



Account Opening Form

NRI



Jainam Broking Limited

Jainam House, New Passport Office Road, Piplod, Surat - 395007
Contact: +91 261 6725555, 2305555 E-mail: corp@jainam.in Web: www.jainam.in
Member: BSE, NSE, MCX, NCDEX, CDSL, MSEI

INDEX PAGE

No	Document	Brief Significance of the Document	Pages
Mandatory documents as prescribed by SEBI & Exchanges			
1	Account Opening Form	a) KYC form - Document captures the basic information about the First / Sole holder	1-2
		b) KYC form - Document captures the basic information about the Second holder	3-4
		c) KYC form - Document captures the basic information about the Third holder	5-6
		d) Document captures the additional information about the client relevant to trading account	7-9
		e) Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s)	10
		f) Investors Grievance Contact Details	11
		g) Nomination Form(For Trading)	12
		h) Instruction/check list for filling up AOF	13-17
2	Rights & Obligations	Document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading and SLBM Segments).	18-34
3	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities market.	35-40
4	Guidance note	Document detailing Do's and Don'ts for trading on exchange, for the education of the investors.	41-43
5	Policies & Procedures	Document describing significant policies and procedures of the stock broker	44-47
Documents for Opening a Demat Account			
6	Demat Account Form	a) Type of Demat Account & Various Options	49
		b) DP Tariff Sheet : Document detailing various charges that shall be levied for demat account	50
		c) Multiple Nomination Facility (For Demat)	51-54
		d) Rights & Obligations of DP & BO	55-58
		e) Annexure 2.4 (SMART : Terms & Conditions for receiving SMS Alerts from CDSL)	59-61
		f) Annexure 2.6 (Terms And Conditions for availing TRUST Service offered by CDSL)	62-64
		g) Limited Purpose POA : Agreement Granting Limited Purpose POA to the stock-broker for operating the demat account	65-68
Voluntary Documents			
7		a) Electronic Contract Note (ECN) - Declaration	69
		b) Running Account Authorization & Settlement of Funds & Securities	70
		c) Telephonic Instruction / Voice Logger / SMS Facility / Authority Letter	71
		d) Demat Charges Authorization / Opting out of BSDA Facility / Internet Mobile Base Application	72

SEBI Registration Details

Segment	Registration Number	Date
Stock Broking	INZ000198735	11th September 2018
Depository Participant	IN-DP-CDSL-223-2016	8th March 2016

KYC BASIC DETAILS

FIRST / SOLE HOLDER

Application Type*	<input type="radio"/> New <input type="radio"/> Update		KYC Number									
Account Type*	<input type="radio"/> Normal <input type="radio"/> Simplified (for low risk customers) <input type="radio"/> Small								(Mandatory for KYC update request)			

PERSONAL DETAILS (Please refer instruction A)

Prefix	<input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms <input type="radio"/> Dr.
--------	---

Name																						
Maiden Name (if any) Miss																						
Father's / Spouse Name Mr./Mrs.																						
Mother's Name Mrs.																						
Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Transgender				Marital Status	<input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Others																
Nationality	<input checked="" type="radio"/> Indian <input type="radio"/> Other		Country Code		I	N	DOB	D							D	-	M	M	-	Y	Y	Y
Residential Status	<input checked="" type="radio"/> Resident Individual <input type="radio"/> Non-Resident Indian <input type="radio"/> Foreign National <input type="radio"/> Person of Indian Origin																					
Occupation Type	<input type="radio"/> S-Service (<input type="radio"/> Private Sector <input type="radio"/> Public Sector <input type="radio"/> Government Sector)																					
	<input type="radio"/> O-Others (<input type="radio"/> Professional <input type="radio"/> Self Employed <input type="radio"/> Retired <input type="radio"/> Homemaker <input type="radio"/> Student)																					
	<input type="radio"/> B-Business <input type="radio"/> X-Not-Categorised																					

PROOF OF IDENTITY (Please refer instruction B)

PAN								P					
-----	--	--	--	--	--	--	--	---	--	--	--	--	--

PROOF OF ADDRESS (Please refer instruction C)

Current / Permanent / Overseas Address Details

Address Type	<input type="radio"/> Resident / Business <input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Registered Office <input type="radio"/> Unspecified													
Proof of Address	<input type="radio"/> Aadhaar Card <input type="radio"/> Passport <input type="radio"/> Driving Licence <input type="radio"/> Voter Identity Card <input type="radio"/> Bank A/c Statement / Passbook <input type="radio"/> Latest Telephone (only landline) / Electricity / Gas Bill <input type="radio"/> Others _____ <input type="radio"/> Simplified Measures Account - Document Type Code <input type="text"/> <input type="text"/>													
Address _____														

City / Town / Village			District				PIN							
State	Code				Country	India / _____		Country Code				I	N	

Correspondence / Local Address Details (Please refer instruction D)

Same as Current / Permanent / Overseas Address Details

Address _____														
---------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City / Town / Village			District				PIN							
State	Code				Country	India / _____		Country Code						

(In case of multiple correspondence / local addresses, please fill Annexure A1)

CONTACT DETAILS (Please refer instruction E)

Tel (Res)					Tel (Office)										
Mobile		+91			Fax										
E-mail ID															

FATCA / CRS DECLARATION (Please refer instruction F)Are you a tax resident (i.e. are you assessed for tax) in any other country than India? No Yes (if yes, please fill below details)

Country of Jurisdiction of Residence										Country Code			
Tax Identification Number or equivalent (If issued by Jurisdiction)													
Place / City of Birth					Country of Birth					Country Code			
Address													
City / Town / Village										ZIP / Postal Code			
State					Country					Country Code			

DETAILS OF RELATED PERSON (Please refer instruction G)

<input type="radio"/> Additional of Related Person		<input type="radio"/> Deletion of Related Person		KYC Number of Related Person (if available)					
Related Person Type		<input type="radio"/> Guardian of Minor		<input type="radio"/> Assignee		<input type="radio"/> Authorized Representative			
Name									

PROOF OF IDENTITY OF RELATED PERSON

(In case of additional related persons, please fill 'Annexure B1')

(Please refer instruction H)

PAN				P					
-----	--	--	--	---	--	--	--	--	--

REMARKS (If any)

APPLICATION DECLARATION

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

Date

D	D	-	M	M	-	2	0	Y	Y
---	---	---	---	---	---	---	---	---	---

Place _____

2/16

ATTESTATION / FOR OFFICE USE ONLYDocuments Received Self Attested Certified Copies Verified with Originals**IN PERSON / KYC VERIFICATION CARRIED OUT BY** Employee Authorised Person

Signature																			
Name																			
Code					Designation					Branch									
Place					IPV Done on		<table border="1"><tr><td>D</td><td>D</td><td>-</td><td>M</td><td>M</td><td>-</td><td>2</td><td>0</td><td>Y</td><td>Y</td></tr></table>			D	D	-	M	M	-	2	0	Y	Y
D	D	-	M	M	-	2	0	Y	Y										

INSTITUTION DETAILS

Name	Jainam Broking Limited		
Code	IN0357	POS Code	1200002001

Seal/Stamp

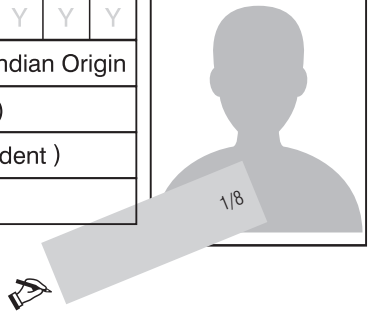
KYC BASIC DETAILS

SECOND HOLDER

Application Type*	<input type="radio"/> New <input type="radio"/> Update	KYC Number												
Account Type*	<input type="radio"/> Normal <input type="radio"/> Simplified (for low risk customers) <input type="radio"/> Small	(Mandatory for KYC update request)												

PERSONAL DETAILS (Please refer instruction A)

Prefix Mr. Mrs. Ms Dr.

Name																						
Maiden Name (if any)	Miss																					
Father's / Spouse Name	Mr./Mrs.																					
Mother's Name	Mrs.																					
Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Transgender			Marital Status	<input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Others																	
Nationality	<input checked="" type="radio"/> Indian <input type="radio"/> Other			Country Code	I	N	DOB							D	D	-	M	M	-	Y	Y	Y
Residential Status	<input checked="" type="radio"/> Resident Individual <input type="radio"/> Non-Resident Indian <input type="radio"/> Foreign National <input type="radio"/> Person of Indian Origin																					
Occupation Type	<input type="radio"/> S-Service (<input type="radio"/> Private Sector <input type="radio"/> Public Sector <input type="radio"/> Government Sector)																					
	<input type="radio"/> O-Others (<input type="radio"/> Professional <input type="radio"/> Self Employed <input type="radio"/> Retired <input type="radio"/> Homemaker <input type="radio"/> Student)																					
		<input type="radio"/> B-Business <input type="radio"/> X-Not-Categorised																				

PROOF OF IDENTITY

PAN									
-----	--	--	--	--	--	--	--	--	--

(Please refer instruction B)

PROOF OF ADDRESS (Please refer instruction C)

Current / Permanent / Overseas Address Details

Address Type	<input type="radio"/> Resident / Business <input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Registered Office <input type="radio"/> Unspecified												
Proof of Address	<input type="radio"/> Aadhaar Card <input type="radio"/> Passport <input type="radio"/> Driving Licence <input type="radio"/> Voter Identity Card <input type="radio"/> Bank A/c Statement / Passbook <input type="radio"/> Latest Telephone (only landline) / Electricity / Gas Bill <input type="radio"/> Others _____ <input type="radio"/> Simplified Measures Account - Document Type Code <input type="text"/> <input type="text"/>												

Address _____

City / Town / Village														
District														
PIN														
State														
Code														
Country	India / _____													
Country Code	I	N												

Correspondence / Local Address Details

(Please refer instruction D)

Same as Current / Permanent / Overseas Address Details

Address _____

City / Town / Village														
District														
PIN														
State														
Code														
Country	India / _____													
Country Code														

(In case of multiple correspondence / local addresses, please fill Annexure A1)

CONTACT DETAILS (Please refer instruction E)

Tel (Res)														
Tel (Office)														
Mobile	+91													
Fax														
E-mail ID														

FATCA / CRS DECLARATION (Please refer instruction F)Are you a tax resident (i.e. are you assessed for tax) in any other country than India? No Yes (if yes, please fill below details)

Country of Jurisdiction of Residence											Country Code			
Tax Identification Number or equivalent (If issued by Jurisdiction)														
Place / City of Birth						Country of Birth						Country Code		
Address _____ _____														
City / Town / Village							ZIP / Postal Code							
State						Country						Country Code		

DETAILS OF RELATED PERSON (Please refer instruction G)

<input type="radio"/> Additional of Related Person	<input type="radio"/> Deletion of Related Person	KYC Number of Related Person (if available)				
Related Person Type	<input type="radio"/> Guardian of Minor <input type="radio"/> Assignee <input type="radio"/> Authorized Representative					
Name						

PROOF OF IDENTITY OF RELATED PERSON

(In case of additional related persons, please fill 'Annexure B1')

(Please refer instruction H)

PAN				P				
-----	--	--	--	---	--	--	--	--

REMARKS (If any)

APPLICATION DECLARATION

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

Date

D	D	-	M	M	-	2	0	Y	Y
---	---	---	---	---	---	---	---	---	---

Place _____

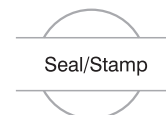
2/8

ATTESTATION / FOR OFFICE USE ONLYDocuments Received Self Attested Certified Copies Verified with Originals**IN PERSON / KYC VERIFICATION CARRIED OUT BY** Employee Authorised Person

Signature												
Name												
Code					Designation					Branch		
Place						IPV Done on						

INSTITUTION DETAILS

Name	Jainam Broking Limited		
Code	IN0357	POS Code	1200002001



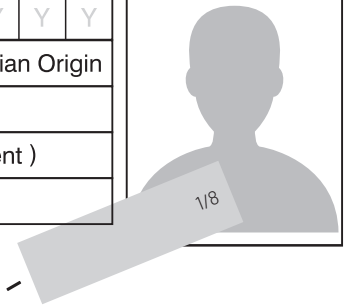
KYC BASIC DETAILS

THIRD HOLDER

Application Type*	<input type="radio"/> New <input type="radio"/> Update	KYC Number												
Account Type*	<input type="radio"/> Normal <input type="radio"/> Simplified (for low risk customers) <input type="radio"/> Small												(Mandatory for KYC update request)	

PERSONAL DETAILS (Please refer instruction A)

Prefix	<input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms <input type="radio"/> Dr.
--------	---

Name																						
Maiden Name (if any)		Miss																				
Father's / Spouse Name		Mr./Mrs.																				
Mother's Name		Mrs.																				
Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Transgender			Marital Status	<input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Others																	
Nationality	<input checked="" type="checkbox"/> Indian <input type="checkbox"/> Other		Country Code	I	N	DOB	D							D	-	M	M	-	Y	Y	Y	Y
Residential Status	<input checked="" type="checkbox"/> Resident Individual <input type="checkbox"/> Non-Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin																					
Occupation Type	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector)																					
	<input type="checkbox"/> O-Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/> Student)																					
	<input type="checkbox"/> B-Business <input type="checkbox"/> X-Not-Categorised																					

PROOF OF IDENTITY

PAN														
-----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Please refer instruction B)

PROOF OF ADDRESS (Please refer instruction C)

Current / Permanent / Overseas Address Details

Address Type	<input type="radio"/> Resident / Business <input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Registered Office <input type="radio"/> Unspecified											
Proof of Address	<input type="radio"/> Aadhaar Card <input type="radio"/> Passport <input type="radio"/> Driving Licence <input type="radio"/> Voter Identity Card <input type="radio"/> Bank A/c Statement / Passbook <input type="radio"/> Latest Telephone (only landline) / Electricity / Gas Bill <input type="radio"/> Others _____ <input type="radio"/> Simplified Measures Account - Document Type Code <input type="text" value=""/> <input type="text" value=""/>											

Address _____

City / Town / Village					District					PIN					
State				Code		Country	India / _____			Country Code	I	N			

Correspondence / Local Address Details

(Please refer instruction D)

Same as Current / Permanent / Overseas Address Details

Address _____

City / Town / Village					District					PIN					
State				Code		Country	India / _____			Country Code					

(In case of multiple correspondence / local addresses, please fill Annexure A1)

CONTACT DETAILS (Please refer instruction E)

Tel (Res)																			
Mobile	+91																		
E-mail ID																			

FATCA / CRS DECLARATION (Please refer instruction F)Are you a tax resident (i.e. are you assessed for tax) in any other country than India? No Yes (if yes, please fill below details)

Country of Jurisdiction of Residence		Country Code		
Tax Identification Number or equivalent (If issued by Jurisdiction)				
Place / City of Birth		Country of Birth		Country Code
Address				
City / Town / Village		ZIP / Postal Code		
State		Country		Country Code

DETAILS OF RELATED PERSON (Please refer instruction G)

<input type="radio"/> Additional of Related Person	<input type="radio"/> Deletion of Related Person	KYC Number of Related Person (if available)			
Related Person Type	<input type="radio"/> Guardian of Minor <input type="radio"/> Assignee <input type="radio"/> Authorized Representative				
Name					

PROOF OF IDENTITY OF RELATED PERSON

(In case of additional related persons, please fill 'Annexure B1')

(Please refer instruction H)

PAN				P				
-----	--	--	--	---	--	--	--	--

REMARKS (If any)

APPLICATION DECLARATION

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

Date

D	D	-	M	M	-	2	0	Y	Y
---	---	---	---	---	---	---	---	---	---

Place _____

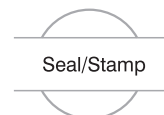
2/8

ATTESTATION / FOR OFFICE USE ONLYDocuments Received Self Attested Certified Copies Verified with Originals**IN PERSON / KYC VERIFICATION CARRIED OUT BY** Employee Authorised Person

Signature															
Name															
Code	Designation	Branch													
Place	IPV Done on	<table border="1"><tr><td>D</td><td>D</td><td>-</td><td>M</td><td>M</td><td>-</td><td>2</td><td>0</td><td>Y</td><td>Y</td></tr></table>				D	D	-	M	M	-	2	0	Y	Y
D	D	-	M	M	-	2	0	Y	Y						

INSTITUTION DETAILS

Name	Jainam Broking Limited		
Code	IN0357	POS Code	1200002001



PART – B

Income Range (per annum) <small>(Tick whichever is applicable)</small>	<input type="radio"/> Upto ₹ 1,00,000/-	<input type="radio"/> ₹ 1,00,001/- to ₹ 5,00,000/-										
	<input type="radio"/> ₹ 5,00,001/- to ₹ 10,00,000/-	<input type="radio"/> ₹ 10,00,001/- to ₹ 25,00,000/-										
	<input type="radio"/> ₹ 25,00,001/- to ₹ 100,00,000/-	<input type="radio"/> above ₹ 100,00,000/-										
Networth(not older than 1 year)	₹	as of	D	D	-	M	M	-	2	0	Y	Y

BANK DETAILS

Bank Name							Branch									
Address																
City					State					Pin Code						
Account Type	<input type="radio"/> Saving	<input type="radio"/> Current	<input type="radio"/> Other	MICR Code (9 digit)												
Account No.				IFSC Code (11 digit)												

EQUITY DEMAT DETAILS

No.	Def.	DP Name	DP ID / Client ID

COMMODITY DEMAT DETAILS

CP	CP Name	CP ID / Client ID
NERL		
COMRIS		

UNIQUE MOBILE NUMBER

- Pursuant to SEBI circular bearing Ref.: CIR/MIRSD/15/2011 dated August 2, 2011, please note that the mobile number mentioned by me in the KYC form belongs to
- Myself Spouse Son / Daughter Father / Mother
- In case of Spouse, Son / Daughter, Father / Mother, please mention their PAN

				P					
--	--	--	--	---	--	--	--	--	--
- However I have no objection whatsoever in you sending all the necessary information, intimations etc. related to my demat / trading account to this mobile number.

UNIQUE E-MAIL ID

- Pursuant to SEBI circular bearing Ref.: CIR/MIRSD/15/2011 dated August 2, 2011, please note that the E-mail Id mentioned by me in the KYC form belongs to
- Myself Spouse Son / Daughter Father / Mother
- In case of Spouse, Son / Daughter, Father / Mother, please mention their PAN

				P					
--	--	--	--	---	--	--	--	--	--
- However I have no objection whatsoever in you sending all the necessary information, intimations etc. related to my demat / trading account to this E-mail id.

COMMUNICATION MODE

Contract Note / Margin Statement / Ledgers / Bills Delivery Mode	<input type="radio"/> Physical	<input type="radio"/> Electronic
If Electronic mode, provide E-mail id	As mentioned in KYC Basic Details Form	

Any changes in E-mail Id need to be communicated to the broker through a physical letter

Number of years of Investment / Trading experience		
Are you	Politically Exposed Person (PEP)	<input type="radio"/> Yes <input type="radio"/> No
	Related to Politically Exposed Person (PEP)	<input type="radio"/> Yes <input type="radio"/> No
Avail Internet Trading / Wireless Technology Facility		<input type="radio"/> Yes <input type="radio"/> No
Purpose and intended nature of the business relationship(as per PMLA requirements)	<input type="radio"/> Investment	<input type="radio"/> Trading <input type="radio"/> Hedging
	<input type="radio"/> Speculation	<input type="radio"/> Others _____

NOMINATION DETAILS

Nomination required No Yes (If yes, please fill the nomination form)

INTRODUCER / SUB BROKER DETAILS

Signature							
Status / Code	<input type="radio"/> Channel Partner	<input type="radio"/> Employee	<input type="radio"/> Trading	<input type="radio"/> DP (12041500)			
Name	First	Middle	Last				
Address	<hr/> <hr/> <hr/>						
City	State	Country	India / _____	PIN			
Mobile	E-mail						

OTHER TRADING MEMBER / SUB-BROKER DETAILS

Whether registered with any other stock broker / sub-broker :(if registered with multiple members, provide details of all)

Name of stock broker / sub-broker : _____

Name of Exchange : _____ Client Code : _____

Details of disputes / dues pending from/to such stock broker / sub-broker : _____

PAST ACTIONS

Details of any action / proceedings initiated / pending / taken by SEBI / RBI / IRDA / Stock Exchange / any other authority against the client in charge of dealing in Equities / F&O / Currency Derivatives / Commodity Derivatives for violation of laws / other economic offences during the last 3 years : _____

ANY OTHER INFORMATION

CHOICE OF TRADING PLATFORM (Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off.)

Segment	Signature of Client	
Equity / MF (BSE / NSE)	-	3(a)/15
Equity Derivatives (BSE / NSE)	-	3(b)/15
Currency Derivatives (BSE / NSE / MSEI)	Restricted	
Commodity Derivatives* (BSE/ NSE / MCX / NCDEX)	-	3(d)/15

* Date of consent

MCX	D D - M M - 2 0 Y Y
NCDEX	D D - M M - 2 0 Y Y

If, in future, the client wants to trade on any new segment/exchange, separate authorization/letter shall be required.

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

DECLARATION

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

Place	
Date	D D - M M - 2 0 Y Y

- _____ 4/15

NOTING FOR THE CLIENTS

- Pursuant to SEBI circular # SEBI/MRD/SE/Cir-42/2003 dated 10th November 2003, Jainam Broking Limited informs all its clients that they shall be doing proprietary trading in addition to clientele business.
- The information provided by the client through this form shall be the sole property of the trading member / brokerage house and would not be disclosed to anyone unless required by law or except with the express permission of the clients.

TARIFF SHEET (TRADING)

Segment	Intra Day				Delivery / Positional	
	1st side %	Min	2nd side %	Min	Slab %	Min
Cash						
Equity Derivatives (Futures)						
Equity Derivatives (Options)						
Currency Derivatives (Futures)	Restricted					
Currency Derivatives (Options)						
Commodity Derivatives (Futures)						
Commodity Derivatives (Options)						

Other Charges

- One time Account Opening Charge (amount not exceeding ₹500/-) shall be charged.
- The above charges are exclusive of statutory levies like GST, Stamp Duty, Securities / Commodity Transaction Tax, Exchange Transaction Charges, SEBI Turnover Fees & Clearing Charges which shall be charged additionally.
- Scripwise Delivery Handling Charges on Sale Transactions (amount not exceeding Rs.5/- per scrip) shall be levied.
- Minimum Contract Charges (amount not exceeding ₹ 25/-) (inclusive of brokerage only) per contract shall be levied.
- Demat Charges per scrip shall be levied for transfer of securities from / to Broker's Beneficiary / Margin Account.
- If you have opted for electronic mode of communication, any type of physical or hard copies of contract notes, ledger, holding statements etc. (amount not exceeding ₹5/- per page) in addition to courier charges shall be charged additionally
- All bills (segmentwise) shall be rounded off to the nearest rupee.

I hereby agree to the abovementioned charges that shall be levied on the trades executed in my account.

GST Details

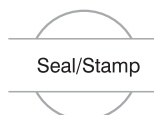
GSTIN																			
-------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5/15

We undertake that we have made the client aware of '**Policy and Procedures**', '**Tariff Sheet**' and all the non-mandatory documents. We have also made the client aware of '**Rights and Obligations**' document(s), '**Risk Disclosure Documents**' and '**Guidance Note**'. We have given/sent him a copy of all the KYC documents. We undertake that any change in the '**Policy and Procedures**' and/or '**Tariff Sheet**' and/or all the non-mandatory documents would be duly intimated to the clients. We also undertake that any change in the '**Rights and Obligations**' and '**Risk Disclosure Documents**' would be made available on our website (www.jainam.in) for the information of the clients.

For **Jainam Broking Limited**

Place	Surat																			
Date	D	D	-	M	M	-	2	0	Y	Y										



Authorized Signatory

DIS OPTION (Please select any one)

- Option 1** : I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my/our CDSL account through I / We have issued a Power of Attorney (POA) in favour of **Jainam Broking Limited** (Clearing Member) for executing delivery instruction for setting stock exchange trades (settlement related transactions) effected through such Clearing Member.



6/16

(Signature of First / Sole Holder)



3/8

(Signature of Second Holder)



3/8

(Signature of Third Holder)

- Option 2** : I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA in favour of **Jainam Broking Limited** (Clearing Member) for executing delivery instructions for setting stock exchange trades (settlement related transactions) effected through to me / us immediately on my / our request at any later date.



6/16

(Signature of First / Sole Holder)



3/8

(Signature of Second Holder)



3/8

(Signature of Third Holder)

INVESTOR'S GRIEVANCE CONTACT DETAILS

Details of Compliance Officer

Name	Designation	Tel	E-mail ID
Mr. Om Prakash Singh	Compliance Officer	+91-261-6725545	omprakash.singh@jainam.in

For any grievance / dispute, please contact stock broker at the registered / corporate office address of the company or e-mail on **customercare@jainam.in** or call on **91-261-6725555 / 2305555**

In case not satisfied with the response, please contact the concerned stock exchange as detailed below.

Exchange	Tel	E-mail ID
BSE	+91-22-22728097	is@bseindia.com
NSE	+91-22-26598190	ignse@nse.co.in
MSEI	+91-22-67318933 / 67319000	investorcomplaints@msei.com
MCX	+91-22-67318888	grievance@mcxindia.com
NCDEX	+91-22-66406789	askus@ncdex.com

Demat Section

TYPE OF ACCOUNT (Please tick whichever is applicable)

Status	Sub-Status	
Individual	<input type="radio"/> NRI Repatriable	<input type="radio"/> NRI Non - Repatriable
	<input type="radio"/> NRI Repatriable Promoter	<input type="radio"/> NRI Non - Repatriable Promoter
	<input type="radio"/> NRI - Depository Receipts	<input type="radio"/> Others (specify) _____

I/We instruct the DP to receive each & every credit in my/our account (Automatic Credit)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Do you wish to receive dividend / interest directly into your bank account given above through ECS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	<input type="radio"/> Daily <input type="radio"/> Weekly <input type="radio"/> Fortnightly <input checked="" type="checkbox"/> As per SEBI Regulation <input type="radio"/> Monthly
Transaction-cum-Holding Statement/Ledgers/Bills maybe mailed to Sole / First Holder's Email ID stated in the Account Opening Form	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
I/We would like to share the email ID with the RTA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
I/We would like to receive the Annual Report (If not marked, the default option would be in Physical)	<input type="radio"/> Physical <input checked="" type="checkbox"/> Electronic <input type="radio"/> Both Physical and Electronic

SMS Alert Facility (Refer to Terms & Conditions - Annexure 2.4)

I/We wish to avail the SMS alert facility (Mandatory, if you are giving Power of Attorney (POA))	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Mobile	As mentioned in KYC Basic Details Form

Transactions Using Secured Texting Facility (TRUST) (Refer to Terms and Conditions - Annexure 2.6)

I/We wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I/We have read and understood the Terms and Conditions prescribed by CDSL for the same	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please register the following Clearing Member IDs under my/our below mentioned BO ID registered for TRUST		
Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (optional)

Easi Facility (To register for easi, please visit our website www.cdslindia.com)	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--



7/15

(Signature of First / Sole Holder)



4/8

(Signature of Second Holder)



4/8

(Signature of Third Holder)

DP TARIFF SHEET

Services	Scheme Name					
	<input type="radio"/> Investor	<input type="radio"/> Trader	<input type="radio"/> Lifetime	<input type="radio"/> Deposit	<input type="radio"/> IPO	
	<input type="radio"/> BSDA					
Deposit	-	-	-	₹ 2000/-	-	
One time Maintenance Charges	-	-	₹ 900/-	-	-	
Annual Maintenance Charges	₹ 200/-	₹ 600/-	-	-	-	
Receipts (Market & Off Market)	Nil					
Delivery (Debit) per transaction	To Jainam Pool with Auto Payin	₹ 10/-	Nil	₹ 10/-	₹ 10/-	₹ 25/-
	To Jainam Pool without Auto Payin	₹ 12/-				₹ 25/-
	To Other Pool & Off Market	0.01% Min. ₹ 15/-				
Pledge Creation, Closure & Invocation	₹ 25/- per request					
Dematerialization	₹ 100/- per DRF & ₹ 10/- per certificate					
Rematerialization	As per CDSL Actuals					
Margin Pledge Creation & Unpledge Request	As per CDSL Actuals					
Margin Pledge Creation & Unpledge for MTF	As per CDSL Actuals					

The above charges are exclusive of GST and other levies levied by Government bodies / statutory authorities from time to time.

The above charges are based on existing CDSL charges and is subject to change at the sole discretion of Jainam Share Consultants Private Limited with intimation to client of not less than 30 days.

Deposit shall be interest free & refundable on the closure of account (minimum period of 1 year.)

Value of the transaction will be in accordance with the rates provided by CDSL.

All charges (except AMC) will be payable monthly. Charges quoted above are for the services listed. Any service not quoted above will be charges separately.

All documents like holding, transaction, ledger statements etc. shall be electronically mailed to the e-mail ID of the client. Any copy in physical form shall be charged extra per page in addition to the postal charges.

All instruction for the transfer must be received at Corporate Office (Surat) at least 24 hours before the execution date.

DECLARATION

I / We have received and read the Rights and Obligations documents and Terms & Conditions and agree to abide by and be bound by the same and by the Bye-laws as are in force from time to time. I / We declare that the particulars given by me / us above are true and to the best of my / our knowledge as on the date of making this application. I / We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I / We further agree that any false / misleading information given by me / us or suppression of any material information will render my / our account liable for termination and suitable action.

8 / 15

(Signature of First / Sole Holder)

5 / 7

(Signature of Second Holder)

5 / 7

(Signature of Third Holder)



Agreement Section

NRI



Jainam Broking Limited

Jainam House, New Passport Office Road, Piplod, Surat - 395007
Contact: +91 261 6725555, 2305555 E-mail: corp@jainam.in Web: www.jainam.in
Member: BSE, NSE, MCX, NCDEX, CDSL, MSEI



Stock Holding Corporation of India Limited

Registered office : 301, Centre Point, Dr. Babasaheb Ambedkar Road, Parel, Mumbai – 400012
CIN : U67190MH1986PLC040506 Visit us at : www.shcilestamp.com

VER 5.1 130315

e-Stamping Application Form

Application Date	/ /20	<input checked="" type="checkbox"/> (Tick any one) <input type="checkbox"/> Registerable <input checked="" type="checkbox"/> Non-Registerable	
Document Description	Power of Attorney	Stamp Duty Amount	₹ 10/-
Property Description (not exceeding 100 characters)			
Power of Attorney in favour of Jainam Broking Limited.			
Consideration of Property		₹ NIL	
First Party Details (name not exceeding 50 characters)			
Name	Jainam Broking Limited		
Address	Shop No. 5/222/G4, Khatiba Shopping Center, Near DMC Market, Moti Daman.		
Phone	+91-261-2305555	PAN	A A B C J 3 9 1 8 N PIN 3 9 6 2 2 0
Second Party Details (name not exceeding 50 characters)			
Name			
Address			
Phone		PAN	
Stamp Duty Payment Details (name not exceeding 50 characters)			
Stamp Duty Purchased by	Jainam Broking Limited		
Stamp Duty Paid by (✓ Tick)	<input checked="" type="checkbox"/> 1st Party <input type="checkbox"/> 2nd Party	Type of Payment	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> Pay-Order <input type="checkbox"/> NEFT <input type="checkbox"/> RTGS <input checked="" type="checkbox"/> Account to Account Transfer
Stamp Duty Paid by - Gender (✓ Tick)	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Jointly paid by Male & Female <input checked="" type="checkbox"/> Others	
Cheque / DD / Pay-Order / NEFT / RTGS / Account Details			Cash Deposit
Bank Name	Branch Name	Cheque / DD / PO / UTR / REF / Account No.	Deno. Pieces ₹
			2000 X
			500 X
			100 X
			50 X
			20 X
			10 X
			5 X
Rupees (in words):			2 X
			1 X
			Total

- Please submit the duly filled and signed form along with stamp duty amount at the e-Stamping counter
- Stamp Duty amount should be rounded off to the nearest Rupee
- The correctness of Article type and Stamp Duty amount cannot be confirmed at the e-Stamping counter
- Once the e-Stamp is generated no modifications/changes are possible, so carefully check the preview of the e-Stamp and only then sign the preview
- Once the e-Stamp has been generated, payment cannot be cancelled or refunded by StockHolding. For cancellation you need to get in touch with the Competent Authority at the Stamp Office appointed by the State Government
- Cancellation charges are applicable as levied by the State Government

I have read and understood the above instructions and the Information given by me in this form is true to the best of my knowledge and belief.

Name of the Party/Representative:



9 / 15

(For Office use only)

I verify that the Application Form is in order

To be filled by USER

To be filled by SUPERVISOR

SUBIN	Certificate Number	IN
Signature	Signature	
Stamp Certificate received by	Name:	Signature:

StockHolding e-Stamping

Receipt

(To be filled in by the client)

Stamp Duty Purchased By	Jainam Broking Limited.	Stamp Duty Paid by	<input checked="" type="checkbox"/> 1st Party <input type="checkbox"/> 2nd Party
Stamp Duty Amount	₹ 10/-	Type of Payment	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> Pay-Order <input type="checkbox"/> NEFT <input type="checkbox"/> RTGS <input checked="" type="checkbox"/> Account to Account Transfer
Cheque/ DD/ PO/ UTR/ REF/Account No.		Date:	/ /20
Bank Name		Branch Name	
Counter Signature with Seal			

DEMAT DEBIT AND PLEDGE INSTRUCTION

Voluntary Requirement

To all to whom these presents shall come, we,

- 1) Mr. / Mrs. / Ms. _____ an individual having his / her residence address at _____
(hereinafter called 'the First / Sole Holder')
- 2) Mr. / Mrs. / Ms. _____ an individual having his / her residence address at _____
(hereinafter called 'the Second Holder')
- 3) Mr. / Mrs. / Ms. _____ an individual having his / her residence address at _____
(hereinafter called 'the Third Holder')

all Indian inhabitant(s) send greetings from _____ on this ____ day of _____, 20____.


WHEREAS

I / We hold a beneficiary account # 12041500 _____ with Central Depository Services (India) Limited., through its Depository Participant, **Jainam Broking Limited**, a corporate body incorporated under The Companies Act, 1956 and having DP-ID **041500** (hereinafter referred to as 'the Depository Participant'). With SEBI under Registration No. **IN-DP-CDSL-223-2016**.

I / We am / are in investor engaged in buying and selling of securities through **Jainam Broking Limited**, a corporate body incorporated under The Companies Act, 1956 and having its registered / corporate office in Gujarat and processing office at Silvassa / Daman (hereinafter referred to as 'the stock broker') having trading / clearing membership under various segments of **Bombay Stock Exchange Limited (BSE), National Stock Exchange (NSE), National Commodity and Derivatives Exchange (NCDEX) and Multi Commodity Exchange of India (MCX)** (hereinafter referred to as 'the Stock Exchanges / Exchanges') who is a Stock Broker Registered with SEBI under registration no. **INZ000198735**.

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

 _____ 10 / 17
(Signature of First / Sole Holder)

 _____ 6 / 9
(Signature of Second Holder)

 _____ 6 / 9
(Signature of Third 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.


 _____ 11 / 17
(Signature of First / Sole Holder)

 _____ 7 / 9
(Signature of Second Holder)

 _____ 7 / 9
(Signature of Third Holder)

3. Mutual Fund transactions being executed on Stock Exchange order entry platforms.


 _____ 10 / 17
(Signature of First / Sole Holder)

 _____ 6 / 9
(Signature of Second Holder)

 _____ 6 / 9
(Signature of Third Holder)

4. Tendering shares in open offers through Stock Exchange platforms.

 _____ 11 / 17
(Signature of First / Sole Holder)

 _____ 7 / 9
(Signature of Second Holder)

 _____ 7 / 9
(Signature of Third Holder)

I / We ratify the instructions given by the aforesaid stock broker to the depository participant named hereinabove in the manner specified herein. Further this Demat Debit and Pledge Instruction is executed subject to the terms that the stock broker shall return to me/us the securities that may have been received by them erroneously or those securities that the stock broker was not entitled to receive from me/us.

I / We hereby agree and declare that all acts and deeds done by the aforesaid stock broker under this authorization shall be construed as acts and deeds done by me / us jointly as well as severally and I/we further confirm and ratify all acts and deeds that the aforesaid stock broker shall lawfully do or cause to be done by virtue of this authorization. I / We further agree and confirm that the powers and authorities conferred by this Demat Debit and Pledge Instruction shall continue until it is revoked (without notice) in writing by me / us and that the said revocation shall be effective from the date on which the revocation notice is received by the stock broker at its Corporate Of fice.

SCHEDULE 'A' (DEMAT ACCOUNT DETAILS)

Particulars	DP ID	Client ID
NSDL BSE Pool A/C	IN656083	
CDSL BSE Principal A/C	12041500	00001941
NSDL NSE Pool A/C	IN566147	
CDSL NSE Principal A/C	12041500	00352801

Particulars	DP ID	Client ID
Margin Pledge (TM / CM CMPA)	12041500	01487841
Margin Funding	12041500	01487854
CDSL NSE Early Pay-in A/C	11000011	00018450
CDSL BSE Early Pay-in A/C	11000010	00015282

Appendix-A

Electronic Contract Note (ECN) – Declaration

(Voluntary)

Date - - 2 0

To,
Jainam Broking Limited
Jainam House, New Passport Office Road,
Kargil Chowk, Piplod, Surat - 395007.

Dear Sir/Madam,

I, _____, a client with Jainam Broking Limited.
who is a member of MCX & NCDEX (Commodity Exchanges) undertake as follows:

- I am aware that the Member has to provide physical contract note in respect of all the trades placed by me unless I myself want the same in the electronic form.
- I am aware that the Member has to provide electronic contract note for my convenience on my request only.
- Though the Member is required to deliver physical contract note, I find that it is inconvenient for me to receive physical contract notes. Therefore, I am voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out / ordered by me.
- I have access to a computer and am a regular internet user, having sufficient knowledge of handling the email operations.
- My E-mail id is _____ . This has been created by me and not by someone else.

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

- I am aware that this declaration form should be in English or in any other Indian language known to me.
- I am 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. I am aware of the risk involve in dispensing with the physical contract note, and do hereby take full responsibility for the same.

Signature	x	12/16	Address	_____
Name				_____
PAN	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> P <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	UCC		

For Office Use only

Signature Verified by

Signature	_____
Date	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - 2 0 <input type="text"/> <input type="text"/>

Name	_____
Designation	_____

VARIOUS AUTHORIZATIONS

Voluntary Requirement

Date	D	D	-	M	M	-	2	0	Y	Y
------	---	---	---	---	---	---	---	---	---	---

To,
Jainam Broking Limited
Jainam House, New Passport Office Road,
Kargil Chowk, Piplod, Surat - 395007.

UCC : _____

Client ID : 12041500 _____

Dear Sir/Madam,

RUNNING ACCOUNT AUTHORIZATION

I am having a trading account with you with client code as mentioned above. In order to facilitate smoother and faster operations, I hereby agree

- a) and authorize you to maintain a running account across all the segment of all the Exchanges instead of settlement to settlement clearance of dues to me.
- b) and instruct you that no cheques be issued to me towards any credit balance in my account, unless specifically demanded by me and only to the extent of amount demanded by me
- c) and authorize you to withhold delivery due to me against any debit balance or pending sale in my account arising on account of margin or future obligations.
- d) for intra-exchange and/or inter-settlement transfer of funds and/or securities towards pay-in or pay-out of securities in the future or past settlements.
- e) and authorize you to transfer amount from '**Margin Ledger**' to '**MTM Ledger**' (routine billing and fund transaction ledger) and vice versa to fulfill margin and normal billing liability towards you in Cash Equity Derivatives, Currency Derivatives and Commodity Derivatives segment.
- f) to maintain such quantity of securities and such amount of cash credit balance as required by the applicable statues, rules, regulations, procedures or as deemed necessary or advisable by you. If you consider it necessary for your own protection, you may demand to deposit additional cash or securities to your account prior to any applicable settlement date in order to assure due performance of my open contractual commitments. If I do not provide such additional cash or securities, you shall have the right to sell any or all securities, buy any or all relevant securities which may be short in my account, cancel any or all open orders and/or close any or all of my outstanding contracts.



13/16

SETTLEMENT OF FUNDS

However with reference to SEBI circular bearing Ref : MIRSD/SE/Cir-19/2009 dated Dec 03, 2009 & various circulars issued by respective Exchanges thereafter regarding quarterly/monthly settlement, I request you to kindly note my preference for actual settlement of funds as follows.

Settlement of Funds	<input type="radio"/> Monthly	<input type="radio"/> Quarterly
---------------------	-------------------------------	---------------------------------



14/16

VARIOUS AUTHORIZATIONS

Voluntary Requirement

Kindly strike off any of the clauses, You do not wish to sign.

TELEPHONIC INSTRUCTIONS/VOICE LOGGER

As regards to placement of orders, although you have insisted on written instruction for placing/modifying/cancelling orders, considering the practical difficulties faced in complying the same, I hereby agree to telephonic instruction for order placing or order modification or order cancellation as a written request and give all the confirmations on telephone unless instructed otherwise in writing.

Further I am aware that for all such telephonic instructions between us, you have installed or may install in future voice logging systems on the telephone lines and you may record our telephonic instruction/conversations & I have or shall have no objection whatsoever in you using the said recordings to ascertain any claims or settle the disputes arising between us in any arbitration or legal proceedings and all such recordings shall be bound to both of us.

SMS FACILITY

I am aware that you, at your sole discretion, may send a SMS on my registered mobile (as mentioned in the KYC form) related to daily trade confirmations, ledger balances, margin calls or any other transactional/informative messages. On receipt of such SMS, it shall be my responsibility to intimate you in writing of any discrepancies in the same.

I am also aware that you may charge a fee (amount not exceeding ₹25/- per month) for availing this facility & I authorize you to debit the same to my ledger from time to time.

Further if there is any change in my mobile number, it shall be my responsibility to intimate the said changes to you in writing & you shall make the necessary amendments within 48 hours of receipt of such intimation.

LETTER OF AUTHORITY

I hereby appoint the following persons as mentioned below as my authorized representative to operate my above mentioned trading account on my behalf and Jainam Broking Limited is authorized to follow his/her instructions regarding my above mentioned trading account for the following purpose

- To place orders on my behalf and to receive confirmations on my behalf for order placed by him/her in the said account.
- To receive/collect contracts, bills and any other relevant documents on my behalf in the said account and take/handover all the deliveries of shares purchased/sold by or on behalf of me.

Sr. No.	Name of Authorized Person	Specimen Signature of Authorized Person
1		
2		

DEMAT CHARGES AUTHORIZATION

I am having a trading account with you as mentioned above for dealing in shares & securities. I hereby authorize you to kindly debit my aforesaid trading account for various charges due to you pursuant to the services rendered against the following demat account(s).

No.	Demat Account No.	No.	Demat Account No.
1	12041500 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	2	12041500 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

VARIOUS AUTHORIZATIONS

Voluntary Requirement

INTERNET / MOBILE BASE APPLICATIONS

I would like to avail the various internet/mobile based trading & backoffice softwares offered by you.

I am fully aware that you may charge a fee (amount not exceeding ₹ 5/- per order/trade executed) for the trades initiated through such applications & also levy a monthly charge for accessing these softwares (amount not exceeding ₹500/- per annum) & I hereby authorize you to kindly debit these charges to my ledger account from time to time.

REVOCAION OF AUTHORIZATIONS

I/We am/are fully aware that any of the aforesaid authorizations shall continue till it is revoked (without notice period) in writing by me/us & the said revocation shall be effective from the date on which the revocation notice is received by you at your corporate office.



15/16

OPTING-OUT OF BSDA FACILITIES

This is to inform you that I/we am/are aware about SEBI circular bearing Ref : CIR/MRD/DP/22/2012 dated 27th August 2012, where in a small investor can avail the BSDA facilities as mentioned therein.

However I/we do not intend to avail any such facility & although my/our demat account may fall under BSDA category now or in future, I/we do not wish to avail the said facilities.

Kindly consider this as my/our one time standing instruction for not availing the BSDA facility & in case I/we wish to avail the said facility in future, I/we shall intimate the same to you in writing.



16/16

(Signature of First / Sole Holder)



8/8

(Signature of Second Holder)



8/8

(Signature of Third Holder)

ACKNOWLEDGMENT OF KYC DOCUMENTS

Date	D	D		M	M	-	2	0	Y	Y
------	---	---	--	---	---	---	---	---	---	---

To,
Jainam Broking Limited
Jainam House, New Passport Office Road,
Kargil Chowk, Piplod, Surat - 395007.

Dear Sir/Madam,

Sub : Acknowledgement of KYC Documents

Ref : UCC # _____ Client ID : 12041500 _____

I/We hereby acknowledge receipt of the following documents

- Photostat Copy of Client Registration Form (Part-A & Part-B)
- Tariff Sheet
- Rights & Obligations
- Risk Disclosure Documents (RDD)
- Guidance Note (Do's & Don'ts)
- Company's Internal Policies & Procedures
- Photostat Copy of DP Account Opening Form
- Photostat Copy of Multiple Nomination Form
- Rights & Obligations of DP & BO
- SMART - Terms & Conditions (Annexure 2.4)
- TRUST - Terms & Conditions (Annexure 2.6)
- Photostat Copy of POA Agreement
- Photostat Copy of the Voluntary Declaration
 - Electronic Contract Note (ECN) - Declaration
 - Running Account Authorization / Settlement of Funds & Securities
 - Telephonic Instruction / Voice Logger
 - SMS Facility
 - Authority Letter
 - Demat Charges Authorization
 - Internet / Mobile Base Applications
 - Opting-Out of BSDA Facilities

(Signature of First / Sole Holder)

(Signature of Second Holder)

(Signature of Third Holder)

Date:

Undertaking

I, Mr. _____, declare that I have fully complied with the all the FEMA rules and its applicable laws. Further, I declare that I will comply with all the FEMA Rules and Applicable laws time to time in future.

Thank You,

X1 _____

X2 _____

X3 _____