnership Company Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust  |       | Is the Entity a publicly traded company (that whose shares are regularly traded on an establi | is, a company              | Yes (If yes, please specify any one sto | ock exchange on which the stock is regularly traded) |
| Please specify the sub-category of Active NFE  (Mention code – refer 2c of Part C  4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  Yes  Nature of Business  UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)  Category (Please tick applicable category):  Unlisted Company  Partnership Firm  Limited Liability Partnership Company  Unincorporated association / body of individuals  Public Charitable Trust  Religious Trust  Private Trust  | 2.    | (a company whose shares are regularly traded o  | on an                      | Name of listed company                  |  |
| 4. Is the Entity a passiveNFE (Refer 3(ii) of Part C)  Yes Nature of Business  UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)  Category (Please tick applicable category):  Unlisted Company  Partnership Firm  Limited Liability Partnership Company  Unincorporated association / body of individuals  Public Charitable Trust  Religious Trust  Private Trust  | 3.    | Is the Entity an active NFE (Refer 2c of Part (   | C)                         |   | NITE (Mariana da maria 2 a Charach                   |
| Category (Please tick applicable category):  Unlisted Company  Partnership Firm  Limited Liability Partnership Company  Unincorporated association / body of individuals  Public Charitable Trust  Religious Trust  Private Trust  | 4.    | Is the Entity a passiveNFE (Refer 3(ii) of Part   | C)                         |   | eINFE [] (Irlention code – refer 2c of Part C        |
| Category (Please tick applicable category):  Unlisted Company  Partnership Firm  Limited Liability Partnership Company  Unincorporated association / body of individuals  Public Charitable Trust  Religious Trust  Private Trust  | ι     | JBO Declaration (Mandatory for all e  | entities excep             | t, a Publicly Traded Company or a re    | elated entity of Publicly Traded Company)            |
| Others (please specify   |       | egory (Please tick applicable category):  Unincorporated association / body of individuals    | Unlisted                   | d Company Partnership Firm              | Limited Liability Partnership Company                |

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH

Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)

controlling person(s). (Please attach additional sheets if necessary)

| Details   | UBO1  | UBO2   | UBO3   |  |  |  |
|---|---|--|--|--|--|--|
| Name of UBO   |   |  |  |  |  |  |
| UBO Code (Refer 3(iv) (A) of Part C)  |   |  |  |  |  |  |
| Country of Tax residency*   |   |  |  |  |  |  |
| PAN #   |   |  |  |  |  |  |
| Address   |   |  |  |  |  |  |
|   |   |  |  |  |  |  |
|   | Zip   | Zip  | Zip  |  |  |  |
|   | Zip State:  | State:   |  |  |  |  |
|   | Country:  | Country:   | State:                                       |  |  |  |
| Address Type  | ☐ Residence ☐ Business ☐ Registered office  | ☐ Residence ☐ Business ☐ Registered office   | ☐ Residence ☐ Business ☐ Registered office   |  |  |  |
| Tax ID %  |   |  |  |  |  |  |
| Tax ID Type   |   |  |  |  |  |  |
| City of Birth   |   |  |  |  |  |  |
| Country of birth  |   |  |  |  |  |  |
| Occupation Type   | ☐ Service ☐ Business ☐ Others   | ☐ Service ☐ Business ☐ Others  | ☐ Service ☐ Business ☐ Others                |  |  |  |
| Nationality   |   |  |  |  |  |  |
| Father's Name   |   |  |  |  |  |  |
| Gender  | ☐ Male ☐ Female ☐ Others  | ☐ Male ☐ Female ☐ Others   | ☐ Male ☐ Female ☐ Others                     |  |  |  |
| Date of Birth   | DD/MM/YYYY  | DD/MM/YYYY   | DD/MM/YYYY                                   |  |  |  |
| Percentage of Holding (%) \$  |   |  |  |  |  |  |
| Protector of Trust to be specified where<br>*In case Tax Identification Number is not   | be enclosed. Else PAN or any other valid in<br>ver applicable.<br>available, kindly provide functional equivale<br>reholding pattern duly self attested by Auth | orized Signatory / Company Secretary   | signation like Director / Settlor of Trust / |  |  |  |
| I have read and understood the  |   | RATION the Terms ? Conditions mentions   | nd in this Earm (road along with             |  |  |  |
| FATCA & CRS instructions) and   | hereby confirm that the informa   | the Terms & Conditions mentione<br>ation provided by me on this Form                               | is true, correct and complete. I             |  |  |  |
|   | ·-  | <ul> <li>for any modification to this inforn</li> <li>d documents inter alia provisions</li> </ul> |  |  |  |  |
| Exchange of Information (AEOI   |   | a documents inter and provisions   | or Arca & Cho on Automatic                   |  |  |  |
| Name  |   |  |  |  |  |  |
| Designation   |   |  |  |  |  |  |
| <b>€</b> 017  |   | Date : D   |  |  |  |  |
| (Client Signature)  |   | Place :  |  |  |  |  |
| For Investor convenience, Frontline Capital Services Ltd. collecting this mandatory information for updating across all Group Companies of Frontline Capital Services Ltd. whether you are already an investor or would become an investor in future. |   |  |  |  |  |  |
| Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest Frontline Capital Services   |   |  |  |  |  |  |
| Ltd. branch or you can dispate  | • •   |  |  |  |  |  |
| Frontline Capital Services I<br>B-22, Sector-4, Noida, U.P.   |   |  |  |  |  |  |
| For Detail Terms & Condition  | ions please visit www.fcslindia.  | com  |  |  |  |  |

# LETTER TO BE OBTAINED FROM BANK FOR VERIFICATION OF SIGNATURES

| To,  | Dated :  |
|--|--|
| Frontline Capital Services Ltd.  |  |
| <b>Regd. Office :</b> M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048 |  |
| Dear Sir,  |  |
| This is to certify that the savings / current account no                                   | of Mr./Ms.M/s.   |
|  |  |
| with ou  | r branch has been active since years / months and the                      |
| •  | firm that the photograph herein bears true likeness to the identity of the |
| above mentioned person & that the address of the person is as g                            | iven below :   |
|  |  |
| Bank   |  |
| Stamp  |  |
| Across   |  |
| Photograph   |  |
|  |  |
|  |  |
|  |  |
| <b>£</b> 18  | Signature in my presence and Attested                                      |
| Client Signature   |  |
| Name & Signature of the Branch Manager   | <u>Æ</u> □19<br>Client Signature   |
| Name & Signature of the Branch Manager   | •  |
|  | Signature of Branch Manager  |
|  | <b>⊗</b>   |
| Stamp of the Bank and the Branch   |  |

|  | DECLARATION (  | OF HUF         | (To be filled in            | cas  | se of HUF A/     | c Only)       |              |                    |  |
|--|--|----------------|-----------------------------|------|------------------|---------------|--------------|--------------------|--|
| To,  |  |                |                             |      |                  | Da            | ited :       |                    |  |
|  | tline Capital Services L   | .td.           |                             |      |                  | Do            | ueu          |                    |  |
|  | ifice: M-6, M-Block Market, 2nd Floor,<br>Kailash-II, New Delhi-110048   |                |                             |      |                  |               |              |                    |  |
|  | UF firm wishes to open an account with y   |                |                             |      |                  |               |              |                    |  |
|  | hat the first signatory to this letter, i.e., is the Karta of the Joint Family and other signatories are the adult co-parceners of the said family.  |                |                             |      |                  |               |              |                    |  |
| _  | er confirm that the business of the said joir  |                |                             | /bv  | the said Karta a | s also by the | e other sian | atories hereto in  |  |
| he interest and for the benefit of the entire body of co-parceners of the joint family. We all undertake that claims due to the exchange from  |  |                |                             |      |                  |               |              |                    |  |
|  | ne said family shall be recoverable personally from all or any of us and also for the entire family properties of which the first signatory is the   |                |                             |      |                  |               |              |                    |  |
|  | arta, including the share of minor co-parceners In view of the fact that ours is not a firm governed by the Indian Partnership Act of 1952, we have not got our said firm registered under the said Act. |                |                             |      |                  |               |              |                    |  |
|  | Ve hereby undertake to inform you the death or birth of a co-parcener of any change occurring at any time in the membership of our   |                |                             |      |                  |               |              |                    |  |
|  | ly during the operating of the account   |                | partor or are               | , .  |                  | ,,            |              |                    |  |
|  |  |                |                             |      |                  |               |              |                    |  |
| <b>£</b> 1 20  |  |                |                             |      |                  |               |              |                    |  |
| Signature  | e of Karta (with Rubber Stamp)   |                |                             |      |                  |               |              |                    |  |
| Name of Signature of Adult Co-Partionors of HUF (Use Annexure of additional Members)   |  |                |                             |      |                  |               |              |                    |  |
| Sr. No.  | Name of Co-partionors of HUF   | Gende<br>(M/F) | r Relationshi<br>with Karta |      | Date of<br>Birth | PAN           | No.          | Signature          |  |
| 1.   |  |                |                             |      |                  |               |              |                    |  |
| 2.   |  |                |                             |      |                  |               |              |                    |  |
| 3.   |  |                |                             |      |                  |               |              |                    |  |
| 4.   |  |                |                             |      |                  |               |              |                    |  |
|  | Name of Minor Co-Par   | tionors o      | of HUF (Use Ann             | exu  | ure of addition  | al Member     | s)           |                    |  |
| Sr. No.  | Name of Co-partionors of HUF   | •              | Gender (M/F)                | F    | Relationship w   | ith Karta     | Date         | e of Birth         |  |
| 1.   |  |                |                             |      |                  |               |              |                    |  |
| 2.   |  |                |                             |      |                  |               |              |                    |  |
| 3.   |  |                |                             |      |                  |               |              |                    |  |
| 4.   | 4.   |                |                             |      |                  |               |              |                    |  |
| hereby also declare that the particulars given by me as stated above are true to the best of my knowledge as on date for making this application to open an account. I agree that any false/misleading information given by me or suppression of any material information will |  |                |                             |      |                  |               |              |                    |  |
|  | on to open an account. I agree that any fa<br>y said account liable for termination and fu   |                |                             | give | n by me or sup   | oression of a | iny materia  | i information will |  |
| Thanking   |  |                | ,                           |      |                  |               |              |                    |  |
|  | •  |                |                             |      |                  |               |              |                    |  |
| <b>2</b> n 21  |  |                |                             |      |                  |               |              |                    |  |
| Signature  | e of Karta (with Rubber Stamp)   |                |                             |      |                  |               |              |                    |  |
|  |  | ₹              |                             |      |                  |               |              |                    |  |

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**22** 

लिमिटेड में अपना शेयर ट्रेडिंग/डीमैट (सीएम/एफओ) का खाता खोला है। उसके लिए एकाउन्ट ओपनिंग फार्म (के.वाई.सी) और विभिन्न कागजातों पर हस्ताक्षर किया है जोकि अंग्रेजी भाषा में है। मुझे इसका हिन्दी में मतलब समझा दिया गया है। मैं फ्रन्टलाईन

कैपिटल सर्विसेज लिमिटेड के नियम व शर्तों से सहमत हूँ। मुझे के.वाई.सी. की कॉपी, अनुच्छेद 4,5,6, सहित मिल गई है।

.....यह घोषणा करता/करती हूँ कि मैंने फ्रन्टलाईन कैपिटल सर्विसेज

# FORMAT OF BOARD RESOLUTION TO BE GIVEN BY CORPORATE CLIENT (TO BE PRINTED ON LETTER HEAD OF COMPANY)

| OF DIRECTORS OF   |  |   |                                       |
|---|--|---|---------------------------------------|
| THE   | (date) / IIIVIE AI   |   | <br>(Venue)                           |
| "RESOLVED THAT an account for the purpose of trac<br>National Stock Exchange of India Ltd. / Bombay Sto<br>purchase of Securities on the said exchange(s).                                      |  |   | Capital Services Ltd., Member -       |
| FURTHER RESOLVED THAT Shri  |  | and Shri                                    | ,                                     |
| Directors of the Company, be and are hereby, author authorisations, agreements etc. as may be necessary f   | •  |   | -                                     |
| FURTHER RESOLVED THAT the aforementioned Director Company. for conducting trading in securities for and or  |  | uthorised severally, t                      | to give instructions on behalf of the |
| FURTHER RESOLVED THAT, a copy of this resolution  |  |   |                                       |
| Shri  |  |   | to honour the instructions of Shri    |
| Company to carry on trading in Securities.  |  |   | ,,                                    |
| Certified true copy   |  |   |                                       |
| For (Name of the Company)   |  |   |                                       |
|   |  | Dated :                                     | D D M M Y Y Y                         |
| Director  |  | Place :                                     |                                       |
| FORMAT OF DECLARATION TO BE G   | IVEN BY PARTNERSHIP I  | FIRM ON LETTER (                            | HEAD OF THE FIRM                      |
| To,   |  |   |                                       |
| Frontline Capital Services Ltc<br>Regd. Office: M-6, M-Block Market, 2nd Floor,<br>Greater Kailash-II, New Delhi-110048<br>Dear Sir,  | i.   |   | Date                                  |
| We refer to the trading account being opened / open declare and authorise you as under.   | ened with you in the name                                    | of  | and                                   |
| We recognize that a beneficiary account cannot be per applicable law. To facilitate the operation of the a transfer obligations pursuant to the trading No with deposits a partner of the firm. | bove trading account with operations, we authoris            | you and for the purp                        | oose of completing the Securities     |
| the names of the partnership of the firm.  We agree that the obligations for Securities pu transfer to/from the above mentioned account. Was complete discharge of obligations by you in firm.  | e recognize and accept                                       | transfers made by                           | you to the beneficiary account        |
| We hereby authorizeagreements, deeds etc. as may be necessary to en Ltd., and to place order for buying and selling of Secube necessary to engage in business on behalf of the accounts.        | ter into the agreement and<br>urities, sell, purchase, trans | l engage in busines<br>sfer, endorse, negot | tiate and do other things that may    |
| Name of Partners (in block let  | tters)   |   | Signature                             |
|   |  |   |                                       |
|   |  |   |                                       |
|   |  |   |                                       |

# ADDENDUM TO THE CLIENT REGISTRATION FORM / KEY INFORMATION

|  | Date                         |  |
|--|------------------------------|--|
| Act, 2002 and subsequent circulars issued by SEB | I thereto, we hereby obliged |  |

# PREVENTION OF MONEY LAUNDERING

In compliance with the provisions of Prevention of Money Laundering

to consider it as a part of client registration document: -

Prevention of Money Laundering Act, 2002 (herein refer to an "Act") came into affect July 1, 2005 vide notification No. GRE 436(E) dated July 1,2005 issued by Department of Revenue, Ministry of Finance, Govt. of India. Further SEBI vide Circular reference number ISD/CIR/RR/AML/1/06 dated January 18,2006 mandated that all the Stock Brokers should formulate and implement a proper policy framework as per the guidelines on anti money laundering measures and also to adopt a Know Your Client (KYC) policy. SEBI also issued another circular reference number CIR/ISD/AML/3/2010 dt. 31/12/10 advising all the Stock Broker to take necessary steps to ensure compliance with the requirement of Section 12 of the Act inter-alia, maintenance and preservation of records and reporting of information relating to cash and suspicious transactions to Financial Intelligence Unit-India (FIU-IND), New Delhi.

The constituents should ensure that the amount invested in the securities is through legitimate sources only and does not involve and is not designated for the purpose of contravention or evasion of the provision of the Income Tax Act, Prevention of Money Laundering Act, Prevention of corruption Act and/or any other law for the time being in force enacted by Govt. of India from time to time or any rules and regulations, notifications or directions issued there under.

To ensure appropriate identification of the constituents under its KYC policy and with view to monitor the transactions for the prevention of anti money laundering, the company has reserve the right to seek information, record constituents telephonic calls and/or obtained or retained documentation for establishing the identity of the constituents, proof of residence, source of funds, etc. It may re-verify identity and obtain any incomplete or additional information for this purpose.

The constituents or their attorney, if any, shall produce independent source documents, such as photographs, certified copies of ration card/passport/pan card/driving license or such other documents or produce such information as may be required from time to time for verification of the identity, residential address, financial information of the constituents by the company.

If the constituents refuses/fails to produce the required documents and information with in the period specified in the communication sent by company to the constituents, then the company after applying due diligence measures believes that the transaction is suspicious in nature within the purview of the Act and SEBI circulars issued from time to time or on account of deficiencies in the documentation shall have absolute discretion to report suspicious transaction to FIU-IND or to reject the application or to freeze the account of constituent. Thus the KYC documentation shall comply by all the constituents in its true spirit and word.

The Company, its Directors, its Employees and agents shall not be liable in any manner for any claim arising whatsoever on account of freezing of account or on rejection of application etc. due to noncompliance of the provisions of the Act, SEBI circulars and KYC policy and or where company believes that transaction is suspicious in nature within the purview of the Act or SEBI circulars and reporting the same to FIU-IND.

This document form an integral part of the client registration form as addendum or key information memorandum and will be subject to amendments from time to time.

| <b>L</b> 23 |                  |
|-------------|------------------|
|             | Client Signature |
|             |                  |
| Name:.      |                  |



# DOCKET - C DEPOSITORY PARTICIPANT



# Frontline Capital Services Ltd.

Depository Participant: NSDL • SEBI Regn. No.: IN-DP-NSDL-56-98 • DP ID: IN 300564 Regd. Office: M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048

Corporate Office: B-22, Sector-4, Noida-201301

|   | PAF                                    | RT II  | - AC                              | COU       | JNT  | OPE               | NING   | FOR                   | M (I             | FOR IN   | NDIVII        | DUALS             | S&N                  | ON-I             | NDI   | VIDI             | UAL | S)   |                 |     |             |          |   |
|---|--|--------|-----------------------------------|-----------|------|-------------------|--|-----------------------|------------------|--|---------------|-------------------|----------------------|------------------|-------|------------------|-----|--|-----------------|-----|-------------|----------|---|
| (To be filled by the De   | eposito                                | ory Pa | articipa                          | ant)      |      |                   |  |                       |                  |  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |
| Client ID   |  |        |                                   |           |      |                   |  |                       |                  |  |               | Date              | D                    |                  |       | M                | IV  | 1  | Y               | Y   | Y           | Y        |   |
| I/We request you to op<br>(Please fill all the det  |  |        | •                                 |           |      |                   |  |                       | per              | followir   | ng deta       | ils :             | •                    |                  | •     | •                |     | •  |                 |     | •           | •        |   |
| A. DETAILS OF A   | ccou                                   | JNT H  | HOLDE                             | R(S       | )    |                   |  |                       |                  |  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |
| Account Holder(s)   |  |        | Sole/F                            | irst H    | lold | er                |  |                       |                  | Sec  | cond F        | lolder            |                      |                  |       |                  |     | Third  | d Hole          | der |             |          |   |
| Name  |  |        |                                   |           |      |                   |  |                       |                  |  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |
| PAN   |  |        |                                   |           |      |                   |  |                       |                  |  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |
| Occupation (Please tick any one and give brief details)   | tick any one and Public Sector Retired |        |                                   |           |      | Pub<br>Gov<br>Bus | rate Sector.  Ilic Sector.  It. Service  Iness  Iness  Iness | or<br>ce              | Re Ho            | ricultur<br>etired<br>eusewif<br>udent<br>ers (Pl. S | Э             |                   | Publ<br>Govt<br>Busi | lic Se<br>t. Sei | rvice | ]<br>]<br>]<br>] |     | Agricul<br>Retired<br>House<br>Studer<br>Others (l | l<br>wife<br>it |     |             |          |   |
| Brief Details   |  |        |                                   |           |      |                   |  |                       |                  |  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |
| B. For HUF, Associ natural persons,  Name  C. TYPE OF ACCO  | the na                                 | me & I |                                   |           |      |                   |  |                       |                  |  |               |                   | Firm,                |                  |       |                  |     |  |                 |     |             |          |   |
| FOR INDIVIDUAL  |  |        |                                   |           |      |                   |  |                       |                  | FOR  | NON-I         | NDIVID            | UAL                  |                  |       |                  |     |  |                 |     |             |          |   |
| Ordinary Residen Qualified Foreign I Margin Foreign National  |  | r      | NRI-F<br>NRI-N<br>Prome<br>Others | Non Foter | Repa | atriable          | )  |                       |                  |  | •             | orpora<br>d Forei |                      | estor            |       |                  |     | Fund<br>Speci                                      | [<br>[<br>fy)   |     | FII<br>Trus | t<br>——— |   |
| D. INCOME DETAIL  | .S (ple                                | ase s  | pecify                            | )         |      |                   |  |                       |                  |  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |
| Income Range per annum (please tick any one)  Below Rs. 1 Lac Rs. 25 - 50 Lac Rs. 50 - 1 Crore Rs. 5 Lac - 10 Lac Above Rs. 1 Crore Rs. 10 Lac - 25 Lac |  |        |                                   |           |      | anc               | i  | Network Amour As on ( | nt Rs.<br>(Date) | D<br>ould no   | D<br>t be ol  | M der th          | M<br>an 1            | Y                | ·)    | Υ                | Υ   | Υ  |                 |     | _           |          |   |
| E. In Case of NRIs/F  | oreig                                  | n Nati | ionals/                           | FIIs/     | Oth  | ers (a            | s may  | be ap                 | plic             | able)  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |
| RBI Approval<br>Reference Number<br>SEBI Registration   |  |        |                                   |           |      |                   |  |                       |                  |  | RBI .<br>Date | Approv            | 'al                  | D                | D     | N                | /   | M  | Υ               | 1   |             | /        | Υ |
| Number (For FIIs)   |  |        |                                   |           |      |                   |  |                       |                  |  |               |                   |                      |                  |       |                  |     |  |                 |     |             |          |   |

| F.   | BANK DE                  | TAILS  |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
|------|--------------------------|--|---------------|---------|----------|--------|---------|--------------------|-----------|----------|------------|---------|----------|-----------|----------|--------|-------|---------|---------|---------|
| 1.   | Bank Acc                 | ount Type  | ☐ S           | aving   | A/c      |        | Curre   | ent A/c            |           | Oth      | ner (Pl. S | Spec    | cify)    |           |          |        |       |         |         | -       |
| 2.   | Bank Acc                 | ount Number  |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 3.   | Bank Nar                 | ne   |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 4.   | Branch A                 | ddress   |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
|      |                          |  |               |         |          | _      |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
|      |                          |  | City/Tov      | vn/Vill | age      | $\bot$ |         |                    |           |          |            |         | Pin C    |           | $\perp$  |        |       |         |         |         |
|      |                          |  | State         |         |          |        |         |                    |           |          |            | _       | Coun     | try       |          |        |       |         | _       |         |
| 5.   | MICR Co                  | de   |               |         |          |        |         |                    |           | Ц        |            | $\perp$ |          |           |          |        |       |         |         |         |
| 6.   | IFSC                     |  |               |         |          |        | $\perp$ |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| G.   | authorize                | ck, if applicable, fed signatories/ Proustees/whole time | omoter/Pa     | rtners  | s/       |        |         |                    | •         | •        | sed Pers   | ,       | ,        | on (RF    | PEP)     |        |       |         |         |         |
| Н.   | CLEARIN                  | G MEMBER DET   | AILS (to b    | e fille | ed up l  | by Cl  | earir   | ng Me              | mbers     | only)    | )          |         |          |           |          |        |       |         |         |         |
| 1.   | Name of                  | Stock Exchange   |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 2.   | Name of                  | Clearing Corporati                                       | on/Clearin    | g Hou   | ise      |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 3.   | Clearing Member ID       |  |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 4.   | SEBI Registration Number |  |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 5.   | Trade Na                 | ıme  |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 6.   | CM-BP-I                  | D (to be filled up                                       | by Partici    | pant)   |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| I. : | STANDING                 | INSTRUCTION  | S             |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 1.   |                          | orise you to recei                                       |               |         |          |        |         | our ac             | count     |          |            | $\perp$ |          | /es       |          | No     | )     |         |         |         |
| 2.   | Account to               | be operated thro   | ough Powe     | er of A | ttorne   | y (Po  | A)      |                    |           |          |            |         | `        | /es       |          | No     | )     |         |         |         |
| 3.   | SMS Ale                  | rt facility: [Mai  | ndatory if yo | u are ( | giving P | ower ( | of Att  | orney (I           | PoA). Ens | sure tl  | hat the mo | bile    | number   | is pro    | vided i  | n the  | KYC   | C Appl  | icatio  | n Form] |
|      | Sr. No.                  | Holder   |               |         |          |        |         |                    |           |          |            |         |          |           | Ye       | es     |       | $\perp$ | 1       | No      |
|      | 1.                       | Sole / First Ho  | older         |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
|      | 2.                       | Second Holde   | er            |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
|      | 3.                       | Third Holder   |               |         |          |        |         |                    |           |          |            |         |          |           |          |        |       |         |         |         |
| 4.   | Mode of F<br>(Tick any   | leceiving Stateme<br>one)                                | nt of Accou   | ınt     |          | _      | •       | al Forn<br>nic For |           | l Note   | e 4 and en | sure    | that ema | ail ID is | s provic | led in | n KY( | C Appl  | licatio | n Form] |
| J.   | GUARDIAN                 | DETAILS (where   | sole holde    | er is a | minor    |        |         |                    | `         |          |            |         |          |           | ·        |        |       |         |         |         |
|      |                          | a minor, two KYC   |               |         |          | •      | illed   | i.e. one           | o for the | дцаг     | dian and   | and     | ther for | the n     | ninor (  | to h   | e sin | ined h  | טע מוו  | ardian) |
| ŀ    | ardian Na                | <u> </u>   |               | 911     |          | 201    |         |                    |           | J-41     |            |         |          |           |          |        |       | ,       | ., 54   |         |
| PA   | N                        |  |               |         |          |        |         |                    |           |          |            | Т       |          |           |          |        |       |         |         |         |
| Re   | lationship               | of Guardian with   | Minor         |         |          |        |         | <u> </u>           | 1         | <u> </u> |            |         |          |           |          |        |       |         |         |         |

| K         | . NOMINATIOI   | MOTION                                  |                    |                       |                       |                     |                      |                |
|-----------|--|---|--------------------|-----------------------|-----------------------|---------------------|----------------------|----------------|
|           |  |   | nination. [As per  | ŭ                     | -                     | all rights and lia  | bilities in respect  | of beneficiary |
|           |  |   | s held by me/us i  | -                     |                       | -                   |                      | -              |
| N         | IOMINATION D   | DETAILS                                 |                    |                       |                       |                     |                      |                |
| 1/        | We wish to make  | a nomination                            | n and do hereby n  | ominate the follow    | ving person(s) who    | o shall receive all | securities held in   | the Depository |
|           | <u></u>  |   | owner account in   | the event of my       | our death.            |                     |                      |                |
| No<br>thr | mination can be<br>ee nominees in t                            | made upto<br>the account                | Details of 1       | st Nominee            | Details of 2          | nd Nominee          | Details of 3         | ard Nominee    |
| 1.        | Name of the nor<br>Mr./Ms.)                                    | . ,                                     |                    |                       |                       |                     |                      |                |
| 2.        | Share of each<br>Nominee                                       | Equally [If not equally, please specify |                    | %                     |                       | %                   |                      | %              |
|           |  | percentage]                             | Any odd            | lot after division sh | all be transferred to | the first nominee m | entioned in the forn | 1.             |
| 3.        | Relationship wit<br>Applicant (if any                          |   |                    |                       |                       |                     |                      |                |
| 4.        | Address of Nom   | ninee(s)                                |                    |                       |                       |                     |                      |                |
|           |  |   |                    |                       |                       |                     |                      |                |
|           |  |   |                    |                       |                       |                     |                      |                |
|           |  |   |                    |                       |                       |                     |                      |                |
|           |  | PIN Code                                |                    |                       |                       |                     |                      |                |
| 5.        | Mobile/Telepho<br>of Nominee(s)                                |   |                    |                       |                       |                     |                      |                |
| 6.        | Email ID of no   | minee(s)                                |                    |                       |                       |                     |                      |                |
| 7.        | Nominee Identifica<br>[Please tick any o<br>and provide detail | ne of following                         |                    |                       |                       |                     |                      |                |
|           | Photograph &   | Signature<br>ADHAAR                     |                    |                       |                       |                     |                      |                |
|           | Saving Bank  |   |                    |                       |                       |                     |                      |                |
|           | Proof of Ident   |   |                    |                       |                       |                     |                      |                |
|           | Demat Accou  | int ID                                  |                    |                       |                       |                     |                      |                |
| Sr        | . Nos. 8-14 shoเ   | uld be filled o                         | only if nominee(s) | is a minor :          |                       |                     |                      |                |
| 8.        | Date of Birth (in  |   |                    |                       |                       |                     |                      |                |
| _         | minor nominee(s  | ,-                                      |                    |                       |                       |                     |                      |                |
| 9.        | Name of Guardia<br>{in case of minor                           |   |                    |                       |                       |                     |                      |                |
| 10.       | Address of Gu  | ardian(s)                               |                    |                       |                       |                     |                      |                |
|           |  |   |                    |                       |                       |                     |                      |                |
|           |  |   |                    |                       |                       |                     |                      |                |
|           | .  |   |                    | <u> </u>              |                       |                     |                      | <b>-</b>       |
|           |  | PIN Code                                |                    |                       |                       |                     |                      |                |

| 11.  | Mobile/Telephone No. of Guardian   |   |  |  |  |  |   |   |
|--|--|---|--|--|--|--|---|---|
| 12.  | Email ID of nominee(s)   | $\top$                                  |  |  |  |  |   |   |
| 13.  | Relationship of Guardian with nominee  |   |  |  |  |  |   |   |
| 14.  | Guardian Identification details [Please tick any one of followir and provide details of same]  Photograph & Signature PAN AADHAAR Saving Bank A/c No. Proof of Identity Demat Account ID | ng                                      |  |  |  |  |   |   |
|  |  |   | Signature of Witne   | ess for Nomination   |  |  |   |   |
|  | Name of the Witness  |   | Address of Witnes  | is   | Sign   | ature of Witn  | ess   |   |
|  |  |   |  | _  | Date D D   | M M  | YY  | YY  |
|  |  |   |  | RATION   |  |  |   |   |
| by n<br>such<br>I/we<br>misl<br>I/we<br>Obli | ne/us and I/we have unders<br>n accounts. I/we hereby dec<br>undertake to inform you of<br>eading or misrepresenting.<br>have complied and will con<br>gations of the Beneficial Ow      | tood<br>clare<br>any<br>I am,<br>ntinue | pository and Depository Participal the same and I/we agree to abide that the details furnished above changes therein, immediately. In I/we are aware that I/we may be to comply with FEMA regulation & Depository Participant".  a Board Resolution for Authoris | le by and to be bou<br>are true and corre<br>n case any of the a<br>held liable for it. In<br>ns. I/we acknowled | und by the rules a<br>ect to the best of<br>above information<br>case non-reside | as are in force<br>f my/our know<br>on is found to<br>ent account, | ce from time to<br>wledge and be<br>o be false or u<br>l/we also decl | time for<br>elief and<br>ntrue or<br>are that |
| Н  | older  |   | Name   |  |  | Signatur   | е   |   |
| (M   | le/First Holder / Guardian<br>r./Ms.) (in case of Minor) /<br>thorised Signatory   |   |  |  | <b>∠</b> _124  |  |   |   |
|  | cond Holder/<br>hthorised Signatory  |   |  |  |  |  |   |   |
| l  | ird Holder/  |   |  |  | C <b>⊕</b>   |  |   |   |

# Mode of Operation for Sole/First Holder (in case of joint holdings, all the holders must sign) Any one singly Jointly by As per resolution Others (Pl. Specify)

#### **Notes**

- 1. All communication shall be sent at the address of the Sole/First holder only.
- 2. In case of additional signatures, separate annexures should be attached to the application form.
- 3. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
- 4. Notes:

Instructions related to nomination, are as below:

- i. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
- ii. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
- iii. The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
- iv. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
- v. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
- vi. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
- vii. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
- viii. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
- ix. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
- x. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure D.
- xi. Savings bank account details shall only be considered if the account is maintained with the same participant.
- xii. DPID and client ID shall be provided where demat details is required to be provided.
- 5. For receiving Statement of Account in electronic form:
  - i. Client must ensure the confidentiality of the password of the email account.
  - ii. Client must promptly inform the Participant if the email address has changed.
  - iii. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
- 6. Strike off whichever is not applicable.

| INTRODUCTION (OPTIONAL FOR INDIVIDUAL / HUF)   |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
| (by an existing account holder/applicant's bank)   |  |  |  |  |  |  |  |  |
| DP-ID IN Client ID   |  |  |  |  |  |  |  |  |
| (In case of existing account holder.) I confirm the identity and address of the applicant(s) |  |  |  |  |  |  |  |  |
| Name :   |  |  |  |  |  |  |  |  |
| Address:   |  |  |  |  |  |  |  |  |
| :  | Signature of Introducer/Signature and Seal in case of Bank (To be verified by DP Official) |  |  |  |  |  |  |  |

# RIGHTS AND OBLIGATIONS OF BENEFICIAL OWNER AND DEPOSITORY PARTICIPANT AS PRESCRIBED BY SEBI & DEPOSITORIES

# **General Clause**

- 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.
- 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"
- 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.
- 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.
- 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,
  - Without prejudice to the provisions of any other law for the time being in force, any loss caused to the beneficial owner due to 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

 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 Byelaws, 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.

I/We acknowledge the receipt of copy of the "Rights and Obligations of the Beneficial Owner and Depository Participant". Signature of Account Holder(s)

# TERMS AND CONDITIONS FOR RECEIVING SMS ALERTS FROM NSDL

# SMS Alert facility for NSDL demat account holders

#### Introduction

NSDL has launched SMS Alert facility for demat account holders whereby investors can receive alerts for debits (transfers) to their demat accounts, credits for IPO and offer for sale allotment, sub-division and bonus. Alerts are also sent in case the instructions given by investors for debiting their demat accounts fail due to insufficient balance. Under this facility, investors can receive alerts, a day after such debits (transfers) take place or debit instruction failing as the case may be and on the same day when such credits take place. These alerts are sent to those account holders who have provided their mobile numbers to their Depository Participants (DPs). Alerts for debits are sent, if the debits (transfers) are up to five ISINs in a day. In case debits (transfers) are for more than five ISINs, alerts are sent with a message that debits for more than five ISINs have taken place and that the investor can check the details with the DP or on IDeAS website, if the investor is an IDeAS subscriber.

#### **Benefits**

- 1. Investors will get to know about debits and credits for IPO and offer for sale allotment, sub-division, bonus and failed debit instructions due to insufficient balance without having to call-up their DPs.
- 2. Investors need not wait for receiving Transaction Statements from DPs to know about such debits and credits.
- 3. In case of any discrepancy, the investor can approach its DP for clarification sooner.

# Charges

No charge is levied by NSDL on DPs for providing this facility to investors.

# Registration

This facility is available to investors who request for such a facility and provide their mobile numbers to the DPs. In case mobile numbers already given have changed, investors need to inform their DPs about the new numbers by way of written requests. Investors who have not yet provided their mobile numbers to their DPs can also avail this facility by intimating their mobile numbers to their DPs and submit a written request for this facility. This facility is not available to investors who have registered mobile numbers originating outside India. Thus, this facility will be available to the investors provided they have given their mobile numbers to their DPs and the DPs have captured the numbers in the computer system and have also enabled (ticked) the SMS flag in their system.

#### Contact

The investors may contact their respective DPs in case they do not receive SMS alert inspite of registering for this facility. Those investors who have provided their mobile numbers to their DPs but do not wish to avail this facility may also inform their DPs.

# For further details / information investors may contact us at :

Investor Relationship Cell

National Securities Depository Limited

4th Floor, A Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel, Mumbai 400 013.

Tel.: (022) 2499 4200 / 4090 4200 Fax: (022) 2497 6351

Email: relations@nsdl.co.in
Terms and Conditions

# 1.1Definition

In these Terms and Conditions, the following terms shall have the following meanings:

"Alerts" or "Facility" means the customized messages with respect to specific events/transactions relating to an Investor's Account sent as Short Messaging Service ("SMS") over mobile phone to the Investor;

"Investor" means the person who holds an Account;

"Account" means the demat account of the Investor with NSDL maintained through its Depository Participant;

"ISIN" means an International Securities Identification Number assigned to a security;

"CSP" means the cellular service provider through whom the Investor or NSDL receives the mobile services.

# 1.2 Availability

- 1.2.1 NSDL at its sole discretion may discontinue the Facility at any time by providing a prior intimation through its website or any other medium of communication. NSDL may at its discretion extend the Facility to investors who register mobile phones originating outside India.
- 1.2.2 The Alerts would be generated by NSDL and will be sent to the investors on the mobile number provided by the investor and the delivery of the Alert would be entirely based on the service availability of the service provider and connectivity with other cellular circles of the CSPs or in circles forming part of the roaming GSM network agreement between such CSPs. The Alerts are dependent on various factors including connectivity and, therefore, NSDL cannot assure final and timely delivery of the Alerts.
- 1.2.3 The investor will be responsible for the security and confidentiality of his/her Mobile Phone and mobile phone number to be used for this Facility.

#### 1.3 Process

- 1.3.1 This Facility provides Alerts to investors over mobile phones for the debits (transfers), credits for IPO and offer for sale allotment, subdivision and bonus that have taken place in their accounts. Alerts are also sent in case the instructions given by investors for debiting their demat accounts fail due to insufficient balance. Under this Facility, investors can receive Alerts, a day after such debits (transfers) take place or debit instruction failing as the case may be and on the same day when such credits take place. These Alerts will be sent to those investors who have requested for such a Facility and have provided their mobile numbers to their Depository Participants. Alerts will be sent for debits, if the debits (transfers) are up to five ISINs in a day. In case debits (transfers) are for more than five ISINs, Alerts will be sent with a message that debits for more than five ISINs have taken place and that the investor can check the details with the DP or on IDeAS website, if the investor is an IDeAS subscriber. Investors who have provided their mobile numbers to Depository Participants but do not wish to avail of this Facility may do so by informing their Depository Participants accordingly.
- 1.3.2 The investor is duty bound to acquaint himself/herself with the detailed process for using the Facility and interpreting the Alerts for which NSDL is not responsible for any error/omissions by the investor.
- 1.3.3 The investor acknowledges that the Alerts will be implemented in a phased manner and NSDL may at a later stage; as and when feasible, add more Alerts. NSDL may, at its discretion, from time to time change the features of any Alert. The investor will be solely responsible for keeping himself/herself updated of the available Alerts, which shall, on best-effort basis, be notified by NSDL through its website or any other medium of communication.

# 1.4 Receiving Alerts

- 1.4.1 The investor is solely responsible for intimating in writing to his/her Depository Participant any change in his/her mobile phone number and NSDL will not be liable for sending Alerts or other information over his/her mobile phone number recorded with NSDL.
- 1.4.2 The investor acknowledges that to receive Alerts, his/her mobile phone must be in an 'on' mode. If his/her mobile is kept 'off' for a specified period from the time of delivery of an Alert message by NSDL, that particular message may not be received by the investor.
- 1.4.3 The investor acknowledges that the Facility is dependent on the infrastructure, connectivity and services provided by the CSPs within India. The investor accepts that timeliness, accuracy and readability of Alerts sent by NSDL will depend on factors affecting the CSPs and other service providers. NSDL shall not be liable for non-delivery or delayed delivery of Alerts, error, loss or distortion in transmission of Alerts to the investor.
- 1.4.4 NSDL will endeavor to provide the Facility on a best effort basis and the investor shall not hold NSDL responsible/liable for non-availability of the Facility or non performance by any CSPs or other service providers or any loss or damage caused to the investor as a result of use of the Facility (including relying on the Alerts for his/her investment or business or any other purposes) for causes which are attributable to /and are beyond the control of NSDL. NSDL shall not be held liable in any manner to the investor in connection with the use of the Facility.
- 1.4.5 The investor accepts that each Alert may contain certain account information relating to the investor. The investor authorizes NSDL to send any other account related information, though not specifically requested, if NSDL deems that the same is relevant.

#### 1.5 Withdrawal or Termination

- 1.5.1 NSDL may, in its discretion, withdraw temporarily or terminate the Facility, either wholly or in part, at any time. NSDL may suspend temporarily the Facility at any time during which any maintenance work or repair is required to be carried out or incase of any emergency or for security reasons, which require the temporary suspension of the Facility.
- 1.5.2 Not withstanding the terms laid down in clause 1.5.1 above, either the investor or NSDL may, for any reason whatsoever, terminate this Facility at any time. In case the investor wishes to terminate this Facility, he/she will have to intimate his/her Depository Participant accordingly.

# 1.6 Fees

1.6.1 At present, NSDL is levying no charge for this Facility on the Depository Participants. The investor shall be liable for payment of airtime or other charges, which may be levied by the CSPs in connection with the receiving of the Alerts, as per the terms and conditions between the CSPs and investors, and NSDL is in no way concerned with the same.

# 1.7 Disclaimer

- 1.7.1 This Facility is only an Alert mechanism for the investors and is not in lieu of the Transaction Statements required to be provided by the Depository Participant to its clients.
- 1.7.2 NSDL shall not be concerned with any dispute that may arise between the investor and his/her CSP and makes no representation or gives no warranty with respect to the quality of the service provided by the CSP or guarantee for timely delivery or accuracy of the contents of each Alert.
- 1.7.3 The investor shall verify the transactions and the balances in his/her account from his/her Depository Participant and not rely solely on Alerts for any purpose.
- 1.7.4 NSDL will not be liable for any delay or inability of NSDL to send the Alert or for loss of any information in the Alerts in transmission.

#### 1.8 Liability

1.8.1 NSDL shall not be liable for any losses, claims and damages arising from negligence, fraud, collusion or violation of the terms herein on the part of the investor and/ or a third party.

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

# TERMS AND CONDITIONS FOR PROVIDING THE TRANSACTION AND HOLDING STATEMENT AND OTHER COMMUNICATIONS THROUGH INTERNET

| To,  Frontline Capital Services Ltd.  Regd. Office: M-6, M-Block Market, 2nd Floor,  Greater Kailash-II, New Delhi-110048 |  | Date : |
|---|--|--------|
| Dear Sirs,  |  |        |
| Sub: Request to pro   | ovide the Statements through e-mail and/or website |        |
| Client ID. :  | . E-mail ID  |        |

You are hereby requested to provide me/us transaction statement(s)/bills or any other document(s) required to be sent to me under my specific request or as per the statutory requirement(s) through e-mail and/or website. I/We am/are aware and understand the following:-

- 1. I/We am/are aware that I/we will not receive the transaction statements/bills etc in paper form.
- 2. I/We understand that website(s) would mean www.ndaindia.com and or any of it's pages/links/applets or any other website that FRONTLINE CAPITAL SERVICES LTD. may inform from time to time.
- 3. I/We will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the DP back office /email account.
- 4. I/We am/are aware that the transaction statement/bills etc. may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised.
- 5. I/We shall immediately inform FRONTLINE CAPITAL SERVICES LTD. about change in email address, if any.
- 6. I/we agree that till the time the change in email address is not updated in the records of FRONTLINE CAPITAL SERVICES LTD., the statements/bills etc. sent to the original email address shall deem to be a valid delivery and I/we shall keep FRONTLINE CAPITAL SERVICES LTD. and/or any of it's employees, directors, agents, associates indemnified against any loss suffered by them and also not hold them responsible for any loss suffered by me/us on this account.
- 7. I/We shall log off from website/DP back office/e-mail service, whenever I/we am/are not accessing or using the service. Any liability incurred to me/ us as a consequence of the not logging off the service shall be borne solely by me/us.
- 8. I/we agree that FRONTLINE CAPITAL SERVICES LTD. shall not take cognizance of out-of-office/out-of-station auto replies and I/we am/are deemed to have received above referred documents. Non-receipt of bounced mail notification by FRONTLINE CAPITAL SERVICES LTD. shall amount to delivery of the above-referred documents at the email id provided by me/us.
- 9. I/we agree that I/we shall immediately notify FRONTLINE CAPITAL SERVICES LTD. in writing with full details if I/we discover or suspect, unauthorized access through my/our DP back office password or Notice discrepancies that might be attributable to unauthorized access, Forget DP back office password or Discover a security flaw.
- 10. I/we understand that I/we am/are responsible for installing, operating and maintaining the communication equipment (including but not limited to personal computers and modems), software, tools, telephone or alternative service required at my/our end and connectivity required for using and accessing the website(s), back office, email account(s), any above referred documents or any other related services at my/our own cost
- 11. FRONTLINE CAPITAL SERVICES LTD. will not ( and shall not be under any obligation to ) assist me/us in operating, installing and / or maintaining any such communication equipment/infrastructure or obtaining any permits, clearances etc for establishing connectivity or linkages to the website(s) of the participant.
- 12. FRONTLINE CAPITAL SERVICES LTD.'s own records of the transactions/holdings/bills etc. mentioned through computer systems or otherwise shall be accepted as conclusive and binding on me/us for all purposes.
- 13. I/we understand and agree that the initial password sent by FRONTLINE CAPITAL SERVICES LTD. of DP back office should only be used for the first login. I/we agree to immediately reset my/our password(s) upon the first login. I/we understand and agree that if I/we do not change the password(s) after the first login, I/we shall keep the FRONTLINE CAPITAL SERVICES LTD. and/or any of it's employees, directors, agents, associates indemnified against any loss suffered by them and also not hold them responsible for any loss suffered by me/us on this account.
- 14. I/we understand and agree that the records of the FRONTLINE CAPITAL SERVICES LTD. with respect to delivery of above referred documents shall be conclusive evidence of any such documents delivered.
- 15. FRONTLINE CAPITAL SERVICES LTD. and I/we shall have the right to terminate such service provided a written notice is given at least 10 days in advance to the other party.
- 16. I/We shall approach FRONTLINE CAPITAL SERVICES LTD. within 24 hours from the delivery/display of the above data/documents etc. intimating any inability to access or download of the above data, document, data etc. failing which it shall be deemed to be the due delivery and acceptance of the data, document, data etc. sent to me/us via electronic mail/displayed by FRONTLINE CAPITAL SERVICES LTD./on the website of Frontline Capital Services Ltd. In all cases, FRONTLINE CAPITAL SERVICES LTD. reserves the right to determine the validity of my/our objection to the transaction.

| Thanking You Yours truly,      |                            |                           |
|--------------------------------|----------------------------|---------------------------|
| <b>€</b> 127                   |                            | C€                        |
| Signature of Sole/First Holder | Signature of Second Holder | Signature of Third Holder |

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# Frontline Capital Services Ltd.

Depository Participant: NSDL • SEBI Regn. No.: IN-DP-NSDL-56-98 • DP ID: IN 300564 Regd. Office: M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048

Corporate Office: B-22, Sector-4, Noida-201301

# Schedule of DP Charges w.e.f. 1st May 2016

| S.No. | Details of Services                                       |   | Charges   |  |
|-------|---|---|---|--|
| I.    | Statutory Charges   |   | Nil   |  |
| 2.    | Annual Maintenance Charges                                | Individual  | Corporate                                       |  |
|       | Every year ended 31st March of Part thereof Holding Value | Amount (Rs.)  | Amount (Rs.)                                    |  |
|       | Up to 25 Lac  | 500 P. A.   | 1500 P. A.                                      |  |
|       | >25 Lac to 50 Lac   | 750 P. A.   | 1500 P. A.                                      |  |
|       | >50 Lac to 100 Lac  | 1000 P. A.  | 1500 P. A.                                      |  |
|       | > 100 Lac to 5 Crore                                      | 2500 P. A.  | 2500 P. A.                                      |  |
|       | >5 Crore to 25 Crore                                      | 5000 P. A.  | 5000 P. A.                                      |  |
|       | >25 Crore to 100 Crore                                    | 10000 P. A.   | 10000 P. A.                                     |  |
|       | >100 Crore to 1000 Crore                                  | 25000 P. A.   | 25000 P. A.                                     |  |
|       | 1000 Crore and above                                      | 50000 P. A.   | 50000 P. A. + Rs. 25 per Crore above 1000 Crore |  |
| 3.    | POA Holders Market Sale (per entry)                       | 0.01% of the v  | alue of transaction (Min. Rs. 25/-              |  |
| 4.    | Non POA Holders Market Sale (per entry)                   | 0.01% of the value of transaction (Min. Rs. 60/-                      |   |  |
| 5.    | Off Market Transactions Delivery (per entry)              | 0.02% of the value of transaction (Min. Rs. 60/-                      |   |  |
| 6.    | Pledge (Creation/confirmation) (per entry)                | 0.02% of the value of transaction (Min. Rs. 100/-                     |   |  |
| 7.    | Pledge (Closure/invocation) (per entry)                   | 0.02% of the value of transaction (Min. Rs. 50/-                      |   |  |
| 8.    | Dematerialisation   | Rs. 50/- per certificate +Rs. 200/- per Demat Request                 |   |  |
| 9.    | Rematerialisation   | Rs. 60/- per certificate +Rs. 200/- per Request + NSDL Actual Charges |   |  |
| 10.   | Delivery Instruction Book                                 |   | Rs. 100/-                                       |  |
| 11.   | Late receipt of Instruction Slips                         | Rs. 100/-   |   |  |

#### Note:

- a. Value of Holding will be taken at 31st March of preceding year
- b. All charges referred above are subject to higher of actual or Rs. 500/- per financial year.
- c. All charges are subject to change at the sole discretion of Frontline Capital Services Ltd with prior notice of 30 days as per the clause 1 of DP Client Agreement
- d. In case of account closure, the annual charges will be refunded as per NSDL guidelines.
- e. Non-execution of delivery instruction due to any problem/error-courier charges Rs. 100/-per communication/dispatch.
- f. Modification in Client Master Rs. 50/- per instruction.
- g. Charges of Delivery instruction accepted at client's sole risk on or within 24 hours of execution.
- h. Non-periodic statement and other communication shall be charged @ Rs.20/- per page and postage charges @ Rs 50/- per mail.
- i. In Case of Demat Slip rejected, the rejection postage shall be charged @ Rs.100/-per Demat rejection.
- j. The Depositary Services are liable to discontinuation or closure of account if DP is unable to recover the charges from the client for any reason whatsoever, as per the Point 17 of DP Rights & Obligations Documents. There will be charge of Rs. 1000/-for resumption of services in such cases
- k. Services Charges, Taxes and other Government levies extra as applicable for time to time.

# Schedule of Trading Account Brokerage Charges w.e.f. 1st May 2016

| Segment                             | Brokerage Charges  |
|-------------------------------------|--------------------|
| Equity Delivery                     | 0.35%              |
| Equity Intraday                     | 0.03%              |
| Equity Future                       | 0.03%              |
| Index Options                       | Rs. 50/- Per Lot   |
| Stock Options                       | Rs. 80/- Per Lot   |
| Additional Charges - Equity Segment | 0.01% on Turnover  |
| Additional Charges - F&O Segment    | 0.005% on Turnover |
| Other Statutory Charges             | As Actual          |





# FOR OFFICE USE ONLY

|             | Name | Employee Code | Signature |
|-------------|------|---------------|-----------|
| Punched by  |      |               |           |
| Verified by |      |               |           |
| Rejected by |      |               |           |



# Frontline Capital Services Ltd.

CIN: U74899DL1995PLC064125

# **MEMBER**

NSE (Capital, F&O and Currency Derivative Segment)
SEBI Regn. No.: INB 230792430, INF 230792430, INE 230792430
BSE (Capital and F&O Segment), SEBI Regn. No.: INB 010792431, INF 010792431
Depository Participant: NSDL (DP ID - IN 300564), SEBI Regn. No.: IN-DP-NSDL-56-98

Regd. Office: M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048

Corporate Office: B-22, Sector-4, Noida, U.P.-201301
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Investor Grievances E-mail: Grievances@fcslindia.com, Website: www.fcslindia.com

