

APPLICATION**F.No.****SL.No.****SAAKETA INVESTMENT SERVICES LIMITED****CIN : L74140TG1992PLC014483****CLIENT REGISTRATION FORM
NSE / BSE / CDSL**

Client Name :

Client Code :

Office Code :

B.O. ID :

PAN :

SB/AP :

| Checked by | Code Allotted by | Demat Details Entered by | UCC Upload | MAPIN Done by |
|---------------|------------------------|--------------------------------|---------------|------------------|
| | | | | |

Regd. Office: # 3-4-616/1, Narayanaguda, Hyderabad-500029**Tel.: +91 -40- 27568107****Email: cjr.saaketa@gmail.com , website : www. saaketa.com****Compliance Officer: T.Sravan Kumar, Contact: 040-66366315 E-mail : naveenachandra@rediffmail.com**

**ACCOUNT OPENING KIT
INDEX**

Annexure — 1

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VOLUNTARY DOCUMENTS

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Name of stock broker/depository participant/clearing member : **SAAKETA INVESTMENT SERVICES LIMITED**
CIN : L74140TG1992PLC014483

SEBI Registration No. and date: **INZ000179131**
CDSL: IN-DP-CDSL- 299-2005

Registered Office: **3-4-616/1, Narayanguda, Hyderabad-500029**
cjr.saaketa@gmail.com

Cleaning Member
for Derivatives Segment : **ICICI Bank Limited**
ICICI Bank Tower, Near Chakli Circle, Old Padra Road, Vadodara, Gujarat-390007
Phone No. +91-265-6722286
Compliance officer
Name : T. Sravan Kumar
Phone: 040-66366315

Managing Director
Name: T. Naveenna Chandra
Phone: 04027562182

Email : **naveenachandra@rediffmail.com**

For any grievance/dispute please contact stock broker **SAAKETA INVESTMENTS SERVICES** at the above address or email id **investorgrievances@bnrsecurities.com** and Phone no. : 040-30527777. In case not satisfied with the response, Please contact the concerned exchange(s)

| Exchange | E-mail ID | Telephone No. |
|----------|---------------------------------|----------------|
| NSE | ignse@nse.co.in | 1800220058 |
| BSE | is@bseindia.com | (022)-22728097 |
| CDSL | complaints@cdslindia.com | (022)-22723333 |

Know Your Client (KYC)
Application Form (For Individuals Only)

Please fill in ENGLISH and in BLOCK LETTERS



Place for
Intermediary Logo

SAAKETA
INVESTMENT SERVICES LIMITED

Application No. :

1. Name of Applicant (As appearing in supporting identification document).

Name

Father's/Spouse Name

2. Gender ☐ Male ☐ Female B. Marital status ☐ Single ☐ Married

C. Date of Birth

Please affix
the recent passport
size photograph and
sign across it

3. Nationality ☐ Indian ☐ Other

4. Status Please tick (✓) ☐ Resident Individual ☐ Non Resident ☐ Foreign National (Passport Copy Mandatory for NRIs & Foreign Nationals)

5. PAN Please enclose a duly attested copy of your PAN Card

Aadhaar Number, if any:

6. Proof of Identity submitted for PAN exempt cases Please Tick (✓)

☐ UID (Aadhaar) ☐ Passport ☐ Voter ID ☐ Driving Licence ☐ Others (Please see guideline 'D' overleaf)

B. Address Details (please see guidelines overleaf)

1. Address for Residence/Correspondence

City / Town / Village

State

Country

Pin Code

2. Contact Details

Tel. (Off.) (ISD) (STD)

Tel. (Res.) (ISD) (STD)

Mobile (ISD) (STD)

Fax (ISD) (STD)

E-Mail Id.

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

☐ Passport ☐ Ration Card ☐ Registered Lease/Sale Agreement of Residence ☐ Driving License ☐ Voter Identity Card ☐ *Latest Bank A/c Statement/Passbook
☐ *Latest Telephone Bill (only Land Line) ☐ *Latest Electricity Bill ☐ *Latest Gas Bill ☐ Others (Please specify)

*Not more than 3 Months old. Validity/Expiry date of proof of address submitted

4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant

City / Town / Village

State

Country

Pin Code

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

☐ Passport ☐ Ration Card ☐ Registered Lease/Sale Agreement of Residence ☐ Driving License ☐ Voter Identity Card ☐ *Latest Bank A/c Statement/Passbook
☐ *Latest Telephone Bill (only Land Line) ☐ *Latest Electricity Bill ☐ *Latest Gas Bill ☐ Others (Please specify)

*Not more than 3 Months old. Validity/Expiry date of proof of address submitted

6. Gross Annual Income Details (Please tick (✓)); Below 1Lac Below 1-5 Lac 5-10 Lac 10-25 Lac >25 Lac

7. Any other information:

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my/our 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/we are aware that I/we may be held liable for it.

Place:

Date:

SIGNATURE OF APPLICANT

FOR OFFICE USE ONLY

IPV Done ☐ on

AMC/Intermediary name OR code

☐ (Originals Verified) Self Certified Document copies received

☐ (Attested) True copies of documents received

Main Intermediary

Seal/Stamp of the intermediary should contain

Staff Name

Designation

Name of the Organization

Signature

Date

Seal/Stamp of the intermediary should contain

Staff Name

Designation

Name of the Organization

Signature

Date

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

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

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

1. PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): List of documents admissible as Proof of Address: (*Documents having an expiry date should be valid on the date of submission.)

1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale

Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.

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

D. Exemptions/clarifications to PAN

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

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FIIs, MFIs, 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.

Annexure- 2

KNOW YOUR CLIENT (KYC) APPLICATION FORM

For Individuals

PHOTOGRAPH
Please affix your
recent passport
size photograph
and sign across it

Please fill this form in ENGLISH and in BLOCK LETTERS.

* I/We request you to open in a demat & trading account in my / our name as per following details

A. IDENTITY DETAILS

1. Name of the Applicant: _____
- 2(a) Father's/ Spouse Name: _____ 2(b) Mother Name _____
3. a) Gender: Male/Female b). Marital status: Single / Married c). Date of Birth: _____ (dd/mm/yyyy)
4. a. Nationality: _____ b. Status: Resident individual/Non Resident/ Foreign National
5. a). PAN: _____ b). UID _____
6. Specify the proof of Identity submitted: _____

B. ADDRESS DETAILS

1. Residence Address _____

City/town/village: _____ Pin Code: _____ State: _____ Country _____
2. Contact Details: Tel. (Off.) _____ Tel. (Res.) _____ Mobile No: _____
Fax: _____ Email Id: _____
3. Specify the proof of address submitted for residence address: _____
4. Permanent Address (if different from above or overseas address, mandatory for Non-Resident Applicant):

City /town/village: _____ Pin Code: _____ State: _____ Country: _____

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 charges therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it.

Signature of the Applicant _____

Date: _____ (dd/mm/yyyy)

Type of Account (Please tick whichever is applicable)

| Status | Sub - Status |
|---|---|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual-Director <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual HUF /AOP <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Others (specify) <input type="checkbox"/> Individual Margin Trading A/C (Mantra) |
| <input type="checkbox"/> NRI | <input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> NRI - Depository Receipts <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI Non-Repatriable Promoter <input type="checkbox"/> Others (specify) |
| <input type="checkbox"/> Foreign National | <input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National-Depository Receipts <input type="checkbox"/> Others (specify) |

C
D
S
L

| | | | | | | | | | | | | |
|---------------------------|---|------|---|---|---|---|---|---|-----------|--|--|--|
| DP Internal Reference No. | | Date | | | | | | | | | | |
| DP ID | 1 | 2 | 0 | 3 | 9 | 1 | 0 | 0 | Client ID | | | |

(The Personal Information required to register for DP has already been provided in the application. The additional information required is as under):

Second Applicant Details:

Name: _____

Father/ Husband Name : _____ Date of Birth _____

Permanent Address: _____

Pin Code: _____

Telephone: _____ Fax: _____ Mobile: _____ SMS Facility: ☐ Yes ☐ NoOccupation: _____ Gender : ☐ Male ☐ Female

PAN _____ UID: _____

Gross Annual Income Details (please specify): Income Range per annum: Below ☐ 1 Lac ☐ 1-5 Lac ☐ 5-10Lac☐ 10-25 Lac ☐ >25 Lacs**Third Applicant Details:**

Name: _____

Father / Husband Name: _____ Date of Birth _____

Permanent Address: _____

Pin Code: _____

Telephone: _____ Fax: _____ Mobile: _____ SMS Facility : ☐ Yes ☐ NoOccupation: _____ Gender : ☐ Male ☐ Female

PAN _____ UID: _____

Gross Annual Income Details (please specify): Income Range per annum: Below ☐ 1 Lac ☐ 1-5 Lac ☐ 5-10 Lac☐ 10-25 Lac ☐ >25 Lacs**Details of Guardian**

Name: _____ Relationship with Applicant _____

Father / Husband Name: _____ Date of Birth _____

Permanent Address: _____

Pin Code: _____

Telephone: _____ Fax: _____ Mobile: _____ SMS Facility : ☐ Yes ☐ NoOccupation : _____ Gender : ☐ Male ☐ Female

PAN: _____ E-mail : _____

Gross Annual Income Details (please specify): Income Range per annum: Below ☐ 1 Lac ☐ 1-5 Lac ☐ 5-10 Lac☐ 10-25 Lac ☐ >25 Lacs**For NRIs**

Foreign Address: _____

Pin Code _____

I/We have received and read the Rights and Obligations document 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 application. I/We agree and undertake to intimate the DP any change(s) in the details / particulars mentioned by me / us in this from. I/We further agree that false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

C
D
S
L

Please affix your
recent passport
size photograph
duly signed
across




Please affix your
recent passport
size photograph
duly signed
across

Second Holder Sign across It

Third Holder Sign across It

(Signature Card)

| | | | | | | | | | | | | | | | | | | | |
|--------------|----------|----------|----------|----------|----------|----------|----------|----------|------------------|--|--|--|--|--|--|--|--|--|--|
| DP ID | 1 | 2 | 0 | 3 | 9 | 1 | 0 | 0 | Client ID | | | | | | | | | | |
|--------------|----------|----------|----------|----------|----------|----------|----------|----------|------------------|--|--|--|--|--|--|--|--|--|--|

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

| | | |
|--|--|--|
| I / We Instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes') | | (Automatic Credit) <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I / We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end (If not marked, the default option would be 'NO') | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Account Statement Requirement | <input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly | |
| I / We request you to send Electronic Transaction-cum Holding Statement at the email ID | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I / We would like to share the email ID with RTA | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I / We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical) | | |

| | |
|---|--|
| I / We wish to receive dividend / interest directly in to my bank account as given below through ECS (If not marked, the default option would be 'Yes') (ECS is mandatory for locations notified by SEBI from time to time) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|



Signature of Client

FOR OFFICE USE ONLY

☐ (Originals Verified) True Copies of Documents receive

☐ (Self-Attested) Self Certified Document copies received

For SAAKETA INVESTMENT SERVICES LIMITED

Authorised Signatory

Date

Seal/Stamp of the Intermediary

KNOW YOUR CLIENT (KYC) APPLICATION FORM**Please fill this form in ENGLISH and in BLOCK LETTERS.****For Non-Individuals**

* I/We request you to open in a demat & trading account in my / our name as per following details

A. IDENTITY DETAILS

1. Name of the Applicant: _____
2. Date of Incorporation: _____ (dd/mm/yyyy) & Place of incorporation: _____
3. Date of commencement of business: _____ (dd/mm/yyyy)
4. a. PAN: _____ b. Registration No. (E.g. CIN): _____
5. (a) Sole / First Holder's Name _____ Search Name _____
PAN _____ UID _____
- (b) Second Holder's Name _____
PAN _____ UID _____
- (c) Third Holder's Name _____
PAN _____ UID _____

*** Name:** _____

* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of natural persons, the name of the Firm Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc. should be mentioned above.

6. Status (please tick any one):

Private limited co./Public Ltd. Co./Body Corporate/Partnership/Trust/Charities/NGO's/ FI/F11/HUF/AOP/Bank/ Government Body/Non-Government Organization/Defenses Establishment/B01/ Society/LLP/ Others (please Specify)

B. ADDRESS DETAILS

1. Address for correspondence: _____

City/town/village: _____ Pin Code: _____ State: _____ Country: _____
2. Contact Details: Tel. (Off.) _____ Tel. (Res.) _____ Mobile No.: _____
3. Specify the proof of address submitted for correspondence address: _____
4. Registered Address (if different from above) _____
City /town/village: _____ Pin Code: _____ State: _____ Country: _____

C. OTHER DETAILS

1. Name, PAN, residential address and photographs of Promoters/Partners/Karta/Trustees and whole time directors _____
2. a) Name DIN of whole time directors: _____
b) Aadhaar number of promoters / Partners/ Karta: _____
3. **Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta /Trustees/whole time directors:** ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP)
4. **Any other Information:** _____

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

Name & Signature of the Authorised Signatory _____

Date: _____ (dd/mm/yyyy)

FOR OFFICE USE ONLY

Originals verified and Self-Attested Document copies received

Name _____

Signature of the Authorised Signatory _____

Date _____

Seal/Stamp of the intermediary _____

| | | | | | | | | | | | |
|---------------------------|---|------|---|---|---|---|---|---|-----------|--|--|
| DP Internal Reference No. | | Date | | | | | | | | | |
| DP ID | 1 | 2 | 0 | 3 | 9 | 1 | 0 | 0 | Client ID | | |




Type of Account (Please tick whichever is applicable)

| Status | | Sub-Status |
|---|--|-------------------------------|
| <input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Trust <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify) | | To be filled by the DP |
| Date of Incorporation | | |
| SEBI Registration NO. (if Applicable) | | SEBI Registration Date |
| ROC Registration NO. (if Applicable) | | ROC Registration Date |
| RBI Registration NO. (if Applicable) | | RBI Approval Date |
| Nationality <input type="checkbox"/> Indian <input type="checkbox"/> Other (Specify) | | |

I/We have received and read the Rights and Obligations document 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 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 account liable for termination and suitable action.

| | |
|--|--|
| I / We Instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes') | (Automatic Credit) <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I / We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end (If not marked, the default option would be 'NO') | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Account Statement Requirement | <input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly |
| I / We request you to send Electronic Transaction-cum Holding Statement at the email ID | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I / We would like to share the email ID with RTA | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I / We would like to receive Annual Report (Tick the applicable box. <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic the III Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both If not marked the default option would be in Physical) | |

| | |
|---|--|
| I / We wish to receive dividend / interest directly in to my bank account as given below through ECS (If not marked, the default option would be 'Yes') (ECS is mandatory for locations notified by SEBI from time to time) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|

| | First / Sole Authorized Signatory | Second Authorised Signatory | Third Authorised Signatory |
|--------------------------|---|--|---|
| Name | | | |
| Designation | | | |
| Passport Size Photograph | Please affix your recent passport size photograph duly signed across <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px; text-align: center;">Authorise Sign - I</div> | Please affix your recent passport size photograph duly signed across <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px; text-align: center;">Authorise Sign - II</div> | Please affix your recent passport size photograph duly signed across <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px; text-align: center;">Authorise Sign - III</div> |
| DP ID | | Client ID | |
| | First / Sole Authorized Signatory | Second Authorised Signatory | Third Authorised Signatory |
| Name | | | |
| Specimen Signature |  |  |  |

OFFICE USE ONLY

☐ (Originals Verified) True Copies of Documents received ☐ (Self-Attested) Self Certified Document copies received

For SAAKETA INVESTMENT SERVICES LIMITED

Authorised Signatory Date

Seal/Stamp of the intermediary

Date:

INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

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/P10 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 FIUsub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN

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 NonIndividuals, additional documents to be obtained from non-Individuals, over & above the POI & POA, as mentioned below:

| Type of entity | Documentary requirements |
|--|---|
| 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 Banks/Institutional Investors | 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. 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. True copy of Society Rules and Bye Laws certified by the Chairman/Secretary. |

TRADING ACCOUNT RELATED DETAILS

Annexure – 3

A) BANK ACCOUNT DETAILS

For Individuals & Non-individuals

| Bank Name | Branch Address | Bank Account No. | Account Type H | MICR No | IFSC Code |
|-----------|----------------|------------------|----------------|---------|-----------|
| | | | | | |









● Please provide Cancelled Cheque leaf for MICR & IFSC Code * Saving/Current, Others-In- case of NRI/NRE/NRO

B) DEPOSITORY ACCOUNT DETAILS

| Depository Participant Name | Depository Name (NSDL/CDSL) | Beneficiary Name | DP ID | Beneficiary ID (BO ID) |
|-----------------------------|-----------------------------|------------------|-------|------------------------|
| | | | | |

C) TRADING PREFERENCES (Sign all if required)

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

| | Cash Segments | F&O Segments | CD Segments | COMMODITIES |
|-----|---|---|--|---|
| NSE |  |  |  |  |
| BSE |  |  |  |  |

If, in future, the client wants to trade on any new segment/ new exchange, separate authorization / letter should be taken from the client by the stock broker

D) 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: _____

E) DEALINGS THROUGH SUB - BROKERS AND OTHER STOCK BROKERS

• If client is dealing through the sub-broker, provide the following details:

| | NSE | BSE |
|---------------------------|-----|-----|
| Sub-broker's Name | | |
| Registered office address | | |
| SEBI Registration Number | | |
| Phone: | | |
| FAX: | | |
| Website: | | |

- Whether dealing with any other stock broker/sub-broker (in case dealing with multiple stock brokers/sub-brokers, provide details of all)
Name of stock broker: _____ Name of Sub-Broker, if any _____
Client Code: _____ Exchange: _____
Details of disputes/dues pending from/to such stock broker/sub- broker: _____

F. ADDITIONAL DETAILS

- Whether you wish to receive ☐ Physical Contract note or ☐ Electronic Contract Note (ECN)
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: _____
- In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorized to deal in securities on behalf of company/firm/others: (Attach Annexure) _____
- Any other information: _____

G) INTRODUCER DETAILS (optional)

Name of the Introducer: _____

Status of the Introducer: Sub-broker/Remisier/Authorized Person/Existing Client/Others, please specify _____

Address and phone no. of the Introducer: _____

Signature of the Introducer: _____

H) NOMINATION DETAILS (for individuals only)☐ **I/We wish to nominate**☐ **I/We do not wish to nominate**

Name of the Nominee: _____ Relationship with the Nominee: _____

PAN of Nominee: _____ Date of Birth of Nominee: _____

Address and phone no. of the Nominee: _____

If Nominee is a minor, details of guardian:

Name of guardian: _____ Address and phone no. of Guardian: _____

Signature of guardian: _____

WITNESSES (Only applicable in case the account holder has made nomination)

Name: _____

Signature: _____

Address: _____

Name: _____

Signature: _____

Address: _____

I) OTHER DETAILS**1. Gross Annual Income Details (please specify):** Income Range per annumUpto ☐ 1 Lac ☐ 1-5 Lac ☐ 5-10 Lac☐ 10-25 Lac ☐ >25 Lacs or **Net-worth as on** (date) _____ (Net worth should not be older than 1 year)**2. Occupation (please tick any one and give brief details):** ☐ Private Sector ☐ Public Sector ☐ Government Service☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ House Wife ☐ Student☐ Others _____**3. Please tick, if applicable:** ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP)☐ Not a (PEP)**4. Education Qualifications:** ☐ Graduate ☐ Post Graduate ☐ Professional ☐ other**5. Welcome Kit :** ☐ Digital ☐ Physical**6. Any other information:** _____**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 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 am that I/we may be held liable for it.
- I/We confirm having read/been explained and understood the contents of the tariff sheet and all voluntary/non-mandatory documents.
- I/We further confirm having made understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document' and Do's and Don't. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that standard set of documents has been displayed for Information on Member's designated website, if any.
- I would like to receive following documents in ☐ Physical or ☐ Digital mode through on my e-mail ID mentioned in the form. Rights & Obligation, Risk Disclosure documents & Do's & Don't's.

Place: _____

Date: _____



Signature of Client (all) Authorized Signatory (ies)

FOR OFFICE USE ONLY

UCC Code allotted to the Client.....

| | Documents verified with original | Client Interviewed by | In person Verification done by |
|-----------------------------|----------------------------------|-----------------------|--------------------------------|
| Name Employee | | | |
| Employee Code | | | |
| Designation of the Employee | | | |
| Date | | | |
| Signature | | | |

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), RDD 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', tariff sheet and all the nonmandatory documents would be duly intimated to the clients. We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.

For SAAKETA INVESTMENT SERVICES LIMITED**Authorized Signatory**

Date :

Seal / Stamp of the Intermediary

Terms and Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL
(SMS Alerts will be sent by CDSL to BOs for all debits)

| SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4 | Mobile No. +91 [(Mandatory, if you are giving Power of Attorney (POA)) (if POA is not granted & you do not wish to avail of this facility, cancel this option) | | CDSL | | | | | | | | | | | | |
|--|--|-------------------------------|-------------|------------------------|----------------------|-------------------------------|--|--|--|--|--|--|--|--|--|
| Transactions Using Secured Texting Facility (TRUST). Refer to Terms & Conditions Annexure - 2.6 | I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I have read and understood the Terms & Conditions prescribed by CDSL for the same. <div style="display: flex; align-items: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> I/We wish to register the following clearing member Ids under my/our below mentioned BO ID registered for TRUST <table border="1" style="width: 100%;"> <thead> <tr> <th>Stock Exchange Name/ID</th> <th>Clearing Member Name</th> <th>Clearing Member ID (Optional)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> | | | Stock Exchange Name/ID | Clearing Member Name | Clearing Member ID (Optional) | | | | | | | | | |
| Stock Exchange Name/ID | Clearing Member Name | Clearing Member ID (Optional) | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| Easi | To register for Easi, please visit our website www.cdslindia.com Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online. | | | | | | | | | | | | | | |

Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

- "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
- "DP" means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
- "BO" means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
- SMS means "Short Messaging Service"
- "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
- "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
- "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

- The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those account holders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
- The service is currently available to the BOs who are residing in India.
- The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
- The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

- The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
- The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
- The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
- The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.
- The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
- The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.
- The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
- The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
- If the BO finds that the information such as mobile number etc., has been changed with out proper authorization, the BO should immediately inform the DP in writing.

Fees:

Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository gives no warranty with respect to the quality of the service provided by the service provider. The Depository will not be liable for any unauthorized use or access to the information and/ or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by any third person.

Liability and Indemnity:

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

Amendments:

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.



| |
|--|
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|--|

Amendments:

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

Governing Law and Jurisdiction:

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in Mumbai.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.

I/We have read and understood the terms and conditions mentioned above and agree to abide by them and any amendments thereto made by the depository from time to time. I/ we further undertake to pay fee/ charges as may be levied by the depository from time to time.

I / We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the BOs would be required to take up the matter with their DP.

I/We am/ are aware that mere acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service.

I/We provide the following information for the purpose of REGISTRATION / MODIFICATION (Please cancel out what is not applicable).

BOLD

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

(Please write your 8 digit DPID)
(Please write your 8 digit Client ID)

Sole / First Holder's Name

Second Holder's Name

Third Holder's Name

Mobile Number on which
messages are to be sent

[illegible]

The mobile number is registered in the name of:

Email ID:

(Please write only ONE valid email ID on which communication, if any, is to be sent)


15

2nd

3rd

Place: _____

Date: _____



NOMINATION FORM

To,
SAAKETA INVESTMENT SERVICES LIMITED
3-4-616/1, Narayanguda, Hyderabad - 500 029
Dear Sir / Madam

C
D
S
L

I/We the sole holder / Joint holders / Guardian (in case of minor) hereby declare that:

- ☐ I/We do not wish to nominate any one for this demat account.
[Strike out what is not applicable.] [Signatures of all account holders should be obtained on this form].
- ☐ I/We nominate the following person/s who is entitled to receive security balances lying in my/our account, particulars whereof are given below, in the event of the death of the Sole holder or the death of all the Joint Holders.




| BO Account Details | | | | | | | | | |
|--|--|--------------------------|--------------------------|--------------------------|-----------|--|--|--|--|
| BP ID | | | | | Client ID | | | | |
| Name of the Sole / First Holder | | | | | | | | | |
| Name of the Second Holder | | | | | | | | | |
| Name of the Third Holder | | | | | | | | | |
| Nomination Details | | Nominee 1 | Nominee2 | Nominee 3 | | | | | |
| Nominee Name : | | | | | | | | | |
| * First Name: | | | | | | | | | |
| Middle Name | | | | | | | | | |
| * Last Name | | | | | | | | | |
| *Address | | | | | | | | | |
| *City : | | | | | | | | | |
| *State : | | | | | | | | | |
| *Pin : | | | | | | | | | |
| *Country : | | | | | | | | | |
| Telephone No : | | | | | | | | | |
| Fax No: | | | | | | | | | |
| PAN No: | | | | | | | | | |
| UID | | | | | | | | | |
| Email ID : | | | | | | | | | |
| *Relationship with BO: | | | | | | | | | |
| Date of Birth (Mandatory if Nominee is a Minor) | | | | | | | | | |
| Name of the Guardian of Nominee (If the Nominee is Minor) *First Name: Middle Name * Last Name | | | | | | | | | |
| *Address of the Guardian of Nominee | | | | | | | | | |
| *City : | | | | | | | | | |
| *State : | | | | | | | | | |
| *Pin : | | | | | | | | | |
| Age | | | | | | | | | |
| Telephone No : | | | | | | | | | |
| Fax No: | | | | | | | | | |
| Email ID | | | | | | | | | |
| * Relationship of Guardian with the Nominee | | | | | | | | | |
| * Percentage of allocation of securities : | | | | | | | | | |
| * Residual Securities (please tick any one nominee. If tick not marked default will be first nominee) | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |

Note: Residual securities: incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any

***Marked is Mandatory filed**

This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.

Place: _____ Date: _____

| | First / Solo Holder | Second JointHolder | Third Joint Holder |
|-----------|---|---|---|
| Name | | | |
| Signature |  |  |  |

Note : One witnesses shall attest signature(s) / Thumb impression(s).

| WITNESS | | | |
|----------------------|--|--|--|
| Name of Witness | | | |
| Address of Witness | | | |
| Signature of Witness | | | |

(To be filled by DP)

Nomination Form accepted and registered wide Registration No. _____ Dated _____

**For Depository Participant
(Authorised Signatory)**

OPTION FORM FOR ISSUE OF DIS BOOKLETDate

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

| | | | | | | | | | |
|--------------------------------------|--|------------------|--|--|--|--|--|--|--|
| DP ID | | Client ID | | | | | | | |
| Name | | | | | | | | | |
| Address | | | | | | | | | |
| Nomination in favor of First Nominee | | | | | | | | | |

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To,
SAAKETA INVESTMENT SERVICES LIMITED
 Regd. Office : # 3-4-616/1, Narayanguda, Hyderabad - 500 029




Dear Sir / Madam,

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

☐ OPTION 1:

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL account though I / we have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager.




Yours faithfully,

| | First / Solo Holder | Second Joint Holder | Third Joint Holder |
|-----------|---|---|---|
| Name | | | |
| Signature |  |  |  |

=====

OR**☐ OPTION 2:**

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

| | First / Solo Holder | Second Joint Holder | Third Joint Holder |
|-----------|---|---|---|
| Name | | | |
| Signature |  |  |  |

Terms And Conditions for availing Transaction Using Secured Texting (TRUST) Service offered by CDSL

1. Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

- i. "Depository" means Central Depository Services (India) Limited (CDSL)
 - ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.
 - iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
 - iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
 - v. "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time. Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository.
 3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depository shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure of the service provider or network.
 4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
 5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
 6. The BO shall be responsible for submitting response to the 'Responsive SMS' within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for deregistration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
 7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
 8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.
 9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP.
 10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.
 11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
 12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP.



13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.

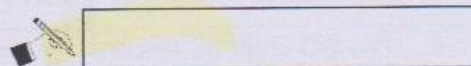
17. Indemnity:

In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

18. Disclaimer:

Depository shall be absolved of any liability in case:-

- a. There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
- b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such service provider.
- c. There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility..



POLICIES & PROCEDURE

a) Policy for Penny Stock

A stock that trades at a relatively low price and market capitalization. These types of stocks are generally considered to be highly speculative and high risk because of their lack of liquidity, large bid-ask spreads, small capitalization and limited following and disclosure. Depend on the market condition and RMS policy of the company RMS reserve the right to refuse to provide the limit in Penny stocks and losses if any on account of such refusal shall be borne by client only.

b) Setting up client's exposure limits

The stock broker may from time to time impose and vary limits on the orders that the client can place through the stock broker's trading system (including exposure limits, turnover limits, limits as to the number, value and/or kind of securities in respect of which orders can be placed etc.). The client is aware and agrees that the stock broker may need to vary or reduce the limits or impose new limits urgently on the basis of the stockbroker's risk perception and other factors considered relevant by the stock broker including but not limited to limits on account of exchange/SEBI directions/limits (such as broker level/market level limits in security specific/volume specific exposures etc.), and the stock broker may be unable to inform the client of such variation, reduction or imposition in advance. The client agrees that the stock broker shall not be responsible for such variation, reduction or imposition or the client's inability to route any order through the stock broker's trading system on account of any such variation, reduction or imposition of limits. The client further agrees that the stock broker may at any time, at its sole discretion and without prior notice, prohibit or restrict the client's ability to place orders or trade in securities through the stock broker, or it may subject any order placed by the client to a review before its entry into the trading systems any may refuse to execute/allow execution of orders due to but not limited to the reason of lack of margin/securities or the order being outside the limits set by stock broker/exchange/SEBI and any other reasons which the stock broker may deem appropriate in the circumstances. The client agrees that the losses, if any on account of such refusal or due to delay caused by such review, shall be borne exclusively by the client alone. We have margin based RMS system. Total deposits of the clients are uploaded in the system and client may take exposure on the basis of margin applicable for respective security as per VAR based margining system of the stock exchange and/or margin defined by RMS based on their risk perception. Client may take benefit of "credit for sale" i.e. benefit of share held as margin by selling the same by selecting Delivery option through order entry window on the trading platform, the value of share sold will be added with the value of deposit and on the basis of that client may take fresh exposure. In case of exposure taken on the basis of shares margin the payment is required to be made before the exchange pay in date otherwise it will be liable to square off after the pay in time or any time due to shortage of margin.

c) Applicable brokerage rate:

Brokerage will be charged within the limits prescribed by SEBI/Exchange.

d) Imposition of penalty/delayed payment charges

Clients will be liable to pay late pay in/delayed payment charges for non making payment of their payin/margin obligation on time as per the exchange requirement/ schedule at the rate upto 2% per month. The client agrees that the stock broker may

impose fines / penalties for any orders / trades / deals / actions of the client which are Client contrary to this agreement / rules / regulations / bye laws of the exchange or any other law for the time being in force, at such rates and in such form as it may deem fit. Further where the stock broker has to pay any fine or bear any punishment from any authority in connection with / as a consequence of / in relation to any of the orders / trades / deals / actions of the client, the same shall be borne by the client.

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

Without prejudice to the stock brokers other right (Including the right to refer the matter to arbitration), the stock broker shall be entitled to liquidate/close out all or any of the clients position without giving notice to the client for non payment of margins or other amounts including the pay in obligation, outstanding debts etc and adjust the proceeds of such liquidation/close out, if any, against the clients liabilities/ obligations.

The client shall ensure timely availability of funds/securities in form and manner at designated time and in designated bank and depository account(s), for meeting his/her/its pay in obligation of funds and securities. Any and all losses and financial charges on account of such liquidations/ closing out shall be charged to & born by the client. In cases of securities lying in margin account/client beneficiary account and having corporate actions like Bonus, Stock split, Right issue etc, for margin or other purpose the benefit of shares due to received under Bonus, Stock split, Right issue etc will be given when the shares is actually received in the stock broker designated demat account. In case the payment of the margin / security is made by the client through a bank instrument, the stock broker shall bear liberty to give the benefit/credit for the same only on the realization of the funds from the said bank instrument etc, at the absolute discretion of the stock broker. Where the margin / security is made available by way of securities or any other property, the stockbroker is empowered to decline its acceptance as margin / security &/or to accept it at such reduced value as the stock broker may deem fit by applying haircuts or by valuing it by marking it to market or by any other method as the stock broker may deem fit in its absolute discretion.

The stock broker has the right but not the obligation, to cancel all pending orders and to sell/close/liquidate all open positions/securities/shares at the pre-defined square off time or when Mark to Market (M-T-M) percentage reaches or crosses stipulated margin percentage, whichever is earlier. The stock broker will have sole discretion to decide referred stipulated margin percentage depending upon the market condition. In the event of such square off, the client agrees to bear all the losses based on actual executed prices, the client shall also be solely liable for all and any penalties and charges levied by the exchange(s).

f) Shortages in obligations arising out of internal netting of trades

Stock broker shall not be obliged to deliver any securities or pay any money to the client unless and until the same has been received by the stock broker from the exchange, the clearing corporation / clearing house or other company or entity liable to make the payment and the client has fulfilled his/her/its obligations first. The policy and procedure for settlement of shortages in obligations arising out of internal netting of trades is asunder:



- a) The Short delivering client is debited by an amount equivalent to closing price of three days succeeding the date of trade. The same amount shall be credited to the account of client who has to receive the shares..

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

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

h) Temporarily suspending or closing a client's account at the client's request

On the request of the client in writing, the client account can be suspended temporarily and same can be activated on the written request of the client only. During the period client account is suspended, the market transaction in the client account will be prohibited. However client shares/ ledger balance settlement can take place. On the request of the client in writing, the client account can be closed provided the client account is settled. If the client wants to reopen the account in that case client has to again complete the KYC requirement.

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

- (i) If the action of the client are prima facie illegal / improper or such as to manipulate the price of any securities or disturb the normal/proper functioning of securities or disturb the normal/proper functioning of the market, either alone or in conjunction with others.
- (ii) If there is any commencement of a legal process against the client under any law in force;
- (iii) On the death/lunacy or other disability of the Client;
- (iv) If the client being a partnership firm, has any steps taken by the Client and/or its partners for dissolution of the partnership;
- (v) If the Client suffers any adverse material change in his/her/its financial position or defaults in any other agreement with the Stock broker;
- (vi) If there is reasonable apprehension that the Client is unable to pay its debts or the Client has admitted its inability to pay its debts, as they become payable; (vii) If the Client is in breach of any term, condition or covenant of this Agreement;

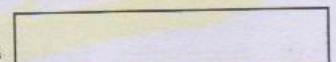
- (vii) If the Client has made any material misrepresentation of facts, including (without limitation) in relation to the Security;
- (viii) If a receiver, administrator or liquidator has been appointed or allowed to be appointed of all or any part of the undertaking of the Client;
- (ix) If the Client have taken or suffered to be taken any action for its reorganization, liquidation or dissolution;
- (x) If the Client has voluntarily or compulsorily become the subject of proceedings under any bankruptcy or insolvency law or being a company, goes into liquidation or has a receiver appointed in respect of its assets or refers itself to the Board for Industrial and Financial Reconstruction or under any other law providing protection as a relief undertaking;
- (xi) If any covenant or warranty of the Client is incorrect or untrue in any material respect;

Inactive Client account: - Client account will be considered as inactive if the client does not trade for period of one year. Calculation will be done at the beginning of every month and those clients who have not traded even a single time will be considered as inactive, the shares/credit ledger balance if any will be transferred to the client within one week of the identifying the client as inactive. The client has to make written request for reactivation of their account. Trading in Exchange is in Electronic Mode, based on VSAT, leased line, ISDN, Modem and VPN, combination of technologies and computer systems to place and route orders. I/we understand that there exists a possibility of communication failure or system problems or slow or delayed response from system or trading halt or any breakdown in our back office/front end system, or any such other problems/glitch whereby not being able to establish access to the trading system/network, which may be beyond your control and may result in delay in processing or not processing buy or sell Orders either in part or in full. I/We shall be fully liable and responsible for any such problem/fault.

Client Acceptance of Policies and Procedures stated here in above:

I/We have fully understood the same and do hereby sign the same and agree not to call into question the validity, enforceability and applicability of any provision/clauses this document any circumstances what so ever. These Policies and Procedures may be amended / changed unilaterally by the broker, provided the change is informed to me / us with through any one or more means or methods. I/we agree never to challenge the same on any grounds including delayed receipt / non receipt or any other reasons whatsoever. These Policies and Procedures shall always be read always be read along with the agreement and shall be compulsorily referred to while deciding any dispute / difference or claim between me / us and stock broker before any court of law / judicial / adjudicating authority including arbitrator/ mediator etc.

Client Signature:



SAAKETA INVESTMENT SERVICES LIMITED

DEPOSITORY PARTICIPANT OF CENTRAL DEPOSITORY SERVICES (I) LTD.

Reg. Office: 3-4-616/1, 2nd Floor, Narayanaguda, Hyderabad-500029

Phone No: 66775678, Fax: 27562182

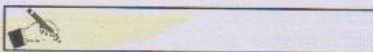
DPID: 12039100 :: Sebi Reg. No. IN-DP-CDSL-299-2005

| SL NO. | Particulars | SCHEME-A Small Investor | SCHEME -B Active Investor | SCHEME -D General |
|--------|--|---|---|---|
| 1 | A/c Opening | Free | Free | Free |
| 2 | Power of attorney Charges | Rs. 50/- | Rs. 50/- | Rs. 50/- |
| 3 | Account Maintenance | Rs.300/- | Rs.1,000/- | Rs.300/- |
| 4 | Purchase Per Transaction | Free | Free | Free |
| 5 | Sale Per Transaction | CDSL Charges + Rs. 5/- | CDSL Charges + Rs. 2/- | CDSL Charges + Rs. 10/- |
| 6 | Instruction Failure | Rs. 5/- | Rs. 5/- | Rs. 10/- |
| 7 | Custody Charges DEMATERIALISATION | Free | Free | Free |
| 8 | Defacing -Per Certificate | Rs. 3/- | Rs. 3/- | Rs. 3/- |
| 9 | Courier -Per ISIN | Rs. 30/- or Courier charges whichever is more | Rs. 25/- or Courier charges whichever is more | Rs. 25/- or Courier charges whichever is more |
| 10 | Rejection | Rs. 30/- or Courier charges whichever is more | Rs. 25/- or Courier charges whichever is more | Rs. 25/- or Courier charges whichever is more |
| 11 | Remat PLEDGE -PER ISIN-TO PLEDDGOR | Rs. 10/- + Courier Charges | Rs. 10/- + Courier Charges | Rs. 10/- + Courier Charges |
| 12 | Creation | Rs. 17/- | Rs. 17/- | Rs. 22/- |
| 13 | Closure | Rs. 17/- | Rs. 17/- | Rs. 22/- |
| 14 | Invocation PLEDGE -PER ISIN-TO PLEDDGOR | Rs. 17/- | Rs. 17/- | Rs. 22/- |
| 15 | Confirmation | Rs. 5/- | Rs. 5/- | Rs. 10/- |
| 16 | Closure confirmation | Rs. 5/- | Rs. 5/- | Rs. 10/- |
| 17 | Invocation | Rs. 5/- | Rs. 5/- | Rs. 10/- |

- CDSL charges are 0.01% subject to a Minimum of Rs. 5/- and Maximum of Rs. 12/-
- Rs. 500/- Per annum will be charged for corporate accounts as charges by CDSL
- Stationery will be charged at cost.
- Postal Charges extra
- Billing will be done on Monthly basis
- Statement of Transactions will be sent to A/c holders under SCHEME-on Monthly basis at end of every month and to A/c holder under SCHEME – B on weekly basis on every Monthly subject to transactions if any.
- BO has to deposit Rs. 500/- for SCHEME –A and Rs. 1,000/- for SCHEME –B if balance fall below Rs. 100/- towards future transaction charges. Services will be suspended if same reduce to Rs.1/-
- Accounts under SCHEME –C has to pay for the services upfront.
- Rs. 2/- per page will be charged for extra statement / detailed bills.
- Interest on outstanding amount will be 15% Per annum.
- Charge of opted SCHEME will be done only after one year on written request by BO.
- GST will be applicable at prescribed rate on DP markup

Schem Opted _____

Signature of Bo(s) _____



SAAKETA INVESTMENT SERVICES LIMITED

TARIFF SHEET

(in%)

| Sl.No. | Description | | | | | |
|--------|-----------------------|--------|---------|---------------------------|--------------------------------------|-----------|
| 1. | Brokerage @ | Equity | Futures | Options % or flat rate | CDS (currency Derivative segment) | Uniform % |
| | Delivery / CF | | | | | |
| | Delivery / CF-Minimum | | | | | |
| | Intraday | | | | | |
| | Intraday/ Minimum | | | | | |
| | Below par scrips # | | | | | |
| | Z, T2T scrips # | | | | | |
| 2. | Transaction charges | | Future | Options | | |
| 3. | SEBI Charges | | | | | |
| 4. | STT | | | | | |
| 5. | Service Tax | | | | | 10.30% |
| 6. | Stamp duty | | | | | |

Note :

1. @ Brokerage charges may vary from client to client which is as mutually agreed between the relevant client and Saaketa Consultants Limited. In case the brokerage amount levied is less than Rs. 25 per contract note per segment of an exchange, then the sum of brokerage levied plus 'handling charges' levied shall be equal to Rs.25. The 'handling charges' as calculated above are levied in order to recover the costs of various types of example incurred by the Brokerage House for servicing the clientele. The service tax as applicable is also levied on the 'handling charges'.
2. *percentage of fixed/ Minimum brokerage may be subject to change from time to time, with intimation to clients.
3. STT, stamp duty, service tax, Transaction charges, SEBI Turnover charges are subject to change from time to time.
4. Sebi Turnover charges 0.0001%, IPF, Clearing Charges & Service Tax are included in Transaction charges.
5. \$ Stamp duty as prevailing in AP state and in other cases as prevailing in the concerned state.
6. # For below par scrips, brokerage as agreed with the client or as allowed by the Exchanges.
7. * STT for sale of Options in securities, where option is exercised. (Purchaser)

Brokerage code: |



Signature of the Applicant, (Client)

Voluntary

CLASSIFICATION OF CLIENT RISK FACT

Letter of Authority / PRO Trading Disclosure

To,

Date:


SAAKETA INVESTMENT SERVICES LIMITED

Sir,

Sub:- Letter of Authority / PRO Trading Disclosure

I/we are dealing in securities with you at NSE/BSE in cash, derivatives and currency segment and in order to facilitate ease of operations, I/we authorize you as under:

1. I/we authorize you to set off outstanding in any of our accounts against credits available or arising in any other accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the exchange or in any other exchanges and/or against the value of cash margin or collateral shares provided to you by us.
2. I/we hereby authorize you to keep all the securities which we give you in margin including the payout of securities received by us for meeting margin / other obligation in stock exchange in whatever manner which may include pledging of shares in favour of bank and / or taking loan against the same of meeting margin / pay-in obligation on our behalf or for giving the same as margin to the stock exchange or otherwise.
3. I/we will inform you the change of my/our e-mail, if any, in future either by regd.post or through physically.
4. Trading of all exchanges is in electronic mode, based on VSAT, leased line, ISDN, Modem and VPN, combination of technologies and computer systems to place and route orders. We understand that there exists a possibility of communication failure or system problems or slow or delayed response from system or trading halt, of any such other problem/glitch whereby not being able to establish access to the trading system/network, which may be beyond control and may result in delay in processing or note processing buy or sell orders either in part or in full. I/we agree that I/we shall be fully liable and responsible for any such problems / fault.
5. I/we confirm that I/we will never sublet the trading terminal on any term of connectivity, from my/our place to any other place without your prior approval.
6. I/we am/are agreeable for inter-settlement transfer of securities towards settlement. I/we request you to settle my fund and securities account once in every calendar quarter or once in a calendar month or such other higher period as allowed by SEBI / Stock exchange time to time except the funds given towards collaterals/margin in form of Bank guarantee and/or fixed deposit receipt.
7. All fines/penalties and charges levied upon you due to my acts/deeds or transactions may be recovered by you from my account.
8. I/we have a trading as well as depository relationship with M/s SAAKETA INVESTMENT SERVICES LIMITED 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 trading account/pay adequate advance fee for the said reasons.
9. I know from you that you do Pro-account trading in National Stock Exchange of India Ltd. (NSE) / Bombay stock Exchange Ltd. (BSE) and I confirm that I do not have any objection for the same.
10. I/we authorize you to transfer the credit balances in one exchange/segment to another exchange/segment as and when debit arises.
11. I/we authorize you to transfer the credit balances / security balances lying in my/our stock broking account to my demat /or vice versa and when debit arises and/or for margin requirements as and when required.
12. I/we hereby declare that I/we am/are not acting as sub-broker or remiser and doing business only on my/own personal behalf.
13. a) I/we hereby agree that all the financial transactions between me/us and you shall be through account payee cheque/ demand draft / pay order and no cash transactions are permitted on either side. I/we hereby further agree that any claim of cash transaction by either party shall not be entertained by the other party. b), I/we hereby agree not to issue third party cheques/demand drafts/pay order for my/our transactions with you.
14. I/we hereby agree to give/take delivery of securities in demat mode from/to my/our own beneficiary account only. I/we hereby agree not to issue third party delivery instructions for my/our sale transactions. Further I/we agree not to deposit blank or unfilled delivery instructions with any of your office.
15. I/we hereby agree that the duly executed contract note issued by you shall only be valid and binding for all legal purposes.
16. I/we hereby accord my/our consent to you to do transactions in my/our account based on oral instructions over phone or otherwise. I/we also undertake to raise queries, if any, in writing immediately.
17. I/we hereby agree not to enter into any securities transactions/financial transactions/private deals with co-investors and employees/franchisees/associates of you and I/we am/are confined only to getting my/our orders executed on the trading terminals of the stock exchanges and settling those transactions as per the settlement schedules of the exchange.
18. I/we hereby agree to indemnify you full for any losses arising out of the delivery transactions in the securities held by me/us or jointly with any other person/s.
19. I/we hereby accord my/our consent to you to debit my/our account to the extent of amount due by me to your depository division.
20. I/we agree to provide you our updated financial details on a yearly basis.
21. I/we agree to provide additional information, details, documents, etc. pertaining to me/us as required by NSE/BSE, SEBI or any other statutory bodies from time to time.

Signature of Client: 

Client Code: _____

Client Name: _____


RUNNING ACCOUNT AUTHORISATION**IS VALID UNTIL REVOKED.**To,
Date : **SAAKETA INVESTMENT SERVICES LIMITED**

Date: _____

Sir,

I/We are dealing through you as a client in Capital Market and/or Future & option segment and/or currency segment and/or Interest Rate future 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) at any segment(s) of any or all the Exchanges(s)/Clearing corporation, unless I/We instruct you otherwise.
2. I/We request you to retain securities with you for my/our margin/pay-in/other-future obligations(s) at any segment(s) of any or all the Exchange(s)/Clearing corporation, unless I/We instruct you to transfer the same to my/our account.
3. I/We request you to settle my fund and securities account once in every calendar quarter or once in a calendar month or such other higher period as allowed by SEBI/Stock Exchange time to time except the funds given towards collaterals/margin in form of Bank Guarantee and/or Fixed Deposit Receipt.
4. I hereby authorize you to retain the funds up to Rs 10,000/- for settlement of account in a calendar quarter or once in a month.
5. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite securities/funds towards such obligations and may also retain the funds expected to be required to meet margin obligations for next trading days, calculated in the manner specified by the exchanges.
6. I/We confirm you that I will bring to your notice any dispute arising from the statement of account or settlement so made in wiring within 7 working days from the date of receipt of funds/securities or statement of account or statement related to it, as the case may be at your registered office.
7. I/We confirm that the running account authorization letter can be revoke by me/us at any time.

Signature of Client: 

Client Code: _____

Client Name: _____

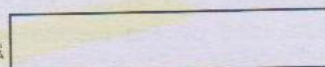
AUTHORISATION FOR MOBILE ALERTS AND MESSAGES

My mobile no _____

I/We understand and hereby accept any messages and alerts sent to the above mobile phone which is my designated mobile would be deemed to have been delivered to me/us

I/We hereby agree to intimate SAAKETA INVESTMENT SERVICES LIMITED immediately regarding discrepancy/errors in the messages sent to the above mobile.

I/We undertake to inform Saaketa in writing of any change in the mobile phone connection or loss/misplacement/change in the phone or number. Until further intimation, as acknowledged by Saaketa, I agree to abide by the messages sent to the above mobile.



POWER OF ATTORNEY

To all whom these presents shall come. I / We _____
 _____ S/o, D/o, W/o _____
 resident of _____
 _____ or

We SAAKETA INVESTMENTS SERVICES LIMITED, a company incorporated under Companies Act, 196 having its registered office at 3-4-616/1 II Floor, Narayanaguda, Hyderabad – 500 029

WHEREAS:

a) SAAKETA INVESTMENTS SERVICES LIMITED, is a trading member of NSE, BSE offering on-line and/or off-line trading facilities to its clients (hereinafter referred to "BROKER Member") and also a Depository Participant of CDSL (IN- DP- CDSL-299-2005) (hereinafter referred to as BROKER DP)

b) For the purpose of holding securities purchased / investments were made, I / We have opened a depository account bearing Client ID No. _____ (hereinafter referred to as the "designated demat Account") with BROKER DP

c) *I/ We/ _____, the first holder of the above mentioned depository account have with BROKER-Member and have opened a trading account bearing number _____ with BROKER Member (hereinafter referred to as the "client account").

Or
 * I / We propose to open a trading account with BROKER in my / our name / in the name of _____, the first holder of the designated demat account and have submitted an application form no. _____.

d) As per the terms and conditions mentioned in the agreements, I / We have confirmed BROKER Member that the designated demat account shall be utilized for the purpose of pay-in / pay out of securities against trades done in the client account and for the purpose of receiving securities allotted in IPOs, rights offers, NFOs, etc applied through BROKER in the client account.

e) For the purpose of availing the above mentioned facilities as well to facilitate proper execution, settlement and completion of all trade transactions in securities done BROKER-Member on my / our behalf, I / We individual/ joint account holders, am / are hereby appoint BROKER Member as my / our attorney and confer upon BROKER Member the powers hereafter stated.

NOW THEREFORE THESE PRESENTS WITNESS THAT I / We as individual / joint account holders, for myself / ourselves and as the Client(s) of BROKER DP do hereby nominate, constitute and appoint BROKER(Member)) acting through any of its officers or employees or any duly authorized person to be my/our true and lawful constituted attorney (hereinafter called as "attorney" for the purpose of brevity, which expression shall, unless repugnant to the meaning or context thereof be deemed to mean and include its successors) and authorize the said Attorney in my/our name(s) and on my/our behalf from time to time, to do and exercise or cause to be done and exercised, all or any of the acts, powers and authorities, deeds or things mentioned hereunder and if necessary shall be ratified by me / us on instruction of BROKER(Member), that is to say:

1. To sign the delivery instruction slips and to transfer securities available in the electronic form in my / our demat account, on my / our behalf, in order to meet my/our settlement and margin obligations for the transactions done in my/our Trading account. To Also sign the delivery instruction slip to transfer the securities to settlement account in case of Buy back offers by respective company.
2. To block, hold, debit and/or create pledge, lien, hypothecation on securities available in my / our demat account on my/our behalf, in its own favour or in favour of a Clearing House/ Clearing Corporation / Exchange and / or to meet my settlement and / or margin obligations.

(Sole/First Applicant) _____

(Second Applicant) _____

(Third Applicant) _____

3. To transfer necessary quantity of shares from my / our designated demat account, on my / our behalf, to any of the following demat account(s) of BROKER Member for meeting any margin requirement in respect of transactions executed by me / us through my/our client Trading account with BROKER Member, such as

| S.No | BO Name | DP ID | CLIENT ID | CM BP ID | PURPOSE |
|------|--------------------------------------|----------|-----------|-----------|-----------------------|
| 1 | SAAKETA INVESTMENTS SERVICES LIMITED | IN300126 | 10005660 | IN 504654 | NSE Pool |
| 2 | SAAKETA INVESTMENTS SERVICES LIMITED | 12039100 | 00069545 | 07598 | |
| 3 | SAAKETA INVESTMENTS SERVICES LIMITED | 12039100 | 00071246 | | Margin Pledge Account |
| 4 | SAAKETA INVESTMENTS SERVICES LIMITED | 12039100 | 00071571 | | Margin Pledge Account |
| 5 | SAAKETA INVESTMENTS SERVICES LIMITED | 12039100 | 00074861 | | Pool Account |

DP Pool accounts opened and maintained with BROKER DP or any other such depository account opened by BROKER Member for this purpose from time to time. In case of any change in these account numbers, BROKER Member is authorized to transfer the securities to the new account numbers with prior intimation to me / us regarding such change.


4. To transfer securities received as payout from the exchanges from the demat accounts of BROKER Member mentioned in para above, to my / our designated demat account, against transactions done in my / our trading account. In case of any change in these account numbers, BROKER Member is authorized to transfer the securities to the new account numbers with prior intimation to me / us regarding such change.
- To return the securities that BROKER Member might receive erroneously or those BROKER Member was not entitled to receive, to my / our designated demat account.
6. In case of death, disability, insolvency, winding up or liquidation of any one or more of us or of the joint holder/s and the surviving joint holders and heirs, nominees, executors, administrators, successors and legal representatives of the account holder who has died, disabled, dissolved, been adjudged insolvent, wound up or liquidated shall forthwith inform the Attorney and the BROKER DP of the same in writing. In such an event, the Power of Attorney and the instructions contained herein shall be revoked forthwith.
7. Further, BROKER Member is authorized to send consolidated summary of scrip-wise positions of securities bought and sold taken with average rates by way of SMS / email on a daily basis to my / our Mobile Number / email address registered with Member initially and changed from time to time as per my / our request.
8. The Power of Attorney with authority and powers as stated herein has been given for the specific purpose of the above mentioned services and can be revoked without prior notice but under intimation to BROKER Member subject to my / our fulfilling of the Margin / Settlement obligation for the transactions undertaken in my trading account with BROKER Member.

All disputes arising out of this Power of Attorney shall be subject to the jurisdiction of the City civil Courts situated at Hyderabad, Telangana.

IN WITNESS WHERE OF I / We, hereunto set and subscribe my / our hands and signed at on this

_____ day of _____ 20____.

Signed and delivered by

| | | |
|---|--|--|
| (First Holder)  (Second Holder)  (Third Holder)  | Witness Signature: _____ Witness Name & Address: _____ _____ _____ | |
| | Name of the Attorney: For SAAKETA INVESTMENT SERVICES LIMITED Accepted <div style="text-align: right;">Authorized Signatory</div> | Witness Signature: _____ Witness Name & Address: _____ _____ _____ |

Voluntary Documer

**(xvii)AUTHORISATION FOR ELECTRONIC CONTRACT NOTE and SMS
CONFIRMATION**

Date: _____

To
SAAKETA INVESTMENT SERVICES LIMITED
 3 -4-616/1, 2nd Floor,
 Narayanguda.
 Hyderabad -29.

Dear Sirs,

I/We have been/ shall be dealing through you as may / our broker on the Capital Market and/or Futures & Options Segments. As my/our broker i.e.agent. I/We direct and authorize you to carry out trading / dealings on myour behalf as per instructions given below.

I/We direct understand that, I/We have the option to receiver the contract notes in physical form or electronic form. In pursuance of the same, I/We hereby opt for receipt of contract notes in electronic form. I/We understand that for the above purpose. Accordingly, please take the following email account(s) email id on your record for sending the contract notes to me/us.

1. _____
 (Please Enter Email Id)


2. _____

I/We also agree that non-receipt of bounced mail notification by you shall amount to delivery at my/our email account(s)/email id(s).

I/We agree not to hold you responsible for late / non - receipt of contract notes sent in electronic form and any other communication for any reason including but not limited to failure of email services, loss of connectivity email in transit etc.

I/We agree that the log reports of your dispatching software shall be a conclusive proof of dispatch of contract notes to me/us and such dispatch shall be deemed to mean receipt by me/us and shall not be disputed by me/us on account of any non-receipt / delayed receipt for any reason whatsoever.

I/We understand that I am required to intimate any change in the email id /email account mentioned herein above needsto be communicated by me through a physical letter to you provided however that if I/We am/are an internet client then in that.

Signature 

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

Important Instructions:

- A) Fields marked with "*" are mandatory fields.
 B) Please fill the form in English and in BLOCK letters.
 C) Please fill the date in DD-MM-YYYY format.
 D) Please read section wise detailed guidelines / instructions at the end.

- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
 F) List of two character ISO 3166 country codes is available at the end.
 G) KYC number of applicant is mandatory for update application.
 H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.



For office use only

(To be filled by financial institution)

Application Type*

☐ New☐ Update

KYC Number

(Mandatory for KYC update request)

Account Type*

☐ Normal☐ Simplified (for low risk customers)☐ Small☐ 1. PERSONAL DETAILS (Please refer instruction A at the end)

| | | | |
|---|--|---|---|
| Prefix | First Name | Middle Name | Last Name |
| <input type="checkbox"/> Name* (Same as ID proof) | | | |
| Maiden Name (If any*) | | | |
| Father / Spouse Name* | | | |
| Mother Name* | | | |
| Date of Birth* | DD - MM - YYYY | | |
| Gender* | <input type="checkbox"/> M- Male | <input type="checkbox"/> F- Female | <input type="checkbox"/> T-Transgender |
| Marital Status* | <input type="checkbox"/> Married | <input type="checkbox"/> Unmarried | <input type="checkbox"/> Others |
| Citizenship* | <input type="checkbox"/> IN- Indian | <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/>) | |
| Residential Status* | <input 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"/> Housewife <input type="checkbox"/> Student) |
| | <input type="checkbox"/> B-Business | | |
| | <input type="checkbox"/> X- Not Categorised | | |

PHOTO

☐ 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)

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 (PoI)* (Please refer instruction C at the end)(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

- ☐ A- Passport Number
- ☐ B- Voter ID Card
- ☐ C- PAN Card
- ☐ D- Driving Licence
- ☐ E- UID (Aadhaar)
- ☐ F- NREGA Job Card
- ☐ Z- Others (any document notified by the central government)
- ☐ S- Simplified Measures Account - Document Type code

Passport Expiry Date

DD - MM - YYYY

Driving Licence Expiry Date

DD - MM - YYYY

Identification Number

Identification Number

4. PROOF OF ADDRESS (PoA)*

☐ 4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction D at the end)(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

- Address Type* ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified
- Proof of Address* ☐ Passport ☐ Driving Licence ☐ UID (Aadhaar)
- ☐ Voter Identity Card ☐ NREGA Job Card ☐ Others
- ☐ Simplified Measures Account - Document Type code

Address

| | | | |
|-----------|------------------|-------------------|------------------------|
| Line 1* | | | |
| Line 2 | | | |
| Line 3 | | | |
| District* | Pin / Post Code* | State / U.T Code* | ISO 3166 Country Code* |

☐ 4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction E at the end)

☐ Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

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

☐ 4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)

☐ Same as Current / Permanent / Overseas Address details

☐ Same as Correspondence / Local Address details

| | | | | | | | | | | | | | | | |
|---------|--|--|--|--|--|------------------|--|--|--|--|------------------------|--|--|--|--|
| Line 1* | | | | | | | | | | | | | | | |
| Line 2 | | | | | | | | | | | | | | | |
| Line 3 | | | | | | | | | | | City / Town / Village* | | | | |
| State* | | | | | | ZIP / Post Code* | | | | | ISO 3166 Country Code* | | | | |

☐ 5. CONTACT DETAILS (All communications will be sent on provided)

| | | | | | | | | | | | | | | | | | | | | | |
|------------|--|--|--|--|--|------------|--|--|--|--|--|--------|--|--|--|--|--|--|--|--|--|
| Tel. (off) | | | | | | Tel. (Res) | | | | | | Mobile | | | | | | | | | |
| FAX | | | | | | Email ID | | | | | | | | | | | | | | | |

☐ 6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

| | | | | | | | | | | | | | | |
|---|---|--|--|-----------------------------------|--|--|--|-----------|--|--|--|--|--|--|
| <input type="checkbox"/> Addition of Related Person | <input type="checkbox"/> Deletion of Related Person | KYC Number of Related Person (if available*) | | | | | | | | | | | | |
| Related Person Type* | | <input type="checkbox"/> Guardian of Minor | | <input type="checkbox"/> Assignee | | <input type="checkbox"/> Authorized Representative | | | | | | | | |
| | | Prefix | | First Name | | Middle Name | | Last Name | | | | | | |
| Name* | | | | | | | | | | | | | | |

(If KYC number and name are provided, below details of section 6 are optional) el. (Off)

PROOF OF IDENTITY [PoI] OF RELATED PERSON* (Please see instruction (H) at the end)

| | | | | | | | | | | | |
|--|--|--|--|--|--|-----------------------------|--|--|--|--|--|
| <input type="checkbox"/> A- Passport Number | | | | | | Passport Expiry Date | | | | | |
| <input type="checkbox"/> B- Voter ID Card | | | | | | | | | | | |
| <input type="checkbox"/> C- PAN Card | | | | | | | | | | | |
| <input type="checkbox"/> D- Driving Licence | | | | | | Driving Licence Expiry Date | | | | | |
| <input type="checkbox"/> E- UID (Aadhaar) | | | | | | | | | | | |
| <input type="checkbox"/> F- NREGA Job Card | | | | | | | | | | | |
| <input type="checkbox"/> Z- Others (any document notified by the central government) | | | | | | Identification Number | | | | | |
| <input type="checkbox"/> S- Simplified Measures Account - Document Type code | | | | | | Identification Number | | | | | |

| | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <input type="checkbox"/> 7. REMARKS (If any) | Mobile no. / Email-ID) (Please refer instruction F at the end) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

8. APPLICANT 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/Email on the above registered number/email address.

Date : DD - MM - YYYY Place : _____

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY
Documents Received ☐ Certified Copies

| | | | | | | | |
|---------------------------------|--|--|--|---------------------|--|--|--|
| KYC VERIFICATION CARRIED OUT BY | | | | INSTITUTION DETAILS | | | |
| Date | | | | Name | | | |
| Emp. Name | | | | Code | | | |
| Emp. Code | | | | | | | |
| Emp. Designation | | | | | | | |
| Emp. Branch | | | | | | | |
| (Employee Signature) | | | | (Institution Stamp) | | | |

FATCA-CRS - Declaration &
Supplementary KYC Information
Declaration from for individuals

| | | |
|-----|--|--|
| 1. | Name | |
| 2. | Customer ID | |
| 3. | Fathers Name* | |
| 4. | Spouse Name* | |
| 5. | Gender | |
| 6. | PAN(or its equivalent) | |
| 7. | Identification type | |
| 8. | Identification number | |
| 9. | Occupation type | |
| 10. | Occupation* | |
| 11. | Birth date | |
| 12. | Nationality | |
| 13. | Country of Residency per tax laws | |
| 14. | Place of birth | |
| 15. | Country of birth | |
| 16. | Foreign Tax Identification number(TIN) | |
| 17. | TIN issuing country | |
| 18. | address Type | |
| 19. | address Type | |
| 20. | City/town | |
| 21. | Postal Code | |
| 22. | State Code | |
| 23. | Country Code | |
| 24. | Mobile number / telephone number | |
| 25. | Other contact number* | |

Knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting. I/am aware that I may be liable for it. I hereby authorize you to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to / any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same, Further, I authorize to share the given information to other SEBI Registered Intermediaries / or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators / tax authorities. I / we authorize Saaketa to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same.

Date :

Signature : 

Place :

Optional :

SAAKETA INVESTMENT SERVICES LIMITED

Nomination Form

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|---|---|---|---|---|---|---|---|--|---|---|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|
| TM / DP SAAKETA INVESTMENTS SERVICES LIMITED 3 -4-616/1, 2nd Floor, Narayanguda.Hyderabad -29. | | | | | | | | | | FORM FOR NOMINATION <i>(To be filled in by individual applying singly or jointly)</i> | | | | | | | | | | | | | | | | | | | | | | |
| Date | | D | D | M | M | Y | Y | Y | Y | UCC/ DP ID | | I | N | | | | | | | | Client ID | | | | | | | | | | | |
| I/We wish to make a nomination. [As per details given below] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nomination Details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nomination can be made upto three nominees in the account. | | | | | | | | | | Details of 1st Nominee | | | | | | | | | | Details of 2nd Nominee | | | | | Details of 3rd Nominee | | | | | | | |
| 1 | | Name of the nominee(s) (Mr./Ms.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | | Share of each Nominee | | Equally <small>[If not equally, please specify percentage]</small> | | | | | | % | | | | | | | | | | % | | | | | % | | | | | | | |
| <i>Any odd lot after division shall be transferred to the first nominee mentioned in the form.</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | | Relationship With the Applicant (If Any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | | Address of Nominee(s) City / Place: State & Country: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | PIN Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | | Mobile / Telephone No. of nominee(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | | Email ID of nominee(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | | Nominee Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sr. Nos. 8-14 should be filled only if nominee(s) is a minor: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | | Date of Birth {in case of minor nominee(s)} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | | Name of Guardian (Mr./Ms.) {in case of minor nominee(s)} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | | Address of Guardian(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | |
|-------------------------------|--|----------|--|--|--|-------------------------|--|
| | City / Place: State & Country: | | | | | | |
| | | PIN Code | | | | | |
| 11 | Mobile / Telephone no. of Guardian | | | | | | |
| 12 | Email ID of Guardian | | | | | | |
| 13 | Relationship of Guardian with nominee | | | | | | |
| 14 | Guardian Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID | | | | | | |
| Name(s) of holder(s) | | | | | | Signature(s) of holder* | |
| Sole / First Holder (Mr./Ms.) | | | | | | | |
| Second Holder (Mr./Ms.) | | | | | | | |
| Third Holder (Mr./Ms.) | | | | | | | |

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

Note:

This nomination shall supersede any prior nomination made by the account holder(s), if any.

The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

SAAKETA INVESTMENT SERVICES LIMITED

Declaration Form for opting out of nomination

[Annexure B to SEBI circular No. SEBI/HO/MIRSD/RTAMB/CIR/P/2021/601 dated July 23, 2021 on Mandatory Nomination for Eligible Trading and Demat Accounts]

| | | | | | | | | | |
|--|------|---|---|---|---|---|---|---|---|
| To | Date | D | D | M | M | Y | Y | Y | Y |
| SAAKETA INVESTMENT SERVICES LIMITED 3 -4-616/1, 2nd Floor, Narayanguda.Hyderabad -29. | | | | | | | | | |
| UCC/DP ID | I | N | | | | | | | |
| Client ID (only for Demat account) | | | | | | | | | |
| Sole/First Holder Name | | | | | | | | | |
| Second Holder Name | | | | | | | | | |
| Third Holder Name | | | | | | | | | |
| I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / 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 trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account. | | | | | | | | | |
| Name and Signature of Holder(s)* | | | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">1. </div> <div style="width: 30%;">2. _____</div> <div style="width: 30%;">3. _____</div> </div> | | | | | | | | | |

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

I hereby confirm that the client has appeared in person before me and signed the agreement in my presence.

BRANCH INCHARGE

I hereby confirm that I have received a copy of this agreement. I have also received Rights & Obligations, Risk Documents (RRD) and Guidance note.

CLIENT 

DEALER CODE

REMEISER CODE

BROKERAGE CODE

MAPPING TO

INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

1. 3 Photographs for NSE/BSE/CDSL with signature across the photo
2. PAN Card photo copy
3. AADHAAR card photo copy must
4. Proof Of Address: Aadhaar card/Passport/Voter Id/Driving License/Bank Passbook with latest statement
5. Latest 6 months Bank Statement
6. One cancelled cheque (for the purpose of bank details)
7. Valid Mobile Number and E-mail id must
8. Plz mention mother name on KYC Form
9. Total 38 signatures.
10. All Photo copies must be attested by the applicant