



# MOTISONS

## CLIENT REGISTRATION FORM

ACCOUNT OPENING KIT TRADING / DEPOSITORY ACCOUNT

☐ **Individual**      ☐ **NRI**      ☐ **Foreign National**

### FOR OFFICE USE :

Name of Client : \_\_\_\_\_  
A/c Type : \_\_\_\_\_ UCC / Trading Code : \_\_\_\_\_  
DPID : 12069000 Client ID : \_\_\_\_\_  
Introducer Name : \_\_\_\_\_ Introducer Code : \_\_\_\_\_  
A/c Open Date : \_\_\_\_\_ Place : \_\_\_\_\_

### REGISTRATION FOR :

**NSE** : ☐ CM ☐ FO ☐ CD ☐ COMMODITY    **BSE** ☐ CM ☐ FO ☐ CD ☐ COMMODITY  
**MCX** : ☐ COMMODITY                      **NCDEX** : ☐ COMMODITY

## Motisons Shares Private Limited

**MEMBER : NSE, BSE, MCX, NCDEX, DP-CDSL**

Corporate Office : "Motisons Tower" 5th Floor, SB-110, Lal Kothi, Tonk Road, Jaipur-302015 (Raj.)

Phone : 0141-4085555, Fax : 0141-4085550

E-mail : equity@motisons.com, grievances@motisons.com, Website : www.motisonsshare.com

Regd. Office : 2nd Floor, Chandwani Smariti Bhawan, Jwalapur-Kankhal Main Road,  
Haridwar-249403 (Uttarakhand) Phone : 01334-251009, 251010

## INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

### A. IMPORTANT POINTS:

- Self attested copy of PAN card is mandatory for all clients.
- 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.
- If any proof of identity or address is in a foreign language, then translation into English is required.
- Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- If correspondence & permanent address are different, then proofs for both have to be submitted.
- Sole proprietor must make the application in his individual name & capacity.
- 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.
- For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
- In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- For opening an account with Depository participant or Mutual Fund, for a minor or photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- 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:

- 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).
- Unique Identification Number (UID) (Aadhaar)/Passport/Voter ID card/Driving license.
- 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.)

- Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of

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

- Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
- Bank Account Statement/Passbook - Not more than 3 months old.
- Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- 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.
- 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.
- 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.
- 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.)

- 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.
- Investors residing in the state of Sikkim.
- UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
- SIP of Mutual Funds upto Rs 50,000/- p.a.
- 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:

- 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).
- In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.

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

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



# Motisons Shares Private Limited

## ACCOUNT OPENING KIT

### INDEX OF DOCUMENTS

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<b>VOLUNTARY DOCUMENTS AS PER PROVIDED BY STOCK BROKER</b>			
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# MOTISONS SHARES PRIVATE LIMITED

**SEBI REGISTRATION NUMBER -** INZ 000191336

**NSE SEGMENT -** Capital Market/Cash, F&O, CD, Commodity **Membership Number - 12981**

**BSE SEGMENT -** Capital Market/Cash, F&O, CD, Commodity **Clearing Number - 3267**

**MCX SEGMENT -** Commodity **Membership Number - 56525**

**NCDEX SEGMENT -** Commodity **Membership Number - 1271**

**Regd. Office :** 2nd Floor, Chandwani Smariti Bhawan, Jwalapur-Kankhal Main Road, Haridwar-249403 (UK)

**Phone :** 01334-251009, 251010 **Website :** www.motisonsshares.com

**Corporate Office :** "Motisons Tower" 5th Floor, SB-110, Lal Kothi, Tonk Road, Jaipur-302015 (Rajasthan)

**Depository Division :** "Motisons Tower" 5th Floor, SB-110, Lal Kothi, Tonk Road, Jaipur-302015 (Rajasthan)

**Ph. :** 0141-4085555, **Fax :** 0141-4085550, **E-mail :** equity@motisons.com

**CIN -** U67120UR2005PTC000351, **GST** 08AAECM3530C1ZX

**Compliance Officer Name :** Ajay Saxena

**Phone :** 0141-4085555

**E-mail :** ajaysaxena@motisons.com

*For any grievance/dispute please contact stock broker **Motisons Shares Private Limited** at the above address or email **investors@motisons.com, grievances@motisons.com** and Phone no. **0141-4085555**. In case not satisfied with the response, please contact the concerned exchange(s) at **ignse@nse.co.in, is@bseindia.com** and Phone no. **NSE -022-26598100-144, BSE- 022-22728138, NCDEX-18002662339, askus@ncdex.com** or **MCX-022-67318888, customersupport@mcx.india.com***

**Note :** Motisons Shares Private Limited doing Client based and Proprietary Trading

## ACKNOWLEDGEMENT TO MOTISONS SHARES PRIVATE LIMITED FROM CLIENT

I/we hereby confirm that I/we have read, understood, agreed and received a duly executed copy of the:-

- Account Opening Form
- Trading / Demat Account Related Details & Tariff Sheet (Trading Account & Demat Account)
- Rights and Obligations of Stock Brokers, Sub-Brokers and Clients
- Rights and Obligations of Beneficiary owner and Depository Participant as prescribe by SEBI and Depository
- Internet and Wireless technology based trading facility provided by Stock Brokers to Client
- Risk Disclosure document for capital market, derivative, commodity segments
- Guidance note-DO's and DON'Ts for trading on the Exchange(s) for Investors
- Policies and Procedure
- Terms & Conditions as Mutually agreed by me & FATCA & CRS Terms & Conditions
- Other disclosure/documents as agreed by me specifically in voluntary segment.
- Copy of POA (Power of Attorney)

I/we am/are abiding by these terms & conditions. I/we reconfirm that I/we and stock broker shall refer any claim and/or disputes with respect to deposits, margin money, etc, to arbitration as per the Rules, Byelaws, and Regulation of the Exchanges where the trade is executed and circulars/notices issued there under as may be in force from time to time.

I/We reconfirm that I/we and Stock Broker shall refer all claims, differences or disputes between us arising out of or in relation to dealings, contracts and transaction made subject to the Bye-Laws, Rules and Regulations of the Exchange or with reference to anything incidental thereto or in pursuance thereof or relating to their validity, construction, interpretation, fulfillment or the rights, obligations and liabilities of the parties thereto and including any question of whether such dealings, transactions and contracts have entered into to arbitration in accordance with the provisions of these Byelaws and Regulations.

Thanks and Best regards,

Client Code : ..... Date.....



Client Name : .....

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

### Important Instructions:

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



### For office use only

(To be filled by financial institution)

Application Type\* ☐ New ☐ Update

KYC Number  (Mandatory for KYC update request)

Account Type\* ☐ Normal ☐ Minor ☐ Aadhaar OTP based E-KYC (in non-face to face mode)

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

☐ Name\* (Same as ID proof)

Maiden Name

Father / Spouse Name

Mother Name

Date of Birth\* DD - MM - YYYY

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

PAN\*  ☐ Form 60 furnished

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

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

- ☐ A- Passport Number
- ☐ B-Voter ID Card
- ☐ C-Driving Licence
- ☐ D-NREGA Job Card
- ☐ E-National Population Register Letter
- ☐ F-Proof of Possession of Aadhaar
- II ☐ E-KYC Authentication
- III ☐ Offline verification of Aadhaar

### ☐ PHOTO\*



### Address

Line 1\*

Line 2

Line 3

District\*  Pin/Post Code\*  City / Town / Village\*  State/U.T Code\*  ISO 3166 Country Code\*

### ☐ 3. CURRENT ADDRESS DETAILS (Please refer instruction B at the end)

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

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

- ☐ A- Passport Number
- ☐ B-Voter ID Card
- ☐ C-Driving Licence
- ☐ D-NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar
- II ☐ E-KYC Authentication
- III ☐ Offline verification of Aadhaar
- IV ☐ Deemed Proof of Address - Document Type code

### Address

Line 1\*

Line 2

Line 3

District\*  Pin / Post Code\*  City / Town / Village\*  State/U.T Code\*  ISO 3166 Country Code\*



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



**Motisons Shares Private Limited**

Please fill in **ENGLISH** and in **BLOCK LETTERS**

Application No. :

**A. Identity Details (please see guidelines overleaf)**

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 

d	d	/	m	m	/	y	y	y	y
---	---	---	---	---	---	---	---	---	---

3. Nationality ☐ Indian ☐ Other (Please specify)

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

PHOTOGRAPH

Please affix  
the recent passport  
size photograph and  
sign across it



**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 

d	d	/	m	m	/	y	y	y	y
---	---	---	---	---	---	---	---	---	---

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 

d	d	/	m	m	/	y	y	y	y
---	---	---	---	---	---	---	---	---	---

6. 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 

d	d	/	m	m	/	y	y	y	y
---	---	---	---	---	---	---	---	---	---

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



**Additional KYC Form for Opening a Demat Account / Trading Account**
**For Individuals 5**
**Depository Participant Name/Address**

(To be filled by the Depository Participant)

Application No.											Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.																			
DP ID											Client ID								

 (To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/ our name as per following details:-

**Holders Details**

Sole / First Holder's Name	PAN																	
	UID																	
	UCC																	
	Exchange Name & ID																	
Second Holder's Name	PAN																	
	UID																	
Third Holder's Name	PAN																	
	UID																	

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

**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's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual Margin Trading A/C (MANTRA)	<input type="checkbox"/> Individual-Director <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Minor <input type="checkbox"/> Others(specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI – Depository Receipts	<input type="checkbox"/> NRI Non-Repatriable <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)_____	

**Details of Guardian (in case the account holder is minor)**

Guardian's Name											PAN							
Relationship with the applicant																		
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 the RTA												<input type="checkbox"/> Yes <input type="checkbox"/> No						
I / We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the 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 ]

☐ Yes    ☐ No

**Bank Details [Dividend Bank Details]**

Bank Code (9 digit MICR code)																		
IFS Code (11 character)																		
Account number																		



# MOTISONS

Account type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify) _____									
Bank Name										
Branch Name										
Bank Branch Address										
City		State		Country		PIN code				

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)  
(ii) Photocopy of the Bank Statement having name and address of the BO  
(iii) Photocopy of the Passbook having name and address of the BO, (or)  
(iv) Letter from the Bank.  
➤ In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

Other Details Gross Annual Income Details	<b>Income Range per annum:</b> <input type="checkbox"/> Up to Rs.1,00,000 <input type="checkbox"/> Rs 1,00,000 to Rs 5,00,000 <input type="checkbox"/> Rs 5,00,000 to ₹ 10,00,000 <input type="checkbox"/> Rs 10,00,000 to Rs 25,00,000 <input type="checkbox"/> More than Rs 25,00,000									
	Net worth as on (Date)	D	D	M	M	Y	Y	Y	Y	Rs
	[Net worth should not be older than 1 year]									
Occupation	<input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others (Specify) _____									
Please tick , if applicable:	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)									
Any other information:										

SMS Alert Facility Refer to Terms & Conditions given as <b>Annexure - 2.4</b>	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).	
	To register for <b>easi</b> , please visit our website <a href="http://www.cdslindia.com">www.cdslindia.com</a> . <b>Easi</b> allows a BO to view his ISIN balances, transactions and value of the portfolio online.	

## Nomination Details

Nomination Registration No.	Dated
-----------------------------	-------

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.**

☐ I/We **nominate** the following persons who is/**are** entitled to receive security balances lying in my/our account, particulars where of are given below, in the event of my / our death.

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name : *First Name: Middle Name: *Last Name	..... ..... .....	..... ..... .....	..... ..... .....
Nomination Details	Nominee 1	Nominee 2	Nominee 3
*Address:			
*City			
*State			
*Pin			
*Country			
Telephone No.			
FAX No.			
PAN No.			

## MOTISONS

UID			
Email ID			
*Relationship with the BO:			
Date of birth (mandatory if Nominee is a minor) dd-mm-yyyy			
Name of the Guardian of Nominee (if nominee is a minor)			
*First Name:	.....	.....	.....
Middle Name:	.....	.....	.....
*Last Name	.....	.....	.....
*Address of the guardian of nominee:			
*City			
*State			
*Country			
*PIN			
Age			
Telephone			
Fax No.			
Email ID			
*Relationship of the 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: in case 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 field**


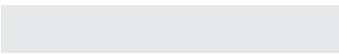

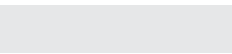

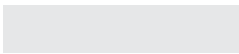
This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.

# MOTISONS

**Note: One witness** shall attest signature(s) / thumb impression(s)

Details of the Witness	
	<b>First Witness</b>
Name of witness	
Address of witness	
Signature of witness	

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

	<b>First/Sole Holder or Guardian (in case of Minor)</b>	<b>Second Holder</b>	<b>Third Holder</b>
Name			
Signatures	 	 	 

*(Signatures should be preferably in blue ink).*

===== (Please Tear Here) =====

## Acknowledgement Receipt

**Application No.:**

**Date:**

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

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






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

Name of Applicant

PAN of the Applicant

Sr. No.	PAN	Name	DIN (For Directors) / Aadhaar Number (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph



Name & Signature of the Authorised Signatory(ies)

Date

d

d

d

/

m

m

/

y

y

y

**Additional KYC Form for Opening a Demat Account / Trading Account**
**For Non-individuals**
**Depository Participant Name / Address / DP ID**

(To be filled by the Depository Participant)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.										
DP ID		Client ID								

 (To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/ our name as per following details:-

**Holders Details**

Sole / First Holder's Name		Search Name		PAN													
				UCC													
				Exchange Name & ID													
				PAN													
Second Holder's Name				UID													
				PAN													
Third Holder's Name				UID													

**\*Exchange ID**

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

<b>Type of Account</b> (Please tick whichever is applicable)											
<b>Status</b>										<b>Sub – Status</b>	
<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"/> Clearing House <input type="checkbox"/> Other (Specify) _____										<b>To be filled by the DP</b>	
SEBI Registration No. (If Applicable)		SEBI Registration date	D	D	M	M	Y	Y	Y	Y	
RBI Registration No. (If Applicable)		RBI Approval date	D	D	M	M	Y	Y	Y	Y	
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify) _____										

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

**Clearing Member Details (To be filled by CMs only)**

Name of Stock Exchange			
Name of CC / CH			
Clearing Member Id		Trading member ID	

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



# MOTISONS

## Bank Details [Dividend Bank Details]

Bank Code (9 digit MICR code)									
IFS Code (11 character)									
Account number									
Account type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify) _____								
Bank Name									
Branch Name									
Bank Branch Address									
City		State		Country		PIN code			

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)  
 (ii) Photocopy of the Bank Statement having name and address of the BO  
 (iii) Photocopy of the Passbook having name and address of the BO, (or)  
 (iv) Letter from the Bank.  
 ➤ In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.




## Other Details

Gross Annual Income Details	Income Range per annum:									
	<input type="checkbox"/> Up to Rs 1,00,000 <input type="checkbox"/> Rs 1,00,000 to Rs.5,00,000 <input type="checkbox"/> Rs.5,00,000 to Rs. 10,00,000 <input type="checkbox"/> Rs. 10,00,000 to Rs. 25,00,000 <input type="checkbox"/> Rs.25,00,000 to Rs. 1,00,00,000 <input type="checkbox"/> More than Rs.1,00,00,000									
	Net worth as on (Date)	D	D	M	M	Y	Y	Y	Y	Rs
[Net worth should not be older than 1 year]										
Please tick If any of the authorized signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors is either Politically Exposed Person (PEP) or Related to Politically Exposed Person (RPEP) <input type="checkbox"/> . Please provide details as per Annexure 2.2 A.										
Any other information:										

<b>SMS Alert Facility</b> Refer to Terms & Conditions given as <b>Annexure - 2.4</b>	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).	
	To register for <b>easi</b> , please visit our website <a href="http://www.cdslindia.com">www.cdslindia.com</a> . <b>Easi</b> allows a BO to view his ISIN balances, transactions and value of the portfolio online.	

## MOTISONS

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

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

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

(Signatures should be preferably in black ink).

===== (Please Tear Here) =====

### Acknowledgement Receipt

Application No.:

Date:

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

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

Depository Participant Seal and Signature



**DEMAT & TRADING ACCOUNT RELATED DETAILS**Please fill this form in **ENGLISH** and in **BLOCK LETTERS**.**A. DEPOSITORY ACCOUNT DETAILS \*\***Depository Participant ☐ CDSL ☐ NSDL

Depository Participant Name \_\_\_\_\_











Beneficiary Name \_\_\_\_\_

DP ID No. \_\_\_\_\_ Beneficiary ID \_\_\_\_\_

\*\* Demat Master or recent holding statement issue by DP bearing name of the client should be submitted.

**B. TRADING PREFERENCES\*\*\***

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

Exchanges	Segments	Signature	Exchanges	Segments	Signature
<b>NSE</b>	<b>Cash</b>	 _____	<b>BSE</b>	<b>Cash</b>	 _____
	<b>F&amp;O</b>	 _____		<b>F&amp;O</b>	 _____
	<b>Currency Derivative</b>	 _____		<b>Currency Derivative</b>	 _____
	<b>Commodity Derivative</b>	 _____		<b>Commodity Derivative</b>	 _____
<b>MCX</b>	<b>Commodity Derivative</b>	 _____	<b>NCDEX</b>	<b>Commodity Derivative</b>	 _____

If, in future you want to trade on any new segment/new exchange, separate authorization/letter will be taken.

\*\*\*Please submit only one of the following in case of trading in F &amp; O, Currency Derivatives and Commodity Derivatives.

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income - Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement.	Bank account statement for last 6 months

**C. GST DETAILS (As applicable, State wise)**

Local GST Registration No. : \_\_\_\_\_ Validity Date : \_\_\_\_\_

Name of the State : \_\_\_\_\_ State Code : \_\_\_\_\_

Other GST Registration No. : \_\_\_\_\_ Validity Date : \_\_\_\_\_

Name of the State : \_\_\_\_\_ State Code : \_\_\_\_\_

**D. PAST REGULATORY 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/Authorised Person(AP), provide the following details:

Sub-Broker's / AP Name: \_\_\_\_\_ SEBI Registration number : \_\_\_\_\_

Registered office address: \_\_\_\_\_

Ph: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

Whether dealing with any other Stock Broker/Sub-Broker/AP ☐ No ☐ Yes if yes provide following details

(in case dealing with multiple Stock Brokers/Sub-Brokers/AP, provide details of all)

Name of Stock Broker : \_\_\_\_\_

Name of Sub-Broker/AP, if any: \_\_\_\_\_

Client Code: \_\_\_\_\_ Exchange: \_\_\_\_\_

Details of disputes/dues pending from/to such Stock Broker/Sub- Broker/AP : \_\_\_\_\_

**F. ADDITIONAL DETAILS**

- Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify) : \_\_\_\_\_  
Specify your Email id, if applicable: \_\_\_\_\_
- Whether you wish to avail of the facility of internet trading/ wireless technology (please specify): ☐ Yes ☐ No
- Number of years of Investment/Trading Experience: \_\_\_\_\_

**G. OTHER DETAILS**

**Gross Annual Income Details (please specify):** Income Range per annum: Below Rs. 1 Lac / 1-5 Lac / 5-10 Lac / 10-25 Lac / 25 Lacs-1crore / > 1 crore

**Net-worth** in Rs. ....as on (date) ..... (\*Net worth should not be older than 1 year)

**H. 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 : \_\_\_\_\_

**DECLARATION**

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

Place \_\_\_\_\_



Date \_\_\_\_\_

Signature of Client/ (all) Authorized Signatory (ies)

<b>TRADING TARIFF</b>				
<b>BROKERAGE DETAILS</b>				
<b>CAPITAL MARKET SEGMENT</b>	<b>%</b>		<b>Minimum</b>	
Delivery Based				
Square Up				
<b>FUTURE &amp; OPTIONS SEGMENT</b>				
Futures				
Options				
<b>CURRENCY DERIVATIVES SEGMENT</b>	<b>Futures</b>		<b>Options</b>	
NSE CDS				
BSE CDS				
<b>COMMODITY DERIVATIVES SEGMENT</b>				
NSE				
BSE				
MCX				
NCDEX				
<b>OTHER CHARGES</b>				
	<b>CM SEGMENT</b>	<b>F&amp;O SEGMENT</b>	<b>CD SEGMENT</b>	<b>COMMODITY SEGMENT</b>
STT/CTT				
TRANSACTION CHARGES				
STAMP DUTY				
SEBI FEES				

Dear Customer,

Greetings from Motisons shares Private Limited

We take the privilege of thanking you for showing consistent confidence in our services. It has always been a sheer pleasure to serve you. It is inform to you that we are marginally increasing DP charges w.e.f. 1st Feb 2020, details of the same are appended below:

DP Tariff			
( Will be applicable from 1st Feb 2020 )			
Charge Description	Normal	One Time Maintenance charges (Life Time)	BSDA
Life Time (One Time Charges)	NIL	Rs. 2000/-	NIL
Power of attorney (P.O.A) Optional	Rs. 150/-	Rs. 150/-	Rs. 150/-
Annual Maintenance	Rs.250/- Per Year	NIL	Nil (For valuation below Rs. 50000/-) Rs.100/- (For valuation Rs.50001/-to 2 lac)
Sell transaction within MSPL Or Off Market Transfer	0.02% of value or Rs. 20/- whichever is higher Per ISIN	0.02% of value or Rs. 20/- whichever is higher Per ISIN	0.02% of value or Rs. 20/- whichever is higher Per ISIN
DRF & RRF	Rs. 3/- per certificate + Rs. 50/- per request Postal Charges	Rs. 3/- per certificate + Rs. 50/- per request Postal Charges	Rs. 3/- per certificate + Rs. 50/- per request Postal Charges
Rematerialization	Rs. 25/- per request	Rs. 25/- per request	Rs. 25/- per request
Account Modification (viz. Addition/ Changes/Deletion in Master details	Rs.10/-	Rs.10/-	Rs.10/-
Pledge Creation/Closure/ Cancellation/Invocation	0.03% of value or min Rs.25/-per request	0.03% of value or min Rs.25/-per request	0.03% of value or min Rs.50/-per request
Rejection charges - DRF & Instruction Slip	Rs.50/-	Rs.50/-	Rs.50/-
DIS book Issue	Rs.30/- per book of 10 leaves	Rs.30/- per book of 10 leaves	Rs.30/- per book of 10 leaves
<b>General Clauses:</b>			
<ul style="list-style-type: none"> <li>Value of transaction will be in accordance with the rates to be Provided by CDSL.</li> </ul>			
<ul style="list-style-type: none"> <li>In case of delay in the payment of charges, the depository services are liable to be discontinued by giving prior notice of two days till such time all dues are cleared.</li> </ul>			
<ul style="list-style-type: none"> <li>Out of pocket expenses incurred on the dispatch of securities for Dematerialization and communication charges incurred on out station calls/faxes made specifically on request of client will be charged on actual basis.</li> </ul>			
<b>Other Terms:</b>			
<ul style="list-style-type: none"> <li>Free access to online Depository back office.</li> </ul>			
<ul style="list-style-type: none"> <li>Transaction and Holding statement will be sent digitally.</li> </ul>			
<ul style="list-style-type: none"> <li>Late / Same day instructions are accepted at client's risk.</li> </ul>			
<ul style="list-style-type: none"> <li>Any services not quoted above will be charged separately</li> </ul>			
<ul style="list-style-type: none"> <li>Taxes applicable would be charged extra.</li> </ul>			
<ul style="list-style-type: none"> <li>Fees scheduled is based on existing CDSL charges and is subjected to change at the sole discretion of "Motisons Shares Private Limited"</li> </ul>			
<ul style="list-style-type: none"> <li>Payments through Cheque /DD should be in favour of "Motisons Shares Private Limited" Payable at Jaipur.</li> </ul>			
<ul style="list-style-type: none"> <li>The B.O. has unconditionally authorize "Motisons Shares Private Limited" and has no objection for charging the depository services bills to his/its under mentioned trading code with the stock Broker.</li> </ul>			





**Terms & Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL****[SMS Alerts will be sent by CDSL to BOs for all debits]****Definitions:**

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

1. "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.
2. 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. '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.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "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.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms & conditions.

**Availability :**

1. 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.
2. The service is currently available to the BOs who are residing in India.
3. 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.
4. 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.
5. 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 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 :**

1. 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 period.
2. 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.
3. 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.
4. 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.



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5. 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, e-mail address and mobile number for marketing offers between CDSL and any other entity.

**6. 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 acknowledge on receiving SMS alerts. The BO send an email to CDSL at [complaints@cdslindia.com](mailto: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.**

7. 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.

8. 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

9. 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 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 anytime 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.

### **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 purpose 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.



**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. CDSL - DP Operating Instructions – September 2013 Page 2 of 2

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.



## MOTISONS

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.

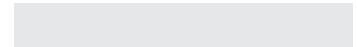
18. Disclaimer:

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.



## ACKNOWLEDGEMENT

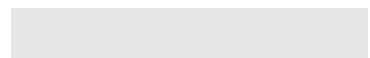
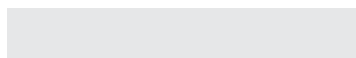
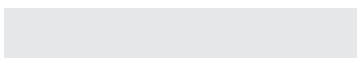
To,

**Motisons Shares Private Limited**

"Motisons Tower", 5th Floor, SB-110, Lal Kothi, Tonk Road, Jaipur-302015

Dear Sir / Madam,

I/We hereby acknowledge the receipt of duly executed copy of KYC form, Right & Obligations of Beneficial Owner and Depository Participant, Right & Obligations, RDD, Guidance Note, Policies & Procedure, Tariff Sheet, POA, Nomination, SMS Alert and all other documents as executed by me/us. I/We acknowledge that the other detail related to my/our account are as under.



1. Verify your transaction statement carefully for all debits and credits in your account. In case of any unauthorized debit or credit, inform your DP or CDSL.
2. Intimate any change of address or change in bank account details to your DP immediately.
3. While accepting the Delivery Instruction Slip (DIS) book from your DP, ensure that your BO ID is pre-stamped on all the pages along with the serial numbers.
4. Keep your DIS book safely and do not sign or issue blank or incomplete DIS slips.
5. Strike out the empty space, if any, in the DIS, before submitting to DP.
6. For market transactions, submit the DIS ahead of the deadline time. DIS can be issued with a future execution date.
7. The demat account has a nomination facility and it is advisable to appoint a nominee to facilitate your heirs in obtaining the securities in your demat account, on completion of the necessary procedures.
8. To open and operate your demat account, copy of PAN card of all account holders is to be submitted to the DP along with original PAN card, for verification.
9. Register for CDSL's SMART (SMS Alerts Related to Transactions) facility. If any unauthorized debit is noticed, the BO should immediately inform CDSL and the Main DP, in writing. An email may be sent to CDSL at [complaints@cdslindia.com](mailto:complaints@cdslindia.com).
10. Register for CDSL's Internet based facility "easi" to monitor your demat account yourself. Contact your DP or visit CDSL's website: [www.cdslindia.com](http://www.cdslindia.com) for details.
11. In order to receive all the credits coming to your demat account automatically, you can give a one-time, standing instruction to your DP.
12. Before granting Power of Attorney to anyone, to operate your demat account, carefully examine the scope and implications of powers being granted.

### **Instructions to the Applicants (BOs) for account opening :**

1. Signatures can be in English or Hindi or any of the other languages contained in the 8th Schedule of the Constitution of India. Thumb impressions and signatures other than the above mentioned languages must be attested by a Magistrate or a Notary Public or a special Executive Magistrate / Special Executive Officer under his/her official seal.
2. Signatures should be preferably in black ink.
3. Details of the Names, Address, Telephone Number(s), etc., of the Magistrate / Notary Public / Special Executive Magistrate / Special Executive Officer are to be provided in case of attestation done by them.
4. In case of additional signatures (for accounts other than individuals ), separate annexures should be attached to the account opening form.
5. In case of applications containing a Power of Attorney, the relevant Power of Attorney or the self-certified copy thereof, must be lodge along with the application.
6. All correspondence / queries shall be addressed to the first / sole applicant.
7. Strick off whichever option, in the account opening form, is not applicable.



**VOLUNTARY  
RUNNING ACCOUNT AUTHORISATION**

To,

**Motisons Shares Private Limited**

2nd Floor, Chandwani Smariti Bhawan,  
Jwalapur-Kankhal Main Road, Haridwar-249403 (Uttarakhand)

Date .....

I/We are dealing through you as a client in Capital Market and/or Future & Option and/or Currency Derivatives and/or Commodity Derivatives 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 Exchange(s)/Clearing corporation unless I/we instruct you otherwise.

2. My orders for purchase / sale will be given on telephone or orally during my visit to your office. I further declare that all orders placed by me with you will be for my personal and that I will not operate for any client and will not issue any further contracts / bills for the transactions executed through you.

3. I/We request you to retain securities with you for my/our margin/pay-in/other-future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing corporation, unless I/We instruct you to transfer the same to my/our account.

4. 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.

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 5 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 writing within 7 working days from the date of receipt of funds/securities/contracts or statement of account or statement related to it, as the case may be at your registered office.

7. I/We confirm you that I can revoke the above mentioned authority at any time by giving a written notice to you.

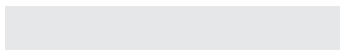
**PREFERENCE OF CLIENT FOR SETTLEMENT OF RUNNING ACCOUNT (FUNDS/SECURITIES/ CONTRACTS)**

Settlement Preferences (Please Tick) : ☐ Monthly ☐ Quarterly

Thanking you

Yours faithfully,

Signature 



Client Name: .....

Trading Code : .....



**VOLUNTARY**  
**AUTHORITY LETTER FOR MAINTAINING RUNNING ACCOUNT**  
(Signing of this letter is optional)

To,  
**Motisons Shares Private Limited**  
2nd Floor, Chandwani Smariti Bhawan,  
Jwalapur-Kankhal Main Road, Haridwar-249403 (Uttarakhand)

Date .....

Ref : Trading Account No. ....

Dear Sir,

Please refer to the trading account opened with you, in the name of .....  
for the purposes of dealing in CM/ F&O/Currency/Commodity Derivatives segments of securities/contracts on the stock exchange(s).  
With reference to the same I/we confirm that I/we confirm that I/we am/are desirous of regularly dealing in  
CM/F&O/Currency/Commodity Derivatives segments of securities/contracts and request you to maintain a running account for funds  
and securities/contracts on my/our behalf without settling the account on settlement of each transaction on my/our behalf. I/we further  
request you to retain all amounts payable and securities/contracts receivable by me/us untill specifically requested by me/us to be  
settled or to be dealt with in any other manner. I/We understand and agree that no interest will be payable to me/us on the amounts or  
securities /contracts so retained with you.

Thank you

Yours trully,

Signature



.....

The Authority provided by me/us to Motisons Shares Private Limited for maintaining running account on dated .....  
is revoked by me/us from dated .....

Client Name: .....

Signature



.....



**AUTHORISATION FOR ELECTRONIC CONTRACT NOTE / STATEMENTS  
VOLUNTARY**

To,

**Motisons Shares Private Limited**2nd Floor, Chandwani Smariti Bhawan,  
Jwalapur-Kankhal Main Road, Haridwar-249403 (Uttarakhand)

Date .....

Dear Sir,

**Subject:** Issuance of Electronic Contract Notes/Statements in Electronic Form (Trading/Demat A/c)

In reference to my/our dealing with you as a client for trading in the Capital Market and/or Futures & Options Segment and/or Currency Derivatives and/or Commodity Derivatives at BSE/NSE/MCX/NCDEX Stock Exchanges, I/We hereby give my/our consent to receive electronic contract notes (ECN), financial statements, margin statements or any other reports/notices in electronic mode from MSPL on my/our below mentioned e mail id.

I/We further give my/our consent to receive bills, ledgers, transaction statements, monthly/quarterly demat statement of accounts/holding statement(s)/bills, or any other reports/notices in electronic mode on my/our below mentioned e mail id for the Depository services I/we am /are availing through Motisons Shares Private Limited .- DP.

I/we confirm that the e mail address has been generated by me/us.

1.....

2.....

I/We further hereby agree that the MSPL shall fulfill the legal obligation by sending the mentioned documents electronically to my/our e-mail id. I/We also agree that non-receipt of bounced mail notification by you shall amount to delivery at my/our email id(s).

I/We agree that the log reports of your dispatching software shall be a conclusive proof of dispatch of documents 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 also undertake to check the ECN/Statement and other documents and bring the discrepancies to your notice within the time period as specified by the regulatory authorities. My/Our non-verification or not accessing the ECN/Statement and other documents on regular basis shall not be a reason for disputing the same at any time.

I/We understand and agree that I/we shall intimate any change in the email id mentioned herein through a physical letter to you. Whenever I/We want to discontinue the said facilities, I/We shall inform to MSPL immediately in writing.

I/We further agree that MSPL will not be held responsible for non receipt of documents sent via electronic delivery due to change in/incorrect e-mail address as mentioned or any other reason which inter alia include technical reasons or malfunction of my/our computer system/server/internet connection etc. Further I/We agree and undertake to indemnify MSPL, that they will not be held liable/ responsible for any losses, claims damages, cost and liabilities etc. caused to me/us due to misuse of information or pursuant to any litigation cases, complaints, actions, etc that may arise in future on account of my/ our above authorization request.

My Trading code is \_\_\_\_\_

My/Our BO ID \_\_\_\_\_

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

**Common Registration Form for availing SMS Alert and /or TRUST facility**

To,  
**Motisons Shares Private Limited**  
"Motisons Tower" 5th Floor, SB-110, Lal Kothi,  
Tonk Road, Jaipur-302015 (Rajasthan)

Date .....

Dear Sir/Madam,

I/We wish to avail the following facility/ies provided by the depository on my/our mobile number as provided below subject to the terms and conditions as specified by CDSL

- a. SMART-SMS alert facility
- b. TRUST- TRansaction using Secured Texting facility

**(please note that SMS alert facility is mandatory if TRUST facility is opted for)**

BOID

1	2	0	6	9	0	0	0		0	0						
---	---	---	---	---	---	---	---	--	---	---	--	--	--	--	--	--

(Please write your 8 digit DPID)

(Please write your 8 digit Client ID)

Sole / First Holder's Name : .....

Second Holders Name : .....

Third Holder's Name : .....

Mobile Number on which  
message are to be sent

+91											
-----	--	--	--	--	--	--	--	--	--	--	--

(Please write only the mobile number without prefixing country code or zero)

**(Please write only the mobile number without prefixing country code or zero)**

**(Existing users registered for SMS alerts:- Please note that if the mobile number for TRUST is different than the registered mobile number for SMS alert, the new mobile number will be updated for SMS alert also. )**

The Mobile number is registered in the name of : .....

E-mail ID : .....

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

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 purpose of availing the said facility.

I/We have read and understood the terms and conditions prescribed by CDSL for the said facility/ies 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.



**VOLUNTARY****AUTHORITY LETTER FOR SALE OF SECURITIES IN CASE OF DEFAULT BY THE CONSTITUENT**

To,

**Motisons Shares Private Limited**2nd Floor, Chandwani Smariti Bhawan,  
Jwalapur-Kankhal Main Road, Haridwar-249403 (Uttarakhand)

Date .....

Dear Sir,

I/We hereby agree that if I/we fail to make payment of consideration to you in respect of any one or more securities/contracts purchased by me/us before the pay-in date notified by the Exchange from time to time, you shall be at liberty to sell the securities/contracts received in pay-out, in proportion to the amount not received, after taking into account any amount lying to mine/our credit, by selling equivalent securities/contracts at any time on the Exchange not later than fifth trading day reckoned from the date of pay-in. If you don't sell the securities/contracts for any reason whatsoever, such securities/contracts shall be deemed to have been closed out at the close out price declared by the Exchange for the fifth trading day. I/We agree that the loss, if any, on account of the close out shall be to mine/our account.

I/We further agree that if I/We fail to deliver any one or more securities/contracts to your pool account in respect of the securities/contracts sold by me/us before the pay-in date notified by the Exchange from time to time, such undischarged obligation in relation to delivering any one or more securities/contracts shall be deemed to have been closed out at the auction price or close-out price, as may be debited to you in respect of the security for the respective settlement, to the extent traceable to me/us on mine/our failure to deliver; otherwise the close out price on the date of pay-out in respect of the relevant securities/contracts, declared by the Exchange. I/We further agree that the loss, if any, on account of the close out shall be to mine/our account.

I/We further agree that if for any reason, schedule of pay-in and pay-out is modified the aforesaid shall be made applicable reckoning the actual date of pay-in and/or pay-out, as the case may be.

yours truly,

Signature :  

Client Name : ..... Place.....

Trading Code : .....

**VOLUNTARY****INTERNET TRADING LETTER**

To,

**Motisons Shares Private Limited**2nd Floor, Chandwani Smariti Bhawan,  
Jwalapur-Kankhal Main Road, Haridwar-249403 (Uttarakhand)

Date .....

Sir,

We wish to trade through internet on **Stock Exchange(s)** and confirm that we are fully aware of and understand the risks associated with availing of a service of routing orders through internet including the risk of misuse and unauthorized use of our Username and or Password by a third party and the risk of a person hacking into our account on your ITORS system and unauthorisedly routing order on behalf of us through the System. We agree that we shall be fully liable and responsible for any and all unauthorized use and misuse of our Password and/or Username and also for any and all acts done by any person through your ITORS system on our Username in any manner whatsoever.

We hereby confirm you to send our Username and Password on the below mentioned e-mail address.

E-mail Address : .....

Thanks and best regards

Signature  

Client Name .....

Trading Code : .....

**DECLARATION FOR MOBILE NUMBER & E-MAIL**

I,.....having PAN No.....do hereby declare that my mobile no. is.....  
Email Id is .....Further, I authorize Motisons Shares Private Limited that the same may be used for giving me any information/alert/sms/call.

I further declare the above mentioned statement is true and correct.



Client Name : .....

Trading Code :.....

Date :.....

Verified by (to be done by **Motisons Shares Private Limited**)

Name of Employee.....

Signature.....

Date.....

---

**VOLUNTARY****CLIENT DEFAULTER DECLARATION**

I, .....having PAN no. ....do hereby declare that I have not been involved in any terrorist activity and I have not been declared as defaulter or my name is not appearing in defaulter database as per SEBI/ Various Exchanges/ Regulatory bodies/CIBIL (Credit Information Bureau of India Ltd.) etc.

I further declare that the above mentioned declaration/statement is true and correct.



Client Name:.....

Trading Code:.....

Date:.....

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

**VOLUNTARY****Authorisation for Debiting the Trading Accounts / Depository Charges for  
& Undertaking for the Payment of Interest in case of occurrence of Debit Balance**

To,

**Motisons Shares Private Limited**

Depository Services, Motisons Tower, 5th Floor, SB-110, Lal Kothi, Tonk Road, Jaipur-302015

I/We \_\_\_\_\_ residing at \_\_\_\_\_

maintain Trading Accounts ("the Said Accounts") with **Motisons Shares Private Limited** companies incorporated and registered under the Companies Act. 1956 and having their Registered Office at 2nd Floor, Chandwani Smariti Bhawan, Jwalapur-Kankhal Main Road, Haridwar-249403 (Uttarakhand) Hereinafter called the brokers (which expression shall unless it be repugnant to the context or meaning thereof mean and include its successors in title.

The Said Accounts are at \_\_\_\_\_ branch and the Trading-Account no is \_\_\_\_\_

I/We authorise the **Motisons Shares Private Limited** to debit the Said Accounts for the Service Charges related to Depository Services payable by the below mentioned persons .

S. No.	Name	Depository A/c.

**SIGNED AND DELIVERED**

Name .....



Name .....

Witnessed

**Specimen Signature**

DP ID	1	2	0	6	9	0	0	0	Client ID	0	0					
-------	---	---	---	---	---	---	---	---	-----------	---	---	--	--	--	--	--

	First/Sole Holder	Second Holder	Third Holder
<b>Name</b>			
<b>Signature</b> (In black ink only)			

**Tariff for BSDA**

Basic Services Demat Account (BSDA) (Annual Maintenance Charges)	Nil Upto Holding Value Rs. 50,000/-
	Rs.100 - If Value of Holding Rs. 50,001/- to 2,00,000/-
	And If Value of Holding More Than Rs. 2,00,000/- Then Normal AMC Applicable

Place : \_\_\_\_\_

(28)

Date : \_\_\_\_\_

## FATCA &amp; CRS Declaration - Individual

PAN           Trading       DP Code

Name

Place of Birth           Country of Birth

Nationality

Annual Income ☐ Below Rs. 1 Lac ☐ Rs. 1 Lac to 5 Lac ☐ Rs. 5 Lac to 10 Lac  
☐ Rs. 10 Lac to 25 Lac ☐ Rs. 25 Lac to 1 Crore ☐ > 1 Crore

Net Worth Amount Rs. .... Net Worth as on

(Net worth should not be older than 1 year)

Occupational ☐ Business ☐ Private Sector ☐ Professional ☐ Government Service ☐ Public Sector  
 Detail . ☐ Agriculturist ☐ Housewife ☐ Student ☐ Retired ☐ Forex Dealer ☐ Others Pl. Specify

Politically Exposed Person (PEP) ☐ Related to Politically Exposed Person (RPEP) ☐

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

If yes please indicate the all countries in which you are resident for tax purpose and the associated Tax ID number below.

Sr. No.	Country	Tax Identification Number	Identification Type (TIN or Other, please specify)
1.			
2.			
3.			

## DECLARATION

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

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

Please note that you may receive more than one request for information if you have multiple relationships with us or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

## Certification

I/We have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby agree and confirm to inform Motisons Shares Private Limited for any modification to this information promptly. I/We further agree to abide by the provisions of the Scheme related documents inter alia provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI)'.

Sign here: 

Date

Please tick the applicable tax resident declaration-

(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here





# MOTISONS

Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3 (iv) (A) of Part C)			
Company of Tax residency*			
PAN*			
Address	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____
Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office
Tax ID*			
Tax ID Type			
City of Birth			
Country of birth			
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____
Nationality			
Father's Name			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Holding (%) <sup>\$</sup>			

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

'If UBa is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position I Designation like Director I Settlor of Trust I Protector of Trust to be spedfed wherever applicable.

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

\$ Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory I Comp < lny Secretary

## DECLARATION

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

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

Please note that you may receive more than one request for information if you have multiple relationships with us or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Sign here: 

Date :

Place :

Name

Designation

### Certification

I/We have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby agree and confirm to inform Motisons Shares Private Limited for any modification to this information promptly. I/We further agree to abide by the provisions of the Scheme related documents inter alia provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI)'.

Sign here: 

**FOR OFFICE USE ONLY**

UCC Code allotted to the Client: \_\_\_\_\_

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

I / We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.

.....  
**Signature of the Authorised Signatory**

Date .....

**Seal/Stamp of the stock broker****FOR OFFICE USE ONLY**

UCC / Trading Code	
Location	
Introducer	
Relationship Manager	

**APPROVED BY**

Branch/Head Name		
Signature		
Date		

Activity	Name	Signature
Physical Verification done by		
Data capturing done by		
Final checking done by		

