S. No.

FSBPL
FRONTLINE

REGISTRATION KIT

- INDIVIDUAL
- HUF
- CORPORATE
- PARTNERSHIP FIRM

Frontline Stock Brokers Pvt. Ltd.

Member : NSE & NSDL

Client Name : ____________________

Application No.: ____________________

Client Code : ____________________

Client ID : ____________________

Branch Name and Code : ____________________

Introducer RM Name : ____________________

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Frontline Stock Brokers Pvt. Ltd.

CIN : U74899DL1995PTC064125

MEMBER :
NSE (Capital Market Segment)
SEBI Regn. No.: INZ000179633

Depository Participant : NSDL
SEBI Regn. No.: IN-DP-651-2021 • 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
Phone : +91-120-4219355
E-mail : fcsl@fcslindia.com, Website : www.fcslindia.com
Investor Grievances E-mail : grievances@fcslindia.com

Compliance Officer
SAKSHI RAJPUT
Ph.: 0120-4219355
Email : fcsl@fcslindia.com

Director Detail
SHIKHA GUPTA
Ph.: 0120-4219355
Email : fcsl@fcslindia.com

For any grievance/dispute please contact **FRONTLINE STOCK BROKERS PVT. LTD.** at the above address or email id-grievances@fcslindia.com and Phone No. +91-120-4219355. 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, (NSDL) relations@nsdl.co.in and Phone No. +91-22-24994200.

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ANNEXURE - I

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 instruction/check list.	1-7
		B. FATCA & CRS Declaration	8-10
		C. Document captures the additional information about the constituent relevant to trading account and instruction/check list.	11-13
2.	Brokerage Structure	Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock/commodity exchange(s)	14
3.	Most Important Terms and Conditions	Most Important Terms and Conditions (MITC)	15
4.	Rights and Obligations	Document stating the Rights & Obligations of Stock Broker/ Commodity Broker/Depository Participant/Trading Member, Authorised Person and Client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	Given to Client by Mail
5.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities/ commodities market.	
6.	Guidance Note	Documents detailing do's and don'ts for trading on exchange, for the education of the investors.	
7.	Policies and Procedures	Document describing significant policies and procedure of the Stock Broker / Commodity Broker.	

VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER

S.No.	Name of the Document	Brief Significance of the Document	Page No.
1.	Authorisation for Electronic Communication	For authorising the trading member to send Electronic Contract Notes.	16
2.	Running Account Authorisation	Helps the client to enjoy exposures linked to the credit in the trading account.	17
3.	Letter of Authority	Authorisation for smooth functioning of Trading A/c	18

1.	NSDL Form	Where the client wishes to open a demat account with us as NSDL DP	19-29

Note : You may also download KYC form & other formats from our website www.fcslindia.com

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CLIENTS OPTION FOR RECEIVING DOCUMENTS

To,

EQUITY AND COMMODITY

Frontline Stock Brokers Pvt. Ltd.

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

Dated ____________________

Dear Sir/ Madam,

I hereby opt to get the document listed below in -

☐ Electronic Form ☐ Physical Form

1. Rights and Obligations of Stock Brokers, Authorised Person, Commodity Exchange and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
2. Risk Disclosure Document for Capital Market, Derivatives & Commodity Derivatives Segments.
3. Guidance Note - Do's and Don'ts for Trading on the Exchange(s) for Investors.
4. Policies and Procedures Document pursuant to the SEBI circular dated December 03, 2009.
5. Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI & Depositories.
6. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us. Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully,

First / Sole Holder Signature	Second Joint Holder Signature (only for DP account)	Third Joint Holder Signature (only for DP account)
1		

ACKNOWLEDGEMENT FROM CLIENT FOR RECEIPT OF PHYSICAL DOCUMENTS

To,

EQUITY AND COMMODITY

Frontline Stock Brokers Pvt. Ltd.

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

Dated ____________________

Dear Sir/ Madam,

I/We hereby acknowledge receipt of the following documents

1. Rights and Obligations of Stock Brokers, Authorised Person, Commodity Exchange and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
2. Risk Disclosure Document for Capital Market, Derivatives & Commodity Derivatives Segments.
3. Guidance Note - Do's and Don'ts for Trading on the Exchange(s) for Investors.
4. Policies and Procedures Document pursuant to the SEBI circular dated December 03, 2009.
5. Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI & Depositories.
6. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us. Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully,

First / Sole Holder Signature	Second Joint Holder Signature (only for DP account)	Third Joint Holder Signature (only for DP account)
2		

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM — MANDATORY

A. IMPORTANT POINTS:

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

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

1. Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
2. PAN card with photograph.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

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

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

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

D. Exemptions/clarifications to PAN

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

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

E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy /Consulate General in the country where the client resides are permitted to attest the documents.

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

Types of entity	Documentary Requirments
Corporate	• Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). • Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. • Photograph, POI, POA, PAN of individual promoters holding control-either directly or indirectly. • Copies of the Memorandum and Articles of Association and certificate of incorporation. • Copy of the Board Resolution for investment in securities market. • Authorised signatories list with specimen signatures.
Partnership Firm	• Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Certificate of registration (for registered partnership firms only). • Copy of partnership deed. • Authorised signatories list with specimen signatures. • Photograph, POI, POA, PAN of Partners.
Trust	• Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Certificate of registration (for registered trust only). • Copy of Trust deed. List of trustees certified by managing trustees/CA. • Photograph, POI, POA, PAN of Trustees.
HUF	• PAN of HUF. • Deed of declaration of HUF/ List of coparceners. • Bank pass-book/bank statement in the name of HUF. • Photograph, POI, POA, PAN of Karta.
Unincorporated association or a body of individuals	• Proof of Existence/Constitution document. • Resolution of the managing body & Power of Attorney granted to transact business on its behalf. • Authorized signatories list with specimen signatures.
Banks/Institutional Investors	• Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. • Authorized signatories list with specimen signatures.
Foreign Institutional Investors (FII)	• Copy of SEBI registration certificate. • Authorized signatories list with specimen signatures.
Army Government Bodies	• Self-certification on letterhead. • Authorized signatories list with specimen signatures.
Registered Society	• Copy of Registration Certificate under Societies Registration Act. • List of Managing Committee members. • Committee resolution for persons authorised to act as authorised signatories with specimen signatures. •T rue copy of Society Rules and Bye Laws certified by the Chairman/Secretary.

ADDITIONAL INSTRUCTIONS/ CHECK LIST FOR DERIVATIVES

1. Additional documents in case of trading in derivatives segments - illustrative list:
   - Copy of ITR Acknowledgement
   - Copy of Annual Accounts
   - In case of salary income - Salary Slip, Copy of Form 16
   - Net worth certificate
   - Copy of demat account holding statement.
   - Bank account statement for last 6 months
   - Any other relevant documents substantiating ownership of assets.
   - Self declaration with relevant supporting documents.

   * In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.
2. Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.
3. Demat master or recent holding statement issued by DP bearing name of the client.
4. **For Individuals**
   a. Stock broker has an option of doing ‘in-person’ verification through web camera at the branch office of the stock broker/sub-broker’s office.
   b. In case of non-resident clients, employees at the stock broker’s local office, overseas can do in-person’ verification. Further, considering the infeasibility of carrying out ‘In-person’ verification of the non-resident clients by the stock broker’s staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
5. **For Non-Individuals**
   a. Form need to be initialized by all the authorized signatories.
   b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.

CENTRAL KYC REGISTRY | 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.
6 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 [PoI]' 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.
3 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 91-9999999999).
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 [PoI] 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	State / U. T.	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 two - digit Country Code

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central 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
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		

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

Important Instructions:

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

CERSAI

For office use only
(To be filled by financial institution)

Application Type* ☐ New ☐ Update
KYC Number ______________ *(Mandatory for KYC update request)*
Account Type* ☐ Normal ☐ Minor ☐ Aadhaar OTP based E-KYC (in non-face to face mode)

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

	Prefix	First Name	Middle Name	Last Name
☐ Name* (Same as ID proof)				
Maiden Name (If any*)				
Father / Spouse Name*				
Mother Name*				

Date of Birth* D D – M M – Y Y Y Y

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

Marital Status* ☐ Married ☐ Unmarried ☐ Others

PAN* ______________ ☐ Form 60 furnished

Citizenship* ☐ IN- Indian ☐ Others (ISO 3166 Country Code ___)

Residential Status* ☐ Resident Individual ☐ Non Resident Indian ☐ Foreign National ☐ Person of Indian Origin

Occupation Type* ☐ S-Service (☐ Private Sector ☐ Public Sector ☐ Government Sector)
☐ O-Others (☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student)
☐ B-Business ☐ Agriculturist ☐ X- Not Categorised ☐ Forex Dealer
☐ Others (Pl. Specify)____

PHOTO

Sign Across the photograph

☐ 2. TICK IF APPLICABLE ☐ RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction **B** at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

Is entity a tax resident of any country other then India ☐ Yes ☐ No

If yes, please provide country/ies in which the entity is a resident for tax purpose & the associated tax id no. below.

ISO 3166 Country Code of Jurisdiction of Residence* ______

Tax Identification Number or equivalent (If issued by jurisdiction)* ______________

Place / City of Birth* ______________ ISO 3166 Country Code of Birth* ______

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

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

☐ A- Passport Number ______________
☐ B- Voter ID Card ______________
☐ C- Driving Licence ______________
☐ D- NREGA Job Card ______________
☐ E- National Population Register Letter ______________
☐ F- Proof of possession of Aadhaar XXXXXXXX ____

II. ☐ E- KYC Authentication XXXXXXXX ____

III. ☐ Offline verification of Aadhaar XXXXXXXX ____

Address

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

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

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

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

- ☐ A- Passport Number
- ☐ B- Voter ID Card
- ☐ C- Driving Licence
- ☐ D- NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F- Proof of possession of Aadhaar

II. ☐ E- KYC Authentication

III. ☐ Offline verification of Aadhaar

IV. ☐ Deemed Proof of Address - Document type Code

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

☐ 5. CONTACT DETAILS (All communications will be sent to Mobile number / Email-ID provided) (Please refer instruction **C** at the end)

Tel. (Off) – Tel. (Res) – Mobile –

Email ID

☐ 6. REMARKS (If any)

7. APPLICANT DECLARATION

- I hereby declare that the KYC details furnished by me are true and correct to the best of my knowledge and belief and I under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I hereby consent to receiving information from KRA/CERSAI (CKYC) through SMS/Email on the above registered number/Email address.
- I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

3 ✓

Signature / Thumb Impression of Applicant

Date : D D – M M – Y Y Y Y Place :

8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline Verification ☐ Digital KYC Process ☐ Equivalent e-document ☐ Video Based KYC ☐ Digilocker Verified

KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date D D M M Y Y Y Y	Name **FRONTLINE STOCK BROKERS PVT. LTD.**
Emp. Name	Code
Emp. Code	
Emp. Designation	
Emp. Branch	
[Employee Signature]	[Institution Stamp]

FSBPL FRONTLINE

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

Important Instructions:

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

CERSAI

For office use only
(To be filled by financial institution)

Application Type* ☐ New ☐ Update
KYC Number *(Mandatory for KYC update request)*

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

☐ Name*

Entity Constitution Type* Others (Specify) (Please refer instruction B a the end)

Date of Incorporation / Formation* D D – M M – Y Y Y Y   Date of Commencement of Business D D – M M – Y Y Y Y

Place of Incorporation / Formation*   Country of Incorporation / Formation*   TIN or Equivalent Issuing Country

PAN*   ☐ Form 60 furnished

TIN / GST Registration Number

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

☐ Officially void document(s) in respect of person authorised to transact
☐ Certificate of Incorporation / Formation   ☐ Registration Certificate Regn. Certificate No.
☐ Memorandum and Articles of Association   ☐ Partnership Deed   ☐ Trust Deed
☐ Resolution of Board / Managing Committee   ☐ Power or attorney granted to its manager, officers or employees to transact on its behalf
☐ Activity Proof - 1 (For Sole Proprietorship Only)   ☐ Activity Proof - 2 (For Sole Proprietorship Only)

☐ 3. ADDRESS* (Please refer instruction C at the end)

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

Proof of Address* ☐ Certificate of Incorporation / Formation ☐ Registration Certificate ☐ Other Document_________________________

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

3.1 Registered Office Address / Place of Business*

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

☐ 4. CONTACT DETAILS (All communication will be sent to Mobile number / E-mail ID provided may be used) (Please refer instruction D at the end)

Tel. (Off) –   FAX –
Mobile –   Email ID
Mobile –   Email ID

☐ 5. NUMBER OF RELATED PERSONS (Please refer instruction E at the end)

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☐ 6 REMARKS (If any)

7. APPLICANT DECLARATION (Please refer Instruction G at the end)

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

4 [Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

Date : D D – M M – Y Y Y Y   Place :

8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copy ☐ Equivalent e-document

KYC / IN-PERSON VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date D D M M Y Y Y Y Place	Name **FRONTLINE STOCK BROKERS PVT. LTD.**
Emp. Name	Code
Emp. Code	
Emp. Designation	
Emp. Branch	
[Employee Signature]	[Institution Stamp]

FSBPL FRONTLINE

Frontline Stock Brokers Pvt. Ltd.

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

Know Your Customer (KYC) Application Form | Non-Individual

Please fill this form in ENGLISH and in BLOCK LETTERS

A. IDENTITY DETAILS

1.	Name of the Applicant			
2.	Date of incorporation	D D M M Y Y Y Y	Place of incorporation	
3.	Date of commencement of Business	D D M M Y Y Y Y		
4.	a) PAN		b) Registration No. (e.g. CIN)	

5. Status (Please tick any one) :

- ☐ Private Limited Co.
- ☐ Bank
- ☐ Partnership
- ☐ Public Limited Co.
- ☐ Government Body
- ☐ FI
- ☐ Body Corporate
- ☐ Non Government Organization
- ☐ FII
- ☐ Trust
- ☐ Defense Establishment
- ☐ HUF
- ☐ Charities
- ☐ Society
- ☐ AOP
- ☐ NGO's
- ☐ LLP
- ☐ BOI
- ☐ Others (please specify)____________________

B. ADDRESS DETAILS

1.	Correspondence Address				
		City/Town/Village*		PIN/Post Code*	
		State/U.T. Code*		ISO 3166* Country Code	
2.	Specify the proof of address submitted for correspondence address				
3.	Contact Details	Tel. (Off.)		Tel. (Res.)	
		Fax No.		Mobile No.	
		Email ID			
4.	Registered Address *(If different from above)*				
		City/Town/Village*		PIN/Post Code*	
		State/U.T. Code*		ISO 3166* Country Code	
5.	Specify the proof of address submitted for registered address				

C. OTHER DETAILS

1. Gross Annual Income Details (please specify): Income Range per annum

☐ Below ₹ 1 Lac ☐ ₹ 1-5 Lac ☐ ₹ 5-10 Lac ☐ ₹ 10-25 Lacs ☐ ₹ 25 Lacs - 1 Crore ☐ Above ₹ 1 Crore

2. Networth

Amount (Rs.)____________________ As on (date) ☐☐ ☐☐ ☐☐☐☐

(*Net worth should not be older than 1 year)

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1. **Name, PAN, DIN/Aadhaar Number, residential address and photographs of Promoters/ Partners/ Karta/Trustees/Whole time directors.**
   (Please use the Annexure to fill in the details)
2. **Any other information :** ____________________

D. 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/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am / we are aware that I/we may be held liable for it.

Place : ____________________

Date : ____________________ **Name & Signature of the Authorised Signatory(ies)** 5 ____________________

E. ATTESTATION / FOR OFFICE USE ONLY

Document Received ☐ Certified Copies ☐ Verified with Originals

KYC & IN-PERSON VERIFICATION CARRIED OUT BY

Emp. Name / Code								
Emp. Designation								
Emp. Branch								
Emp. Signature								
Date								

INSTITUTION DETAILS

Name : **Frontline Stock Brokers Pvt. Ltd.**
Code :

Details of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Sr. No.	Name	Relationship with Applicant (i.e. promoters, whole time directors etc.)	PAN	Whether Politically Exposed	Residential / Registered Address	DIN of whole time directors / Aadhaar number of Promoters / Partners / Karta	Photograph
1.				☐ PEP ☐ RPEP ☐ NO		DIN : UID :	
2.				☐ PEP ☐ RPEP ☐ NO		DIN : UID :	
3.				☐ PEP ☐ RPEP ☐ NO		DIN : UID :	
4.				☐ PEP ☐ RPEP ☐ NO		DIN : UID :	
5.				☐ PEP ☐ RPEP ☐ NO		DIN : UID :	

PEP: Politically Exposed Person **RPEP:** Related to Politically Exposed Person

✓

Name & Signature of the Authorised Signatory(ies)

Date : ☐☐ ☐☐ ☐☐☐☐

FSBPL FRONTLINE

MANDATORY DOCUMENT

FATCA & CRS Declaration - Individual

Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance

PAN / PEKRN*				Constitute ☐ Individual ☐ NRI ☐ Foreign National ☐ Others________
Name				
Address Type *[for KYC address]*	☐ Residential ☐ Registered Office ☐ Business	Nationality	☐ Indian ☐ US ☐ Others *(please specify)*	
Place of Birth		Country of Birth		
Gross Annual Income Details in INR Net Worth in INR. In Lacs & Date *[Optional]*	☐ Below 1 Lakh ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs - 1 Cr ☐ > 1 Crore ____________ dd-mm-yyyy	Occupation Details [Please tick any one (✓)]	☐ Business ☐ Professional ☐ Public Sector ☐ Private Sector ☐ Government Service ☐ Agriculturist ☐ Housewife ☐ Student ☐ Retired ☐ Forex Dealer ☐ Others [Please specify]____________	
Politically Exposed Person [PEP]	☐ Yes ☐ Related to PEP ☐ Not Applicable	Any Other Information *[if applicable]*	*(please specify)*	

Are you a tax resident of any country other than India - ☐ Yes ☐ No

If Yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

S.No.	Country#	Tax Identification Number%	Identification Type *(TIN or other, please specify)*
1.			
2.			
3.			

To also include USA, where the individual is a citizen / green card holder of the USA

% In case Tax Identification Number is not available, kindly provide its functional equivalent $

CERTIFICATION

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

FATCA & CRS - TERMS & CONDITIONS

Details under FATCA & CRS : The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account of any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e. within 30 days.

It is important that you respond to our request, even if you believe you have already supplied any previously requested information.

Date : ☐☐☐☐☐☐☐☐

Place : ________

6 ✓

Signature

FSBPL FRONTLINE

Frontline Stock Brokers Pvt. Ltd.

FATCA & CRS Declaration - Non Individual

PAN ____ Trading Code ____ DP Code ____

Name ____

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India ☐ Yes ☐ No

(If yes, please provide country/ies 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)
1.			
2.			
3.			

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)

1.	We are a, Financial institution (Refer 1 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 GIIN above and indicate your sponsor's name below Name of sponsoring entity ____
	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 1 A of Part C)

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)	Yes ☐ *(If yes, please specify any one stock exchange on which the stock is regularly traded)* Name of stock exchange ____
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 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 ____
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

☐ Others (please specify ____)

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

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)

FSBPL FRONTLINE

MANDATORY DOCUMENT

Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3(iv) (A) of Part C)			
Country of Tax residency*			
PAN #			
Address	Zip ☐ State: Country:	Zip ☐ State: Country:	Zip ☐ State: Country:
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 (%) $			

* To include US, where controlling person is a US citizen or green card holder

\# If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.

% In case Tax Identification Number is not available, kindly provide functional equivalent

$ Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary

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 Stock Brokers Pvt. Ltd. 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).

Name	
Designation	

Client Signature 7 ✓

Date : D D M M Y Y Y Y

Place :

For Investor convenience, Frontline Stock Brokers Pvt. Ltd. collecting this mandatory information for updating across all Group Companies of Frontline Stock Brokers Pvt. 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 Stock Brokers Pvt. Ltd. branch or you can dispatch the hard copy to-

Frontline Stock Brokers Pvt. Ltd.
Regd. Office : M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048

• For Detail Terms & Conditions please visit www.fcslindia.com

FSBPL FRONTLINE

ANNEXURE - 3

TRADING ACCOUNT RELATED DETAILS FOR INDIVIDUAL & NON-INDIVIDUAL

A. BANK ACCOUNT(S) DETAILS (Through which transactions shall generally be routed)

Bank Name	Branch Address	Account Number	Account Type	MICR Number	IFSC Code
			☐ Saving ☐ Current ☐ Others - in case of NRI / NRE / NRO		

B. DEPOSITORY ACCOUNT(S) DETAILS (Through which transactions shall generally be routed)

Depository Participant Name	Name of Depository	Beneficiary Name	DP ID	Beneficiary ID (BO ID)
	☐ NSDL ☐ CDSL			
	☐ NSDL ☐ CDSL			
	☐ NSDL ☐ CDSL			

C. TRADING PREFERENCES

*Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you.

Exchange	**NSE**
Segment	**Cash**
	8a ✓

If you do not wish to trade in any of segments / Mutual Fund, please mention here ____________________

D. OTHER DETAILS

☐ Gross Annual Income Details (please specify) : ☐ Below ₹ 1 Lac ☐ ₹ 1 Lac to 5 Lac ☐ ₹ 5 Lac to 10 Lac ☐ ₹ 10 Lac to 25 Lac ☐ ₹ 25 Lac to 1 Crore ☐ > ₹ 1 Crore

☐ Net Worth (Net worth should not be older than 1 year) Amount Rs.. as on (date) D D M M Y Y Y Y (Compulsory for Non-Individuals)

☐ Occupation (please tick any one and give brief details) : ☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Others__________Please Specify

☐ Please tick, if applicable (Note : In case of Non-individuals please tick, if applicable for any of your authorised signatories/ Promoters/Partners/Karta/Trustees/whole time directors) :

☐ Politically Exposed Person (PEP) ☐ Related to Politically Exposed Person (RPEP)
☐ Not a Politically Exposed Person (PEP) ☐ Not Related to Politically Exposed Person (RPEP)

☐ Any other information : ....

E. DEALING THROUGH AUTHORISED PERSON AND OTHER STOCK BROKERS

If client is dealing through the Authorised Person, provide the following details :

Name of the Authorised Person :..

Authorised Person SEBI Regn. No. :..

Authorised Person's Address :..

Authorised Person's Phone/Fax No. :..

Authorised Person's Website :..

Whether dealing with any other stock broker / Authorised Person (In case dealing with multiple stock brokers / Authorised Person, please provide details of all)

Name of the stock broker :..

Name of Authorised Person (If any) :..

Client Code (UCC) :..

Exchange :..

Details of disputes / dues pending from / to such stock broker / Authorised Person (Please Specify)

F. PAST ACTIONS

Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years :

....

....

G. ADDITIONAL DETAILS

Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify) :

....

Specify your Email id, if applicable : ....

Whether you wish to avail of the facility of internet trading/ wireless technology (please specify) :

....

Number of years of Investment/Trading Experience : ☐ 0 ☐ 1-3 ☐ 3-5 ☐ 5-10 ☐ >10

H. GST DETAILS (As applicable, Statewise)

Legal Name			
Trade Name			
GSTIN		Registration Date	
Name of the State		State Code	
Other State GSTIN		Registration Date	
Name of the State		State Code	

FSBPL FRONTLINE

I. INTRODUCER DETAILS

Name of the Introducer :...
(Surname) (Name) (Middle Name)

Status of the Introducer : ☐ Sub Broker ☐ Remisier ☐ Auth. Person ☐ Existing Client ☐ Others________________

Address and Ph. No. of the Introducer :...

....Sign. of the Introducer..

Sub-broker's Name : ....

SEBI Registration number : ....

DECLARATION

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website www.fcslindia.com

Place ________________

Date ________________

9 ✓ ____________________________________
Signature of Client

FOR OFFICE USE ONLY UCC Code allotted to the Client

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

FSBPL FRONTLINE

MANDATORY DOCUMENT

DISCLOSURE OF PROPRIETARY TRADING BY FRONTLINE STOCK BROKERS PVT. LTD.

Dear Client,

In term of SEBI circular No. SEBI/MRD/SEC/Cir-42/2003 dated 19th November, 2003, member is required to disclose to its client about the proprietary trades.

In view of this circular, we wish to inform you that, we do proprietary trades in the Cash, F&O, Currency and Commodity Derivatives Segment of NSE

Kindly take note of the above & oblige.

⑩ ______________________

Sole / First Applicant Signature

Date : ______________________

PMLA - DECLARATION

I______________________________having the trading code no.________________with FSBPL confirm and declare that I have read and understood the contents and the provisions of the PMLA Act, 2002 and it was also explained by FSBPL official. I further declare that I shall adhere to the rules and regulations and requirements mentioned in the PMLA Act, 2002.

⑪ ______________________

Sole / First Applicant Signature

Risk Category : ☐ Low ☐ Medium ☐ High

BROKERAGE STRUCTURE

I/We are dealing through you as a client in Capital Market Segment and/or Mutual Fund Segment & in order to facilitate ease of operations and upfront requirement of margin for trade.

Equity Intraday	0.03% of the value of transaction.
Equity Delivery	0.35% of the value of transaction.

Disclaimer : Clients who opt to receive physical contract notes will be charged Rs. 20/- per contract plus courier charges. In addition to the brokerage charges the following charges will also be levied.

1. Exchange transaction charges.
2. Clearing charges.
3. Securities Transaction Tax.
4. Goods & Service Tax.
5. SEBI Turnover Fees.
6. Stamp Duty : State-wise stamp duty as applicable will be levied

Note : Brokerage will not exceed the rates specified by SEBI and the Exchanges. All Statutory and Regulatory charges will be levied as per exchange, SEBI and depository circulars published from time to time.

Details explanation of all charges is available online at : www.fcslindia.com

⑫ ______________________

Signature of Client

FSBPL FRONTLINE

MOST IMPORTANT TERMS AND CONDITIONS (MITC)

(For non-custodial settled trading accounts)

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

13 ✓ ______________________

Clients Signature

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VOLUNTARY DOCUMENT

ELECTRONIC CONTRACT NOTE (ECN) DECLARATION Appendix-A

To,

Frontline Stock Brokers Pvt. Ltd.

Member : NSE

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

Date ________________

Dear Sir,

I/We ______________________________ a client with member M/S. **FRONTLINE STOCK BROKERS PVT. LTD.** of **NSE** Exchange undertakes as follows:

- I/We am/are aware that the member has to provide physical contract note in respect of all the trades placed by me/us unless I/We myself want the same in the electronic form.
- I/We am/are aware that the member has to provide electronic contract note for my/our convenience on my/our request only.
- Though the member is required to deliver physical contract note, I/We find that it is inconvenient for me/us to receive physical contract notes. Therefore , I/We am/are voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out/ ordered by me/us.
- I/We have access to a computer and am/are a regular internet user, having sufficient knowledge of handling the email operation.
- My/our email id is* ____.
  This has been created by me/us and not by someone else.
- I/We am/are aware that this declaration form should be in English or in any other Indian language known to me/us.
- I/We am/are aware that non-receipt of bounced mail notification by the member shall amount to delivery of the contract note at the above e-mail ID.

The above declaration and the guidelines on ECN given in the Annexure have been read and understood by me/us. I/We am/are aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same.

*(The email id must be written in own handwriting of the client)

14 ______________________________
Client Signature

Client Name: ______________________________

Unique Client Code : ______________________________

PAN: ______________________________

Address : ______________________________

VOLUNTARY DOCUMENT

FSBPL FRONTLINE

RUNNING ACCOUNT AUTHORISATION

To,

Frontline Stock Brokers Pvt. Ltd.

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

Date : ____________________

Sub : Running Account Authorisation

Dear Sir,

I/We are dealing through you as a client in Capital Market Segment in order to facilitate ease of operations and upfront requirement of margin for trade.

I/We authorize you as under:

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) of any segment(s) of any or all the Exchange(s)/Clearing Corporation unless I/We instruct you otherwise.
2. I/We request you to settlement of my fund ☐ Monthly ☐ Quarterly
3. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite funds towards such obligations and may also retain the fund expected to be required to meet margin obligations as per the regulation, calculated in the manner specified by the exchange from time to time.
4. I/We confirm you that I will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 30 working days from the date of receipt of funds or securities or statement of account or statement related to it, as the case may be at your registered office.
5. Notwithstanding anything contained anywhere in the above authorization signed by me/us, this Running Account Authorisation shall not be applicable in case of any purchases of securities in cash segment or in F&O segment (under physical settlement) and Pledged to Client Unpaid Securities Pledgee Account (CUSPA). The securities pledged in the CUSPA shall be settled as per the rules, regulations & guidelines of the exchanges/SEBI. I/We further agree that the funds shall be returned to me/us if I/we have not done any transaction in the 30 calendar days since the last transaction within three working days irrespective of the date when the running account was previously settled or within the period as may be specified by SEBI/Exchanges from time to time.
6. I/We confirms you that I can revoked the above mentioned authority at any time by sending signed physical letter of revocation through post/courier at your above mentioned address.
7. The running account authorization would continue until it is revoked by me.

Thanking You.

Yours faithfully,

15 ✓ ____________________

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LETTER OF AUTHORITY

To,

Frontline Stock Brokers Pvt. Ltd.

Date : ____________

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

Sub : Letter of Authority

I/We am/are dealing in shares/securities/commodities with you in various exchange segments and in order to facilitate ease of operations. We authorize you as under :

1. **Delivery of order/trade confirmation/cancellation :**

   I/We hereby authorize 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 and confirmation issued by you.

2. **Telephonic Conversation :**

   I/We request you to consider my/our telephonic instructions for order placing/order modification/order cancellation as a written instruction and give us all the confirmation on telephone unless instructed otherwise in writing. I/We am/are getting required details from contracts issued by you.

3. **Set off of outstanding:**

   I/We authorize 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 and / or against the value of cash margin or collateral shares provided to you by me / us. I further authorise you to debit the financial charges @ 18% per annum of the outstanding debit balance, if any, in my account and not settled as per the exchange requirement.

4. **Pledge Authorisation :**

   I/We hereby authorise you to pledge/deposit my/our securities whether deposited as collateral/margin or permitted by us to be retained in the running account etc. by you with any person(s)including but not limited to anyone or more bank(s) and/or stock exchange(s) and/or clearing corporation(s) /clearing house(s) or any other person. You may at your absolute discretion raise funds, obtain bank guarantee(s) and FDRs etc, against such deposit' pledge. I/ we authorise you to do in my/our name and on my/our behalf all such acts, deeds and things as may be necessary and expedient for placing pledging / depositing my/our securities with a person of your choice. If for any reason the pledgee sells I liquidates these securities Uwe shall not dispute or contest the acts of pledgee in any manner what so ever. Please treat this authorization as written ratification of my /our verbal directions/authorizations given and carried out by you earlier. I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my / our directions given above.

5. **Charges & Balance Maintenance :**

   I/We have a Trading As well as depository relationship with Frontline Stock Brokers Pvt. Ltd. Please debit the charges relevant with depository services from my/our trading account on monthly basis. I/We also agree to maintain the adequate balance in my/our trading account / pay adequate advance fee for the said reason.

6. **Authority for intimation**

   I/ we shall authorise you to send SMS and email to registered email/ mobile no. in respect of my Trading and Demat account.

For and On Behalf of Constituent

Thanking you,

Yours faithfully

16 ✓____________________

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NSDL

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FRONTLINE STOCK BROKERS PRIVATE LIMITED

Regd. Office : M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Delhi-110048
Corporate Office : B-22, Sector-4, Noida-201301, Ph.: +91-120-4219355, 4547842
E-mail : fcsl@fcslindia.com, Website : www.fcslindia.com

Depository Participant : NSDL
DP ID : IN300564
DP SEBI Regn. No.: IN-DP-651-2021

ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT - INDIVIDUAL & NON-INDIVIDUAL NSDL

(To be filled by the Depository Participant)

Client ID								Date	D	D	M	M	Y	Y	Y	Y

I/We request you to open a depository account in my/our name as per following details :
(Please fill all the details in CAPITAL/BLOCK LETTERS only)

A. DETAILS OF ACCOUNT HOLDER(S)

Account Holder(s)	Sole/First Holder	Second Holder	Third Holder
Name			
UCC		Exchange : National Stock Exchange of India Ltd. (90360) Bombay Stock Exchange Ltd. (6865)	
PAN			
Occupation (Please tick any one and give brief details)	☐ Private Sector ☐ Agriculturist ☐ Public Sector ☐ Retired ☐ Govt. Service ☐ Housewife ☐ Business ☐ Student ☐ Professional ☐ Others (Pl. Specify)	☐ Private Sector ☐ Agriculturist ☐ Public Sector ☐ Retired ☐ Govt. Service ☐ Housewife ☐ Business ☐ Student ☐ Professional ☐ Others (Pl. Specify)	☐ Private Sector ☐ Agriculturist ☐ Public Sector ☐ Retired ☐ Govt. Service ☐ Housewife ☐ Business ☐ Student ☐ Professional ☐ Others (Pl. Specify)
Brief Details			

B. TYPE OF ACCOUNT

☐ Ordinary Resident ☐ NRI-Repatriable ☐ Margin ☐ Promoter
☐ Qualified Foreign Investor ☐ NRI-Non Repatriable ☐ Foreign National ☐ Others (Specify)____________

☐ Body Corporate ☐ FI ☐ FII ☐ Bank ☐ CM
☐ Qualified Foreign Investor ☐ Mutual Fund ☐ Trust ☐ HUF ☐ Others (Pl. Specify)................................

C. For Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., although the account is opened in the name of the partner(s) trustee(es) etc., the name & PAN of the Partnership Firm, Unregistered Trust, Association of Persons (AOP), etc., should be mentioned below :

Name		PAN										

D. INCOME DETAILS (please specify)

Income Range per annum (please tick any one)	and	Networth Amount Rs. __________
☐ Below ₹ 20 Lac ☐ ₹ 50 Lac - 1 Crore ☐ ₹ 20 - 50 Lac ☐ Above ₹ 1 Crore		As on (Date) D D M M Y Y Y Y (Networth should not be older than 1 year)

E. In Case of NRIs/Foreign Nationals/FIIs/Others (as may be applicable)

RBI Approval Reference Number		RBI Approval Date	D	D	M	M	Y	Y	Y	Y

F. BANK DETAILS

1.	Bank Account Type	☐ Saving A/c ☐ Current A/c ☐ Other (Pl. Specify)________________
2.	Bank Account Number	
3.	Bank Name	
4.	Branch Address	
		City/Town/Village | | Pin Code
		State | | Country
5.	MICR Code	
6.	IFSC	

G.	Please tick, if applicable :	☐ Politically Exposed Person (PEP)	☐ Related to Politically Exposed Person (RPEP)
		☐ Not Politically Exposed Person (NPEP)	☐ Not Related to Politically Exposed Person (NRPEP)

H. CLEARING MEMBER DETAILS (to be filled up by Clearing Members only)

1.	Name of Stock Exchange	
2.	Name of Clearing Corporation/Clearing House	
3.	Clearing Member ID	
4.	SEBI Registration Number	
5.	Trade Name	
6.	CM-BP-ID (to be filled up by Participant)	

H. STANDING INSTRUCTIONS

1.	I/We authorise you to receive credits automatically into my/our account	☐ Yes ☐ No
2.	Account to be operated through Power of Attorney (PoA)	☐ Yes ☐ No
3.	Account to be operated through Demat Debit and Pledge Instruction (DDPI)	☐ Yes ☐ No
4.	**SMS Alert facility :** ***[Mandatory if you are giving Power of Attorney (PoA). Ensure that the mobile number is provided in the KYC Application Form]***	

Sr. No.	Holder	Yes	No
1.	Sole / First Holder	☐	☐
2.	Second Holder	☐	☐
3.	Third Holder	☐	☐

5.	Mode of Receiving Statement of Account (Tick any one)	☐ Physical Form ☐ Electronic Form (Read Note 4 and ensure that email ID is provided in KYC Application Form)
6.	For Joint Accounts communication to be sent to (See note 5)	☐ First Holder ☐ All Joint Account Holder

I. GUARDIAN DETAILS *(where sole holder is a minor)* :

[For account of a minor, two KYC Application Forms must be filled i.e. one for the guardian and another for the minor *(to be signed by guardian)*]

Guardian Name	
PAN	
Relationship of Guardian with Minor	

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J. NOMINATION OPTION

☐ I/We wish to make a nomination
(Details are provided in
Nomination Form Prescribed by SEBI)

☐ I/We wish to opt out a nomination
(Details are provided in
Nomination Form Prescribed by SEBI)

K. MODE OF OPERATIONS FOR JOINT ACCOUNTS

☐ Jointly ☐ Anyone of the holder or survivor(s)

If Mode of operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations such as transfer of securities including Inter-Depository Transfer, Pledge / hypothecation / margin pledge / margin re-pledge (creation, closure and invocation and confirmation thereof as applicable) of securities and freeze/unfreeze of account and/or securities and/or specific number of securities will be permitted.

DIS BOOKLET :

☐ **Option 1:**
I/We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening of my / our NSDL account though registered for DDPI for executing delivery instructions for settling stock exchange trades.

☐ **Option 2:**
I/We do not require the Delivery Instruction Slip (DIS) booklet for the time being, since. /We have issued a DDPI in favour of Frontline Stock Brokers Pvt. Ltd. for executing the delivery instructions for settling stock exchange trades [settlement related transactions] effected through DDPI. However, the Delivery Instruction Slip (DIS) booklet should be issued to me/us immediately on my / our request at any later date.

DECLARATION

The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/we hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/ we are aware that I/we may be held liable for it. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations. I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

SIGNATURE'S OF HOLDER / DIRECTOR / AUTHORISED SIGNATORIES (Enclosed a Board Resolution for Authorised Signatories)

Holder	Name	Designation	Signature(s)
Sole / First Holder / All Joint Account Holder / Authorised Signatory			17 ✓
Other Holders			
Second Holder			
Third Holder			

(Signatures should be preferably in blue ink) **(In case of more authorised signatories, please add annexure)**

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ANNEXURE-A

(SEBI/HO/OIAE/OIAE_IAD-3/P/ON/2025/01650, dated January 10, 2025)

NOMINATION FORM FOR DEMAT ACCOUNTS AND MUTUAL FUND (MF) FOLIOS

I/We hereby nominate the following persons(s) who shall receive all the assets held in my/our account /folio in the event of my/our demise, as trustee and on behalf of my/our legal heir(s)*

NOMINATION DETAILS

	Mandatory Details						**Additional Details**	
	Name of Nominee	Share of Nominee (%)**	Relation-ship	Postal Address	Mobile No. & E-mail	Identity Number	D.O.B. of Nominee	Guardian
Nominee 1								
Nominee 2								
Nominee 3								
Nominee 4								
Nominee 5								
Nominee 6								
Nominee 7								
Nominee 8								

*Joint Accounts :

Event	Transmission of Account / Folio No.
Demise of one or more joint holder(s)	Surviving holder(s) through name deletion The surviving holder(s) shall inherit the assets as owners
Demise of all joint holders simultaneously - having nominee	Nominee
Demise of all joint holders simultaneously - not having nominee	Legal heir(s) of the youngest holder

** If % is not specified, then the assets shall be distributed equally amongst all the nominees. Any odd lot after division / fraction of %, shall be transferred to the first nominee mentioned in the nomination form. (see table in 'Transmission aspects').

*** Provide only number: PAN or Driving Licence or Aadhaar (last 4). Copy of the document is not required. However, in case of NRI / OCI / PIO, Passport number is acceptable.

**** to be furnished only in following conditions / circumstances:

- Date of Birth (DoB): please provide, only if the nominee is minor.
- Guardian: It is optional for you to provide, if the nominee is minor.

(1) I/We want the details of my/our nominee to be printed in the statement of holding or statement of account, provided to me/us by the AMC/ DP as following : (please tick, as appropriate).

☐ Name of Nominee(s) ☐ Nomination : Yes / No.

(2) I hereby authorize______________________________(nominee number____________________) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5 of the circular. He/She is authorized to encash my assets up to_______% of assets in the account/folio or Rs._________________________ (Optional)

(strike off portions that are not relevant)

(3) This nomination shall supersede any prior nomination made by me/us, if any.

(4) Signature(s) - As per the mode of holding in demat account(s) / MF folio (s)

Name(s) of Holder(s)		Signature of Holder/ thumb impression	Signature of two witnesses*	Name of Witness & Address (wherever applicable)*
Sole / First Holder (Mr./Ms.)		18		
Second Holder (Mr./Ms.)				
Third Holder (Mr./Ms.)				

* Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

Rights, Entitlement and Obligation of the investor and nominee :

- If you are opening a new demat account / MF folios, you have to provide nomination. Otherwise, you have to follow procedure as per 3.10 of this circular.
- You can make nomination or change nominee any number of times without any restriction.
- You are entitiled to receive acknowledgement from the AMC / DP for each instance of providing or changing nomination.
- Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominees or for each nominee(s) to open separate single account / folio.
- In case all your nominees do not claim the assets from the AMC / DP, then the residual unclaimed asset shall continue to be with the AMC in case of MF units and with the concerned Depository in case of Demat account.
- You have the option to designate any one of your nominees to operate your account / folio, in case of your physical incapacitation, at any point of time and not just during opening of account / folio. This mandate can be changed any time you choose.
- The signatories for this nomination form shall be as per mode of holding in the folio(s) / demat account(s) i.e.
  - 'Either or Survivor' Folios / Accounts - any one of the holder can sign
  - 'First holder' Folios / Accounts - only First holder can sign
  - 'Jointly' Folios / Accounts - all holders have to sign

Transmission Aspects

- AMCs / DPs shall transmit the folio / account to the nominee(s) upon receipt of 1) copy of death certificate and 2) completion / updation of KYC of the nominee(s). The nomimee is not required to provide affidavits, indemnitites, undertakings, attestations or notarization.
- In case of a joint account / folio, for transmission to the surviving joint holder(s) by name deletion, the surviving joint holder(s) shall have the option to update residential address(es), mobile number(s), email address(es), bank account detail(s), annual income and nominee(s), either along with transmission or at a later date. The regulated entity cannot seek KYC documents at the time of transmission, unless it was sought earlier but not provided by the holder.
- Nominee(s) shall extend all possible co-operation to transfer the assets to the legal heir(s) of the deceased investor. In this regard, no dispute shall lie against the AMC / DP.
- In case of multiple nomineees, the assets shall be distributed pro-rata to the surviving nominees, as illustrated below.

% share as specified by investor at the time of nomination		% assets to be apportioned to surviving nominees upon demise of investor and nominee 'A'			
Nominee	**% Share**	**Nominee**	**% initial share**	**% of A's share to be apportioned**	**Total % Share**
A	60%	A	0	0	0
B	30%	B	30%	45%	75%
C	10%	C	10%	15%	25%
Total	**100%**	-	**40%**	**60%**	**100%**

DECLARATION FOR OPTING OUT OF NOMINATION

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our MF Folio/ demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our MF Folio / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the MF Folio / demat account.

NAME AND SIGNATURE OF HOLDER(S)*

	First / Sole Holder	Second Holder	Third Holder
Name			
Sign. of Holder	19		

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

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Notes:

1. 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.
2. 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.
3. 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.
4. In case of joint account, on death of any of the joint account holders, the surviving account holder(s) has to inform Participant about the death of account holder(s) with required documents within one year of the date of demise.
5. In case if 'first holder' is selected, the communication will be sent as per the preference mentioned at Sr. No. 4. In case 'All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned at Sr. No. 4 and communication to other holders will be in electronic mode. The default option will be communication to 'first holder', if no option selected.
6. 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.
7. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
8. 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.
9. 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).
10. 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.
11. 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.
12. 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.
13. Savings bank account details shall only be considered if the account is maintained with the same participant.
14. DP ID and client ID shall be provided where demat details is required to be provided.
15. All communication shall be sent at the address of the Sole/First holder only.
16. 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.
17. 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.
18. Strike off whichever is not applicable.

STATEMENT OF ACCOUNT RECEIVING IN ELECTRONIC MODE

To,

Frontline Stock Brokers Pvt. Ltd.

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

Dated ________________________

Re: Beneficial Owner(BO) Account No.__________________________

I/We____[name(s) of the BO(s)] had entered into DP BO agreement with you. I/we confirm having opted to receive the statement of accounts pertaining to our BO account in electronic mode in lieu of physical copy of the statement of account.

I/We confirm that the dispatch of statement of account to me/us at the following email address shall constitute full and absolute discharge of your obligation under the above agreement to provide me/us with statement of my/our BO account. But, I/we reserve my/our right to receive the physical copy of statement of accounts despite receiving the same in electronic mode, if such a demand is made in writing on you.

E-mail address :____

I/we confirm that any change in the aforesaid email address or any other instructions with regard to dispatch/service of my/our statement of account on me/us shall not be binding upon you unless you are intimated in writing by me/us by acknowledged delivery.

Yours faithfully

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....	....	....
First/Sole Holder Signature	Second Holder Signature	Third Holder Signature

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DP CHARGES TARIFF SHEET

Schedule of DP Charges w.e.f. 05th November 2023

S.No.	Details of Service	Charges	
1.	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 50 Crore	10000 P.A.	10000 P.A.
	>50 Crore to 100 Crore	25000 P.A.	25000 P.A.
	>100 Crore to 1000 Crore	50000 P.A.	50000 P.A.
	>1000 Crore and above	100000 P.A.	100000P.A.+Rs.50 per Crore above 1000 Crore
3.	POA Holder Market Sale (per entry)	0.015% of the value of transaction (Min. Rs. 25/-)	
4.	Non POA Holder Market Sale (per entry)	0.02% of the value of transaction (Min. Rs. 75/-)	
5.	Off Market Transaction Delivery (per entry)	0.03% of the value of transaction (Min. Rs. 75/-)	
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.	De-materialisation	Rs. 100/- per certificate+Rs. 200/- per Demat Request + Courier Charges Extra	
9.	Re-materialisation	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/-	
12.	KYC Registration Charges (KRA/KYC)	Rs. 50/- for Individual, Rs. 100/- for Non-Individual	

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.
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.100/- per instruction.
g. Freeze/Unfreeze Charges Rs. 100/- per instruction
h. Cheque bounce charges Rs. 200/- per cheque.
i. Re-activation charges for suspended account Rs.1000/- per account
j. Charges of Delivery instruction accepted at client's sole risk on or within 24 hours of execution.
k. Non-periodic statement and other communication shall be charged @ Rs.20/- per page and postage charges @ Rs 50/- per mail.
l. In Case of Demat Slip rejected, the rejection postage shall be charged @ Rs.100/- per Demat rejection.
m. 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.
n. GST and other Government levies extra as applicable for time to time.
o. A settlement fee at the rate of Rs. 4.00 per debit instruction in a client's account shall be charged to the Participant of the client. **No separate amount shall be charged from the client** for the same. Charges given in the table above are inclusive of this charge.
p. For BSDA Holders following shall be the charges:

Value of Holdings in the Demat Account (Debt as well as other than debt securities combined)	Maximum Annual Maintenance Charges
Up to Rs. 4 lakhs	NIL
More than Rs. 4 lakhs but up to Rs. 10 lakhs	Rs. 100/-
More than Rs. 10 lakhs	Not a BSDA. A Regular AMC may be levied.

21

First/Sole Holder Signature .... Second Holder Signature .... Third Holder Signature ....

FSBPL FRONTLINE

DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI)

(FOR OPERATING BENEFICIARY ACCOUNT)

To ALL TO WHOM THESE PRESENTS SHALL COME, I/We________________________________ (name of the demat account holder/s), here as I/We hold a Beneficial Owner Account No.**IN300564**______________ with **NSDL**, through **Frontline Stock Brokers Pvt. Ltd.**, having its **registered** office at **M-6, M-Block Market, 2nd Floor, Greater Kailash-II, New Deli-110048** bearing NSDL DP ID IN300564 having SEBI registration number IN-DP-651-2021. AND WHEREAS I/We am/are investor engaged in buying and selling of securities through **Frontline Stock Brokers Pvt. Ltd.**, a SEBI registered stock broker bearing registration no. **INZ000179633** AND member of National Stock Exchange of India Ltd. The DP Account numbers of **Frontline Stock Brokers Pvt. Ltd.** for the purpose of this Instructions/ authorization are mentioned as follows;

S.No.	NSDL Demat A/c No.	CM BP-ID	Purpose
1			
2			
3			
4			
5			

S. No.	PURPOSE	Signature
1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker	22a ✓ Signature of 1st Holder / Signature of 2nd Holder / Signature of 3rd Holder
2	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange	22b ✓ Signature of 1st Holder / Signature of 2nd Holder / Signature of 3rd Holder
3	Mutual Fund Transactions being executed on Stock Exchange order entry platforms	22c ✓ Signature of 1st Holder / Signature of 2nd Holder / Signature of 3rd Holder
4	Tendering shares in open offers through Stock Exchange platforms	22d ✓ Signature of 1st Holder / Signature of 2nd Holder / Signature of 3rd Holder

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FRONTLINE

DECLARATION FOR COMMON MOBILE NUMBER AND EMAIL ID FOR DEMAT AND TRADING ACCOUNT

To,

Date : ____________________

Frontline Stock Brokers Pvt. Ltd.

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

Subject : Common Mobile Number/Email Id for Demat and Trading Accounts

Dear Sir,

Mr./Mrs.______________________________would like to confirm that the Mobile Number_________________________ E-mail Id____is registered in my name. I am enclosing self attested copy of latest paid bill of your information and record. I am your registered client having trading code____________ as, and demat account.

Upon understanding from you that my mobile number/emailed if registered with some of the clients who have trading and/or demat accounts with you. I have to state that this is in my full knowledge and I have consented to the below clients whi is/are my relatives/ to state my mobile number/email id in their KYC's to which I have no objection. All the transactions in their accounts are not only done as per their respective instructions bu they are well conveyed by me of all the SMS/Email belonging to them which are sent by you to me on my above mobile number/email id.

All these below clients also do not have any objection to the same, in consent they have also signed :

S.No.	Client Name	Trading Code	Demat A/c	Relation	Signature

However, in case of any further regulatory requirements, I under take to abide upon hearing from you.

Thanking You,

Name :_________________________________

Address :_________________________________

____

23 ✓_________________________
(Client Signature)

FSBPL FRONTLINE

DECLARATION BY HUF

To,

Date : ____________________

Frontline Stock Brokers Pvt. Ltd.

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

DP ID	I	N	3	0	0	5	6	4	Client ID								

As our HUF firm wishes to open an account with your DP in the said name ____
we beg to say that the first signatory to this letter, Mr ____ is the Karta of the Joint Family and other signatories are the adult co-parceners of the said family.

We further confirm that the business of the said joint family is carried on mainly by the said Karta as also by the other signatories hereto in the interest and for the benefit of the entire body of co-parceners of the joint family. We all undertake that claims due to the DP from the 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 Karta, 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.

We hereby undertake to inform the DP of the death or birth of a co-parcener of any change occurring at any time in the membership of our joint family during the currency of the account.

Your's Sincerely

Name & signature of Karta

Name & Signature of Adult Co-parceners and date of birth of Minor Co-parceners
(Use Annexure for Additional Members)

S.No.	Name	Sex	Relation with Karta	Date of Birth	Signature
1.					⊗ ____________
2.					⊗ ____________
3.					⊗ ____________
4.					⊗ ____________

FSBPL FRONTLINE

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

CERTIFIED TRUE COPY OF EXTRACTS OF THE MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS OF______________________________(Co. Name) **CONVENED ON THE**________________(date) / **TIME AT**________________

____(Venue)

"**RESOLVED THAT** an account for the purpose of trading in Securities be opened with M/s. **FRONTLINE STOCK BROKERS PVT. LTD.**, Member - National Stock Exchange of India Ltd., hereinafter refered to as the Broker, for undertaking sale & purchase of Securities on the said exchange(s).

FURTHER RESOLVED THAT Shri___________________________and Shri___________________________, Directors of the Company, be and are hereby, authorised severally to do all such acts, deeds, things and sign all documents papers, authorisations, agreements etc. as may be necessary for opening and operating the said account with Broker.

FURTHER RESOLVED THAT the aforementioned Directors, be and are hereby, authorised severally, to give instructions on behalf of the Company. for conducting trading in securities for and on behalf of the Company.

FURTHER RESOLVED THAT, a copy of this resolution be forwarded to the Broker by Shri_________________________ or Shri____________________________________Directors, & the Broker, be instructed to honour the instructions of Shri __________________________________and / or Shri____________________________, Directors of the Company to carry on trading in Securities.

Certified true copy

For (Name of the Company)

Dated : | | | | | | | |

Director

Place : ________________

FORMAT OF DECLARATION TO BE GIVEN BY PARTNERSHIP FIRM ON LETTER HEAD OF THE FIRM

To,

Frontline Stock Brokers Pvt. Ltd.

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

Date________________

Dear Sir,

We refer to the trading account being opened / opened with you in the name of______________________________and declare and authorise you as under.

We recognize that a beneficiary account cannot be opened with a depository participant in the name of a partnership firm as per applicable law. To facilitate the operation of the above trading account with you and for the purpose of completing the Securities transfer obligations pursuant to the trading operations, we authorise you to recognize the beneficiary account No._________________________with depository____________________________opened as a joint account in the names of the partnership of the firm.

We agree that the obligations for Securities purchased and/or sold by the firm will be handled and completed through transfer to/from the above mentioned account. We recognize and accept transfers made by you to the beneficiary account as complete discharge of obligations by you in respect of trades executed in the above Securities trading account of the firm.

We hereby authorize_______________________, partner in the firm to execute/sign and submit such documents, agreements, deeds etc. as may be necessary to enter into the agreement and engage in business with **FRONTLINE STOCK BROKERS PVT. LTD.**, and to place order for buying and selling of Securities, sell, purchase, transfer, endorse, negotiate and do other things that may be necessary to engage in business on behalf of the partnership and to sign the authority letter for adjustment of balances in family accounts.

Name of Partners (in block letters)	Signature

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Branch Code : Sub Branch :	Group Code : Intro Code :

Tele Verification :

CKYC Reference No.:	KYC Reference No.:

I.	CHECKING DETAILS	REMARKS
a)	Name as it appears on the ID & Address Proof (in capital letter)	
b)	Signature of Client on all pages and wherever necessary (Witness wherever required) ☐	
c)	Signature Checked and Verified.	
d)	Photograph (duly signed) ☐	
e)	A copy of PAN Card (Self Attested) ☐	
f)	Address Proof (Self Attested) ☐	
g)	Bank Proof containing Client Name (Self Attested) ☐	
h)	Demat Account Proof (Self Attested) ☐	
2.	**Cross Checking done by TM________________ DP________________**	
3.	**Details Punched in Computer by TM________________ DP________________**	
4.	**UCC UPLOADED :** ☐ NSE Cash ☐ NSE F&O ☐ NSE Currency	
5.	**Client Instruction Book issued by**	
6.	**Client Account Status Report issued by**	
	DETAILS VERIFIED FROM UNSC LIST & SEBI DEBARRED ENTITY LIST Signature	

FOR OFFICE USE ONLY

	Name	Employee Code	Signature
Punched by			
Verified by			
Rejected by			

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Frontline Stock Brokers Pvt. Ltd.

CIN : U74899DL1995PTC064125

MEMBER

NSE (Capital and F&O Segment), SEBI Regn. No.: INZ000179633

Depository Participant : NSDL (DP ID - IN 300564), SEBI Regn. No.: IN-DP-651-2021

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
Phone : +91-120-4219355, 4547842
E-mail : fcsl@fcslindia.com, Website : www.fcslindia.com
Investor Grievances E-mail : Grievances@fcslindia.com

ACKNOWLEDGEMENT

Frontline Stock Brokers Pvt. Ltd.

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

Received the application from Mr/Ms____ as the sole/first holder alongwith ____ and ____ as the second and third holders respectively for opening of a depository account. Please quote the DP ID & Client ID allotted to you in all your future correspondence.

Date : | | | | | | | | |

Participant Stamp & Signature