

CLIENT REGISTRATION FORM

Non Resident Indian (NRI)

(EQUITY, F&O, DEMAT)

S.No.: Version: 4.0 NON RESIDENT INDIAN (NRI)	
CLIENT NAME :	
CLIENT CODE (UCC):	
DP CLIENT ID. :	
DP CONTROL NO. :	
STAMP OF SUB BROKER / BRANCH WITH NAME AND ADDR	ESS
GROUP 2	GROUP 3

SERVICES OFFERED TO NRI INVESTORS

Online Trading in Equities and Derivatives I Distribution Services of IPO and MF I Real Estate Advisory Services I SMC Easy go I Back Office support on Mobile I Award Winning Research Desk I Dedicated Support Desk I Depository Services I Wealth Management













G	ENERAL INSTRUCTIONS TO FILL	THE EODM			
A.					
Λ.	All correction / overwriting should be				
В.	PROVIDE ALL NECESSARY DOCUMENT. 137 Name of client on all documents should be compared to the		CHECKLIST) page A1/A3 - (For minor difference, fill declaration on page C12)		
C.	CLIENT SIGNATURES				
		INDIVIDUAL	NON-INDIVIDUAL		
	On Documentary Proofs	All documentary proofs should be self-attested (signed) by Individual.	All documentary proofs should be signed by authorised signatory(ies) / Karta / Partner with rubber stamp		
	On KYC Form: marked as	Individual should sign at 28 places	Karta / Partners / All authorised signatory(ies) should sign with rubber stamp		
	Sole / First Holder		Siloulu sigit with tubber stamp		
	Second Holder				
	Third Holder				
	s Client signatures should match with sign on PAN card / DL / Passport (in case of individual) OR account opening payment cheque. In case of any mismatch provide declaration on page C12				
D.	D. WITNESS SIGNATURES with name & address required at 1 places (marked as ⊙-⊙ on pages C1)				
E.	E. REGISTERED Sub-Broker / AP/ RM signature with stamp				
	INDIVIDUAL / NON INDIVIDUAL				
	In Person Verification (IPV) on Page A2				
	On all copies of client documents				
	Introducer details and signature on Page A				
F.	F. Fill Brokerage and choose ANYONE account opening scheme from Tariff Sheet on Page A9 Approval is provided (if required)				
G.	G. Provide unique Email ID & Mobile Number on Page A2/A3 Note: Provide your mobile number & E-mail ID to receive information of your transactions directly from Exchange & Depository on your mobile / E-mail at the end of the day. If Mobile No. is of Spouse/Dependent Children or Parents, please sign declaration on Page C12				
Pro	of of Identity				
Сору	of PAN Card				
Pro	of of Address (Anyone)				
	ndividuals		Aadhaar / Passport / Voters ID Card/ Driving License		
(Clie	nt / Karta / Partners / Directors / Promoters /	Trustee / Authorised signatory)	(Documents having an expiry date should be valid on the date of submission)		
For Non Individuals			Telephone Bill (only land line) / Electricity bill / Gas bill / Bank Account Statement		

Bank Account Proof (Anyone)

(Corporate / Partnership / Trust etc.)

Copy of cancelled cheque leaf with pre-printed name / pass book / Latest bank statement specifying name of the constituent, MICR Code and IFSC of the bank should be submitted

(Not more than 3 months old) Registered Lease or Sale Agreement

Additional documents in case of trading in derivatives segments (Anyone)		
Copy of latest Income Tax Return	Latest Net worth certificate	
Last month Salary Slip or Copy of Form 16 (for salaried persons)	Copy of demat account holding statement with value	
Bank account statement for last 6 months	Copy of Annual Accounts	

Demat Account Proof (For clients having demat account outside SMC) Demat client master or recent holding statement issued by DP bearing name & PAN of the client

Please ensure				
1. Proof of Identity (PoI)	If Name/Photo/Signature on PAN Card is not clear, then submit additional Pol Copy of PAN Card is mandatory for all applicants (except for applicants residing in state of Sikkim)			
2. Proof of Address (PoA)	If correspondence & permanent addresses are different, then proofs for both sould be submitted Address in proof should match with address in KYC form			
3. Bank + MICR/IFS Code Proof	 Proof should contain IFS Code (11 digits) / MICR Code (9 digits) of Bank If name is not pre-printed on cheque - then submit additional proof containg the Bank A/c number and Name of Client 			
4. Income Proof	Mandatory if you wish to trade in Derivatives (F&O/Currency/Commodity) segments			
5. Demat A/c Proof	Latest client master or Transaction / Holding statement (with name, PAN, DP & client ID).			
* Documents should not be more than 3 months old				

^{**} Documents having expiry date should be valid on the date of submission

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	NOWLEDGMENT SLIP knowledge receipt of applic	cation for opening a	trading and demat accou	unt from :	
Mr. / M	s. / M/s				
As first	applicant along with the d	ocuments and cheq	ue(s).		
	Towards	Amount	Cheque No.	Date	Bank Name and Branch
☐ Y ☐ N	Account opening Fee (For Trading Account)				
□ Y □ N	Margin Amount				
Signatu	re of Sales Executive :				
Name:					
Date : _		Place :			

- Issue A/c payee cheque in the favour of SMC GLOBAL SECURITIES LTD. SMC does not accept any fee in cash.
 You may check current status on our website by using following link: www.smctradeonline.com & click on check A/c status
 You will receive SMS & E-mail notification on activation of your account.



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) For particular section update, please tick(
) in the box available before the section number and strike ffo the sections not required to be updated.



For office use only	Application Type*	New	Update	
(To be filled by financial institution)			·	ory for KYC update request)
	Account Type*	Normal	Simplified (for low risk customers)	☐ Small
☐ 1. PERSONAL DETAILS				
Р	refix First	Name	Middle Name	Last Name
☐ Name* (Same as ID proof)				
Maiden Name (If any*)				
Father / Spouse Name*				
Mother Name*				
Date of Birth*	D — M M — Y Y Y	Y	_	РНОТО
Gender*		☐ F- Female	☐ T-Transgender	
Marital Status*		Unmarried	Others	
Citizenship*	1	Others		
Residential Status* Resident		☐ Non Reside ☐ Person of In		
Occupation Type* S-Service	e(☐ Public Secto	or Government Sector)	
	。(☐ Professional	☐ Self Employ	ed Retired Housewife S	Student)
☐ B-Busine ☐ X- Not Ca				
	J			(1) 📈
☐ 2. TICK IF APPLICABLE	RESIDENCE FOR TA	X PURPOSES IN	JURISDICTION(S) OUTSIDE INDIA	
ADDITIONAL DETAILS REQUII			()	
Country of Jurisdiction of Resident		,		
Tax Identification Number or eq		sdiction)*		
Place / City of Birth*	, ,,		try of Birth*	
☐ 3. PROOF OF IDENTITY ((Pol)*			
(Certified copy of any one of the following	owing Proof of Identity[Po	l] needs to be subm	nitted)	
A- Passport Number			Passport Expiry Date	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
B- Voter ID Card				
C-PAN Card				
D- Driving Licence			Driving Licence Expiry Da	te DD-MM-YYYY
☐ E- UID (Aadhaar)				
F- NREGA Job Card				
Z- Others (any document notifie	d by the central government)		Identification Number	
☐ S- Simplified Measures Acc	count - Document Type		Identification Number	
4. PROOF OF ADDRESS	(PoA)*			
4.1 CURRENT/PERMANENT/C		ETAILS		
(Certified copy of any one of the following	owing Proof of Address [Po	oA] needs to be sub	omitted)	
Address Type* ☐ Residential	I / Business 🔲 I	Residential	☐ Business ☐ Registere	d Offce
Proof of Address* Passport		Driving Licence	UID (Aadhaar)	
☐ Voter Ident ☐ Simplified I	ity Card Measures Account -D	NREGA Job Card ocument Type	d U Others De	ase specify
Address		7 F =		
Line 1*				
Line 2			O:4. /T / \	illogo*
Line 3 District*	Pin / Post Code	*	State / U.T City /Town / V	Country Country
	1 111/1 031 0000		5.dio / 5.1	
S smc				A 1

4.2 CORRESPONDENCE	E / LOCAL ADDRESS DETAILS *	
Same as Current / Perma	anent / Overseas Address details	
Line 1*		
Line 2		
Line 3		City /Town / Village*
District*	Pin / Post Code* Sta	ate / U.T Country
4.3ADDRESS IN THE JUR	RISDICTION DEATILS WHERE APPLICANT IS RESIDENT O	UTSIDE INDIA FOR TAX PURPOSES*(Applicable if section 2 is ticked
☐ Same as Current / Perma	anent / Overseas Address details	s Correspondence / Local Address details
Line 1*		
Line 2		
Line 3		City /Town / Village*
State*	ZIP/ Post Co	ode* Country
☐ 5. CONTACT DETAILS	(All communications will be sent on provided Mobile no. / Ema	il-ID)
Tel. (Off)	Tel. (Res)	Mobile —
FAX —	Email ID	
6. DETAILS OF RELAT	ED PERSON	
Addition of Related Person	☐ Deletion of Related Person KYC Number of F	Related Person (if available*)
Related Person Type*	☐ Guardian of Minor ☐ Assignee	☐ Authorized Representative
NI*	Prefix First Name	Middle Name Last Name
Name*	(If KYC number and name are provided, below details of section	on 6 are ontional)
BBOOK OF IDENTIFY	·	οπο αιε ομιοπαι)
PROOF OF IDENTITY [Po	IJ OF RELATED PERSON*	
☐ A- Passport Number		Passport Expiry Date
□ B- Voter ID Card		
☐ C-PAN Card		
□ D- Driving Licence		Driving Licence Expiry Date DD - MM - YYYY
☐ E- UID (Aadhaar)		
☐ F- NREGA Job Card		
	notified by the central government)	Identification Number
	s Account - Document Type	Identification Number
☐ 7. REMARKS (If any)		
8. APPLICANT DECL	ARATION	
	shed above are true and correct to the best of my knowledge and belief and I under	rtake to inform you of any changes
therein, immediately. In case any of the	the above information is found to be false or untrue or misleading or misrepresenting, I	· · · · · · · · · · · · · · · · · · ·
for it.		
·	nation from Central KYC Registry through SMS/Email on the above registered nu	mber/email address. (2)
Date : DD — MM —	2 0 Y Y Place:	(-1/22)
9. ATTESTATION / FO	OR OFFICE USE ONLY	
Documents Received	Certified Copies	
INSTITUTION DETAI	LS & KYC VERIFICATION CARRIED OUT BY	IN DEDCOM VEDICICATION (IDV)
Name SMC GLOBAL SECU	JRITIES LTD. Code	IN-PERSON VERIFICATION (IPV)
Date		DOCUMENTS VERIFIED WITH ORIGINALS
Emp. Name		CLIENT INTERVIEWED BY
Emp. Code		
Emp. Designation		Date: d d / m m / 2 0 y y
		Employee/Sub-Broker/AP Details:
Emp. Branch		Name:
		Code:
	[Employee Signature]	Designation:
		Signature:
Α 2		

TRADING & DEMAT ACCOUNT RELATED ADDITIONAL DETAILS

	RADING ACCOUN			
NRE ACCO	NRO DUNT DETAILS	Both		
NRO Saving			NP	E Saving
ank Name :				Name :
ccount No. :				int No. :
ranch :			Branc	
S Code:	0		IFS C	
IICR Code :			MICR	Code:
NRO PIS			NRI	E PIS
ank Name :			Rank	Name:
ccount No. :				int No. :
ranch :			Branc	
S Code:	0		IFS C	
IICR Code :				Code:
RBI Approval N	umber :			pproval Number :
RBI Date :	D D — M	M — Y Y Y Y	RBI D	· ·
ay-Out Optic	on: As Per G	roup Cheque)	Online Transfer / NEFT / RTGS
Bank/MICF	R/IFSC proof subm	nitted: Cancelled Chec	ue (with <u>C</u>	lient Name & A/c No. pre-printed)
Bank Passb	ook* (If hand written,	then with stamp of Bank)	Bank Veri	fication Letter* (with Rubber Stamp & Sign of Bank Manager)
Bank Statem	nent* (Either on Bank	Stationary or with rubber stamp & s	sign of Banl	(Manager) *Documents should not be more than 3 months
DEPOSITOR	RY ACCOUNT DET	TAILS		(Through which transactions will generally be routed)
	to open New Dem		NRO	Both
I/We alread	dv have Demat A/c	(Please Provide following det	tails)	
. NRO Demat	•		DP ID :	
	000			
. NRE Demat			DP ID :	
Name of Dep	ository Participant :			
	Proof submitted :		nsaction c	r Holding statement
TRADING	REFERENCE	(with Client Name, PAN, DP	& Client ID)	
	REFERENCE he relevant boxes v	where you wish to trade. The	seament r	not chosen should be struck off by the client.
		,		SEGMENT
EXCHANGE		CASH		F & O*
NSE			(3a)Æ	(3b) <i>€</i> ≤
BSE			(3c) Ø	(3d)Æ
If you wisl	h to trade in deriva	tives (F&O/Currency) seam		mit <u>ANY ONE</u> of the following income proof (Mandato
		atleast 6 months period and la		est Net worth Certificate by CA/CS
entry should	not be older than 3 m	onths)	Self	Declaration along with relevant Supporting documents
	olding Statement (wit cknowledgement	h Value & duly stamped by DP)		est Annual Accounts
	Slip/Copy of Form 10	6	Any	Other relevant documents substantiating ownership of ass
<u>smc</u>				A

FACILITIES	
	lerts from stock exchanges : SMS Alert E-mail Alert Both None
	Mobile & E-mail ID in KYC form (Page A1 - Individual / A3 - Non-Individual)
Whether you wish	to receive Contract Note: Electronic Physical
•	to receive Standard documents*: Electronic Physical
	Rights & Obligations, Risk Disclosure Document, Guidance Note and Policies & Procedures ail ID in KYC form (Page A1 - Individual / A3 - Non-Individual)
I/We wish to avail	facility of internet trading / wireless technology : Yes No
TRADING HISTO	RY
	ce / Number of Years of Investment EquitiesYears in DerivativesYears in other Investment related fields No Prior Experience
Stock Profile :	Nil < 5 Lac Rs. 5 - 25 Lac Rs. 25 - 50 Lac Rs. 50 - 1 Crore Above 1 Crore
If you are dealing	with any other stock broker, please provide following detail
Name of the stock by Name of AP (If any) Client Code (UCC)	roker
Exchange	□ NSE □ BSE □ MCX □ NCDEX □ ICEX
•	dues pending from / to such stock broker / AP nultiple stock brokers, please provide details of all. (Please Specify)
Past Actions	on / proceedings initiated / pending / taken by SERL / Stock Evolution / any other authority against the applicant /
constituent or its pa	on / proceedings initiated / pending / taken by SEBI / Stock Exchange / any other authority against the applicant / atners / promoters / whole time directors / authorised persons in charge of dealing in securities & commodities during
last 3 years.	(Please Specify)
INCOME EDUCA	TION & OTHER DETAILS
Gross Annual Inc	
Net-worth in X	Net worth should not be older than 1 year) as on (date) DDDMM20YY (Mandatory for Non-Individual Client)
Occupation	Private Sector Service Public Sector Government Service Business Professional Agriculturist Retired Student Forex Dealer Other (Please Specify)
Educational Detai	Is: High School Graduate Post-Graduate Doctorate Professional Degree Under High School Illiterate Other (Please Specify)
Olient	Non-commercial participant (financial participant/ trader/ arbitrager)
Client Category for	Commercial participant (value chain participant/ exporter/importer/hedger
Commodities Derivatives	Farmers/FPOs Value Chain Participants (VCPs) Other (Please Specify) (Please select anyone. if not selected, default option will be 'Other'. In case of any change in category, inform us immediately in writing)
Please tick, if app □ In case of Non-	licable Politically Exposed Person Related to a Politically Exposed Person -Individual, provide held details as page A11
Is the entity involv	ved providing any of the following services
- For Foreign Excha	ange / Money Changer Services Yes No
- Gaming / Gamblin	g / Lottery Services (e.g. casinos, betting syndicates) Yes No
- Money Lending /	Pawning Yes No
In case of Non-Inc Annexure A on pag	lividual, provide details of persons authorised to deal in stocks of behalf of the company / Firm/ others in ge A 11.
Any other informa	ntion :
GOODS & SERVI	CE TAX (GST) DETAILS (If applicable)
	for GST, kindly provide copy of registration certificate
GSTIN	Sismc
A 4	

DEMAT ACCOUNT OPENING FORM - CDSL (DPID 12019101/12019103/12027000) It to open a Depository Account in my / our name as per the following details.

TYPE OF ACCOUNT	<u> </u>		(Please ✓ whicheve	er is applicable)
TYPE OF ACCOUNT		OUR CTATUS	- (1 loudo y Willone Ve	applicable)
STATUS NRI	NRI Repatriable	SUB-STATUS NRI Non-Repartriable Both		
Foreign Nation	· ·	Foreign National - Depository Receipts	Other (Pleas	e Specify)
1 oreign ivation	ai Toreign National	Toreign National - Depository Necelpts	Other	
ACCOUNT HOLDE	RS DETAILS			
Name of sole/1st Hold	ler (Mr. / Ms.) :			
		UID :	PAN :	
Name of 2nd Holder (I	Лr. / Ms.) :			
		UID:	PAN:	
Name of 3rd Holder (N	1r. / Ms.) :			
		UID :	PAN :	
Provide KYC Appl	ication Form for all Joint Holders (Download additional KYC form from www.smct	radeonline.com/download	d.aspx)
Nationality : Ind	an Other (Please Specif	/)		
DETAILS OF GUAF	RDIAN		In case the accoun	t holder is minor
Name of Guardian (M				
,	1. / IVII 5 / IVI5.).			
Relationship:			PAN : P	
ADDITIONAL DET	AILS			
Account statemen	t requirement As per SEBI Re	egulation Monthly Fortn	ightly Weekly	Daily
I/We instruct the D	P to receive each and every cred	lit in my / our account	✓ Yes	No
	ve dividend/interest directly into It option would be 'Yes'. ECS is mandatory in	my/our Bank A/c through ECS for locations notified by SEBI from time to time.)	Yes	No
I/We request you t	o send Electronic Transaction-Co	um-Holding Statement through E-mail	Yes	No
	E-mail ID in KYC form (Page A1-In	dividual / A3-Non-Individual)		
SMS Alert Facility	on Mobile Number as given in KYC	Form	Yes	No
		ty' on our website under download section. do not wise to avail of this facility, cancel this option)		
		Pledge instructions in my / our account end. (If not marked, default option will be 'No')	Yes	No
I/We would like to	share the E-mail ID with the RTA		Yes	No
I/We would like to	recieve the annual report (If not ma	rked, default option will be 'Physical') Physical	Electronic	Both
To register for e	asi, please visit website www.cdslin	dia.com [easi allows a BO to view his ISIN balances, i	transactions and value of the p	portfolio online.]
Bye Laws as are in ford the date of making this form. I / We further agre	e from time to time. I / We declare the application. I / We agree and undert be that any false / misleading informa	ument and Terms & Conditions and agree to ab at the particulars given by me / us above are true ake to intimate the DP any change(s) in the det tion given by me / us or suppression of any mat epository Account in my / our name as per the a	e and to the best of my / c ails / Particulars mention erial information will rend	our knowledge as c ed by me / us in th
Sole	/ First Holder/ Authorised Signator	y Second Holder/ Authorised Signatory	Third Holder/ Autho	rised Signatory
Signature	(4)@	(1)		(1)
	(4)20)	· \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		\ ' /\ X /

Ssmc

	DEMAT ACCOUN	T OPENING FORM - NSDL (DPID	IN303655)	
I/ We request to open a [Depository Account in	n my / our name as per the following det	ails. Date:	D D M M 2 0 Y Y
TYPE OF ACCOUNT			(Please √ w	hichever is applicable)
STATUS		SUB-STATUS		
NRI	NRI Repatriable	NRI Non-Repartriable Both		
Foreign National	Foreign National	Foreign National - Depository Receipts	Other	(Please Specify)
ACCOUNT HOLDERS DE	TAILS			
Name of sole/1st Holder (Mr.	/ Ms.):		PAN:	
Name of 2nd Holder (Mr. / Ms	s.) :		PAN :	
Name of 3rd Holder (Mr. / Ms	.) :		PAN:	
r Provide KYC Application □ Provide KYC Application	Form for all Joint Holder	rs (Download additional KYC form from www.smo	ctradeonline.com/c	download.aspx)
Nationality: Indian	Other(Please Sp	pecify)		
DETAILS OF GUARDIAN			In case the	account holder is minor
Name of Guardian (Mr. / Mrs	:/Ms)·			
			PAN:	P
Relationship:			FAIN .	
ADDITIONAL DETAILS				
I/We authorise you to rec	ceive credits automatica	ally into my / our account	Yes	□ No
Account to be operated t	through Demat Debit an	d Pledge Instruction (DDPI)	Yes	□ No
		-Cum-Holding Statement through E-mail -Individual / A3-Non-Individual)	Yes	☐ No
SMS Alert Facility on Mot		YC Form Sole / Ist Holder	Yes	No
(Mandatory, If you have given DD	VF 1. J	IInd Holder	Yes	No
		IIIrd Holder	Yes	No
Mode of receiving statem	nent of account (Tick any c	one)	Electronic	Physical

DECLARATION

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

I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant. I/ We request to open a Depository Account in my / our name as per the above details.

	Sole / First Holder	Second Holder	Third Holder
	/ Authorised Signatory	/ Authorised Signatory	/ Authorised Signatory
Signature	(5) 🕊	(2)	(2) 🚫

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

Please visit download section of our website www.smctradeonline.com for 'Notes and Instruction' to fill demat account opening and nomination form



NOM	INATION FORM							FOR INDIVIDUAL ONLY
	nation Details							
all the	assets held in my / our	account in the event of	n below] my / oui	I/We wis r death.	h to make a nom	ination and do hereb	y nominate the	following person(s) who shall receive
Nomi nomi	nation can be made nees in the account.	upto three	De	tails of	1 st Nominee	Details of 2 nd	Nominee	Details of 3 rd Nominee
1	Name of the nomine	ee(s) (Mr./Ms.)						
2	Share of each	Equally			%	İ	%	%
	Nominee	[If not equally, specify %]		Any odd	lot after division	shall be transferred	d to the first no	minee mentioned in the form.
3	Relationship With t							
4	Address of Nomine	e(s)						
	City / Place: State & Country:							
		PIN Code				Ī		
5	Mobile/Telephone N	lo. of nominee(s)						
6	Email ID of nomine	e(s)						
7		of following and ne] nature PAN ring Bank account no.						
Sr N	Proof of Identity	Demat Account ID led only if nominee(s) is	s a mino	or.				
8		of minor nominee(s)	o a mino	<i>J</i> 1.				
9	Name of Guardian ({in case of minor n	Mr./Ms.)						
10	Address of Guardia	` <i>' •</i>						
	City / Place: State & Country:							
		PIN Code						
11	Mobile/Telephone n Email ID of Guardia							
12 13	Relationship of Guardia							
14	Guardian Identificat [Please tick any one provide details of san Photograph & Sign	tion details – of following and						
				CI	LIENT SIGNATU	IRE *		
	Fir	rst / Sole Holder			Second	Holder		Third Holder
Sign Clien		(6	6) <i>S</i> S			(3)		(3) 🚫
Date	. D D M M 2 0	Y Y Place:		•				
	Note: This nomination shall supersede any prior nomination made by the account holder(s), if any.							
								FOR INDIVIDUAL ONLY
involv would may a	ed in non-appointm	nent of nominee(s) a	and furt nents / ırt or of	ther are informa ther suc	aware that in ation for claimi ch competent	case of death of a ing of assets held authority, based	ill the accoun	unt and understand the issues t holder(s), my / our legal heirs rading / demat account, which of assets held in the trading /
			NA	ME AND	SIGNATURE O			
	Fir	rst / Sole Holder			Second	Holder		Third Holder
Nam	ie							
Sign Clien		(7	7) Ø			(4)		(4)

Place :

Date : | D | D | M | M | 2 | 0 | Y | Y |

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

DISCLOSURE	
Dear Client, This is to inform you that we do client based trading and pro-account trading in NSE, BSE,	For SMC GLOBAL SECURITIES I
MCX, NCDEX and ICEX.	Authorised Signa
OPTION FOR DIS BOOKLET	
OPTION 1: I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / u	is immediately on opening my /

■ OPTION 1: I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL/NSDL account though I /we have issued a Demat Debit and Pledge Instruction (DDPI) in favour of SMC Global Securities Limited for executing delivery instructions for setting stock exchange trades[settlement related transactions] effected through suchClearing Member.
 Or
 OPTION 2: I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a DDPI in favour of SMC Global Securities Limited and/or will be using eDIS facility for executing delivery instructions for settingstock exchange trades [settlement related transactions] effected through such Clearing Member. However, the Delivery InstructionSlip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

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 and all voluntary / Non-voluntry documents.
- 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.
- 4. I/We declare that SMC Global Securities Limited, the brokers, has put me/us on notice that it is engaged in not only client based trading but also in pro-account trading.

	CLIENT SIGNATURE						
	First / Sole Holder	Second Holder	Third Holder				
Sign of Client	(8)	(5)	(5)				
Date :	D M M 2 0 Y Y Place:						

DETAILS OF POLITICALLY EXPOSED PERSONS (PEP)/ RELATED TO POLITICALLY EXPOSED PERSON (RPEP) For-Non-individual Relation with the holder (i.e. Please tick the Name of the Authorized signatories /Promoters S.No. promoters, whole time directors etc relevant option. /Partners / Karta/ Trustees /Whole Time Directors PEP **RPEP** 1. 2 PFP **RPFP** 3. PEP **RPEP** 4. RPFF

ignature of authorised signatory	(9) 🗷

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



S

BROKERAGE STRUCTURE							
SEGMENT	%	Minimum	Options				
SEGIVIENT	70		%	Min per lot	Max per lot		
Cash (Intraday)							
Cash (Delivery)							
Cash (Trade to Trade)							
F&O							

- **Note:** 1. Rs. 25/- will be charged minimum per segment.
 - 2. Securities Transaction Tax (STT) & Commodities Transaction Tax (CTT), GST, Other Charges, Stamp Duty and Other Statutory Charges will be levied separately as applicable from time to time.
 - 3. Transaction charges will be levied extra as per Company policy as applicable from time to time.
 - 4. The company reserves the right to review brokerage, transaction charges and other charges within limits set by SEBI, with sufficient prior notice.

TARIFF SHEET

Scheme Particulars	Regular S	cheme [%]	LIFE-5 Scheme (5 Year upfront AMC)#		
	NRE	NRO	NRE	NRO	
Please select					
Account Opening Charges^	1200	1200	4150	4150	
Account Maintenance Charges (AMC)	1000	1000	Nil (Nil (for 5 Years)	
	Common Tariff applica	ble to all Scheme			
Market Sell Transaction Charges - DDPI	0.02% subject to Min 20/- & Max 100/- per Instruction				
Market Sell Transaction Charges - NON DDPI	0.03% subject to Min 25/- & Max 100/- per Instruction				
Off Market Transaction Charges	0.03% subject to Min 30/- & Max 100/- per Instruction				
Dematerialisation	20/- Per Certificate (Rs. 30/- for 1st Certificate) Courier Charges Extra (Rs.25/- for Local & Rs.40/- for outstation courier)				
Rematerialisation	30/- per Certificate (1 Certificate / 100 shares) Courier Charges Extra (Rs.25/- for Local & Rs.40/- for outstation courier)				
Additional Statement Charges	5/- Per page, postal/courier charges will be extra (Applicable on daily/weekly/fortnightly statement also)				
MF Restat/Redemption Charges	25/- per Instruction	Demat Rejection/DIS	Rejection Charges	25/- Per Instance	
Pledge Creation	60/- per Instruction	Pledge Closure / Inv	ocation	30/- per Instruction	
Delivery Instruction Book Charges	30/- (20 Leafs) Delivery Instruction Slip by FAX		Slip by FAX	5/- Per Instruction	
Client Modification/CML Charges	25/- Per request	Additional Client Ma	ster Charges	25/- Per request	

TERMS & CONDITIONS:

- Account Opening Charges are inclusive of Goods and Service Tax (GST). For all remaining charges, Goods and Service Tax (GST) will be levied separately.
- % First year AMC is free in regular scheme accounts. From next year onwards, AMC as per schedule of charges will be levied.
- # AMC of Rs. 2500/- plus GST will be levied at the end of 5 year.
- Other Charges: Cash Segment Max of 0.02% on Transaction Value, Futures Segment Max of 0.006% on transaction Value, Options Segment Max of 0.006% on Transaction Value. Other Charges represents a consolidated charge towards providing various value added services such as Trade confirmation SMS, Electronic Account Access, Portfolio Tracker, access to research reports, Market News SMS and other value added services.
- If no transaction is done in any Calendar Quarter then Diet application will be deactivated and Rs 250 shall be levied on reactivation request.
- The Company reserves the right to modify/add/withdraw any scheme at any time without prior notice. In case of any upward revision in charges, 30 days notice
 would be given by email/post shall be treated as sufficient notice.
- AMC will be charged yearly in advance. Any Service not mentioned above will be charged extra.
- In case of non-payment of bills/ dues within 15 days of due date, the DP services are liable to be discontinue within a period of 30 days from the date of demand. The renewal charges for resuming the services will be Rs. 100/-.
- · Security deposit for CDSL's 'easiest' facility (optional) is Rs. 2,500/-.
- Demat Charges for on market sale transactions will be debited directly in client's bill.
- If NOW is activated for other than NSE, then Rs. 150 plus GST per segment will be charged every month or part thereof

I/We have read the above given information and agree to pay the same. I/We authorize you to debit the trading account maintained with you for the account opening charges for trading account payable to you. Any such sum debited to my account shall be binding on me/us.

CLIENT SIGNATURE					
	First / Sole Holder	Second Holder	Third Holder		
Sign of Client	(10) 🗷	(6)	(6)		



UNDERTAKING CUM INDEMNITY - IN RESPECT OF FACSIMILE INSTRUCTION FOR OPERATION OF DEPOSITORY ACCOUNT

		BAL SECURITIES LIMITED nti Chamber, Pusa Road, New Delhi-10005				
BO II	D	1 2 0				
Office	xecute that 11/6B	is UNDERTAKING CUM INDEMNITY in favour of SMC GLOBAL SECURITIES L T, Shanti Chambers, Pusa Road, New Delhi - 110005 hereinafter called "the DP" ttle) as follows:				
		Ve maintain a Beneficial Owner Account (s) ("the said Account") mentioned DP at its main/branch office, located at	9.	consequence of the DP	e for any losses or damages which acting in accordance with or in rursuant to the authority conferred here	eliance upon, any Fax
As per the instructions for operation of the said Accounts, the same is allowed to be operated by us or the persons authorised, in that behalf (hereinafter referred to as "Authorised Person/s"). AND WHEREAS in the day to day business, I am/we are required to give urgent instructions to the DP for operation of the said/account: WHEREAS the DP has agreed to accept, the original instruction slip, a fax submission thereof signed by the authorised persons to operate the said account under their signatures, subject to the indemnity herein offered by me/us to the DP on the terms and conditions herein mentioned. NOW IN CONSIDERATION OF THE ABOVE, I/We hereby irrevocably agree, confirm and undertake to the DP as follows: 1. I/We shall transmit the Fax instructions only to the fax number informed/provided to us by the DP. 2. The Fax submission shall be signed by the Authorised Person/s mentioned in the List of Authorised Signatories submitted by me/us in the account opening form on behalf of me/us and their signatures shall be in the same manner and way as has been informed to the DP by me/us and the DP is hereby requested and authorised, (but is not obliged to) rely upon and act, in accordance with such Fax Submission which is signed or bonafide			10.	10. I/We shall indemnify the DP all times against any and incurred, suffered or paid or by the Dp and also against against the DP, in connection i. The DP acting pursua or otherwise pursuan ii. The DP acting pursua received by the DP and/or; iii. Any unauthorised or indemnification here or willful default. iv. The DP not having attransmission or received with the DP not having attransmission or received. The DP shall not be under a of any Fax Submission or to the part of the DP and the part of any Fax Submission or the DP and the DP and the part of any Fax Submission or the DP and the DP and the part of any Fax Submission or the DP and the DP and the part of any Fax Submission or the DP and the DP and the part of any Fax Submission or the DP and the DP and the DP and the part of the DP and the DP and the DP and the part of the DP and the DP a	P and CDSL and keep them indemnified and save harmless, at all claims, losses, damages, costs liabilities and expense or incurred by the DP or required to be incurred, suffered or part all demands, actions, suit proceedings made, filed / institute on with or arising out of or in relation to or as a consequence of uant to, in accordance with or relaying upon, any Fax submission to the request and authority conferred herein and/or; uant to in accordance with or relying upon any Fax Submission or fraudulent Fax Submission to the DP. PROVIDED that the beavailable to the DP, if the liabilities for which the DP seek eunder, arises directly and completely from its own negligencing acted on the Fax submission due to non-receipt of the eipt of incomplete or partly / fully unreadable transmission. acted on any Fax submission sent by me/us on a number other entities of the properties of the purpose of the properties of the entitle of the purpose of the properties of the properties of the purpose of the properties of the properties of the purpose of the properties of the purpose of the properties of the properties of the purpose of the properties of the properties of the purpose of the properties of the properties of the purpose of the properties	
3.	believed by the DP to have been signed, by the Authorised Person/s. The DP is requested by me/us and shall be entitled to treat any fax Submissions as fully and dully authorised by and binding upon me/us and further be entitled (but not bound) to take any steps relying upon the same, believing the Fax Submission, in good faith as appropriate, regardless, of the amount of money involved and notwithstanding any error					
4.	in transmission or reception of such Fax Submission or any misunderstanding or ambiguity or lack of clarity in the terms of such fax Submission. 4. I/We shall upon making any Telefax Submission hereunder, deliver to the DP without any delay within two working days, the original hard copy of the Fax Submission (the Hardcopy) signed by the Authorised Person's as aforesaid. Each Hardcopy shall bear the following words on the top of the Instruction slip. "This is a Hardcopy Each of Fax Submission to you, transmitted on		12.		ne received properly and sks involved in respect of consible in any manner for be liable for any claims,	
This is a Hardcopy Each of Fax Submission to you, transmitted on(Math), 20(Year) The DP may, but shall not be obliged to, await receipt of the Hard copy prior to taking any action in connection with the Fax Submission and shall not be obliged to follow-up with me/us for the originals. Further the storage of a photocopy of the Fax transmission sent by me/us shall be conclusive evidence of instruction to the DP for having acted on such instructions and I/We hereby agree and acknowledge the same".		13. 14.	remedies in law and the DP may delay enforcing its rights without at any time losing and any waiver of a right by the Dp hereunder or available to it by law, shall not be dee to be a waiver of any other rights or of the same right at another time.	It at any time losing them law, shall not be deemed me. g seven day prior written ct anything done or any		
6.	I/We her within 2 do so wi that I/We	reby agree that in case the DP does not receive the hard copy of the instruction working days, the DP may discontinue the said facility. In such cases the DP will th immediate effect after informing me orally / in writing / by fax. I/We undertake a shall not hold the DP liable for any loss to me/us in case the DP does not act on action received by the DP in such a case.		me/us to the DP hereunder shall survive any such termination. How termination as mentioned in point 6 above, no such notice need to be give The Provisions relating to arbitration contained in the Rights & Obligatio be applicable to any dispute or difference that may arise in resp transmission including all disputes with regard to the receipt of the fax	be given by the DP. bligation document shall in respect of such fax	
7.	The DP submiss	shall not be required to confirm(whether orally, in writing or otherwise) any fax ion or (verify the Identify of the Authorised person/s or his/her/their signature/s or giving the fax submission or purporting to do so.		transmission in question ma	d confirm that regardless of the play have been transmitted to the DP at	ny matter or issue arising
	confirma	shall be under no duty to set and/or adopt any procedure for the purpose of such ation or verification and if at all there is any, the DP shall not be obliged to strictly comply with the same in any or every instance.			ed by and construed exclusively in ac the exclusive jurisdiction of the Courts	
Date	d at	(Place) this(Da	ate) day	of	(Month),	(Year)
		CLIENT	SIGNAT	URE		
		First / Sole Holder	Second	Holder	Third Hold	er
Sig	n of ent	(11) €		(7)		(7)
Dat	e :	· · · · · · · · · · · · · · · · · · ·	Place		<u> </u>	· / Ł.J
2 31		WITNESS FOR C				
Nar	ne					
Add	dress					

0-0

Sign of Witness

Smc° UMRN ¹ Date ² Date ² Date ² Date UMRN ¹
(tick \sqrt)^7 Sponsor Bank Code 3 Y E S B 0 0 0 0 0 0 1 Utility Code 4 Y E S B 0 0 1 7 1 0 0 0 0 5 5 0 4
CREATE / I/We hereby authorize 5 SMC Global Securities Limited to debit (tick)6 SB/CA/CC/SB-NRE/SB-NRO/Other</td
CANCEL X Bank Account Number 8
With Bank Or MICR Or MICR
an amount of Rupees ¹² (Name of Customers Bank) ¹³ ₹
14 FREQUENCY X Mthly X Qtly X H-Yrly X Yrly V as & when presented 15 DEBIT TYPE X Fixed Amount V Maximum Amount
Reference-1 Phone No
Reference-2 Email ID Email ID Email ID Email Ema
PERIOD From D D W W Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
• This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/Corporate to debit my account, based on the instructions as agreed and signed by me.
• I have understood that I am authorized to cancel/amen'd this mandate by appropriately communicating the cancellation/amendment request to the User entity/corporate or the bank where I have authorized debit.
MANDATE INSTRUCTION (Refer Instruction over leaf before filling)
SMC* UMRN ¹ Date ² DMM Y Y Y Y
(tick \(\sigma \)^7 Sponsor Bank Code \(^3 \) H D F C 0 0 0 0 6 0 Utility Code \(^4 \) Y E S B 0 0 7 0 9 0 0 0 0 2 8 6 6 1
(tick √) ⁷ Sponsor Bank Code ³ H D F C 0 0 0 0 0 6 0 Utility Code ⁴ Y E S B 0 0 7 0 9 0 0 0 0 2 8 6 6 1 CREATE V I/We hereby authorize ⁵ I/CCI to debit (tick √) ⁶ SB/CA/CC/SB-NRE/SB-NRO/Other
(tick \(\sigma \)^7 Sponsor Bank Code \(^3 \) H D F C 0 0 0 0 0 6 0 Utility Code \(^4 \) Y E S B 0 0 7 0 9 0 0 0 0 2 8 6 6 1
(tick \checkmark) ⁷ Sponsor Bank Code ³ H D F C 0 0 0 0 0 6 0 Utility Code ⁴ Y E S B 0 0 7 0 9 0 0 0 0 2 8 6 6 1 CREATE
(tick √) ⁷ Sponsor Bank Code ³ H D F C 0 0 0 0 0 6 0 Utility Code ⁴ Y E S B 0 0 7 0 9 0 0 0 0 2 8 6 6 1 CREATE ✓ MODIFY X CANCEL X Bank Account Number ⁸ ICCL to debit (tick √) ⁶ SB/CA/CC/SB-NRE/SB-NRO/Other With Bank IFSC ¹⁰ or MICR ¹¹
(tick \checkmark) ⁷ Sponsor Bank Code ³ H D F C 0 0 0 0 0 6 0 Utility Code ⁴ Y E S B 0 0 7 0 9 0 0 0 0 2 8 6 6 1 CREATE
CREATE
Sponsor Bank Code H D F C 0 0 0 0 0 6 0 Utility Code Y E S B 0 0 7 0 9 0 0 0 2 8 6 6 1
Sponsor Bank Code 3 H D F C 0 0 0 0 0 6 0 Utility Code Y E S B 0 0 7 0 9 0 0 0 2 8 6 6 1 CREATE / MODIFY X MODIFY X Bank Account Number 8 IFSC 0 ICCL Ito debit (tick \checkmark) 6 SB/CA/CC/SB-NRE/SB-NRO/Other With Bank Account Number 8 IFSC 0 Or MIC 1 O
Sponsor Bank Code ³ H D F C 0 0 0 0 0 6 0 Utility Code ⁴ Y E S B 0 0 7 0 9 0 0 0 2 8 6 6 1 CREATE I/We hereby authorize ⁵ ICCL to debit (tick ×) ⁶ SB/CA/CC/SB-NRE/SB-NRO/Other MODIFY X CANCEL X Bank Account Number ⁸ IFSC or MICR with Bank IFSC or MICR an amount of Rupees ¹² (Name of Customers Bank) 14 FREQUENCY X Mthly X Qtly X H-Yrly X Yrly as & when presented 15 DEBIT TYPE X Fixed Amount Maximum Amount Reference-1 Phone No
Sponsor Bank Code 3 H D F C 0 0 0 0 0 6 0 Utility Code 4 Y E S B 0 0 7 0 9 0 0 0 2 8 6 6 1 CREATE / I/We hereby authorize 5 ICCL to debit (tick 1) 6 SB/CA/CC/SB-NRE/SB-NRO/Other MODIFY X CANCEL X Bank Account Number 8 IFSC 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

* Signature should be same as in bank record.
*Bank may levy charges for NACH Mandate Registration.

MANDATE INSTRUCTION (Refer Instruction over leaf before filling)

Instructions to fill Mandate: 1. UMRN-To be left blank 12. Amount in words

- 2. Date in DD/MM/YYYY format
- Sponsor Bank IFSC/MICR code, left padded with zeroes where necessary. (Maximum length -11 Alpha Numeric Characters).
- Utility Code: Unique code of the entity to whom mandate is being given - To be provided by the entity.
- 5. Name of the entity to whom the mandate is being given
- 6. Account type SB/CA/CC/SB-NRE/SB-NRO/OTHER
- 7. Tick Select your appropriate Action
 - a. Create For New Mandate
 - b. Modify For Changes/Amendment on existing mandate
 - c. Cancel For cancelling the existing registered Mandate
- 8. Your Bank Account Number for debiting the amount
- 9. Name of your bank and branch
- 10. Your Bank branch IFSC code OR
- 11. Your Bank branch MICR code

- 13. Amount in figures
- 14. Frequency at which the debit should happen
- 15. Whether the amount is fixed or variable
- Reference-1 : Any details requested by the entity to whom mandate is being given
- 17. Reference 2 : Any details requested by the entity to whom mandate is being given
- 18. Your phone number
- 19. Your email id
- 20. Period for which the debit mandate is valid
 - a. Start date
 - b. End Date
 - c. Or until cancelled
- 21. Signatures of the account holder
- 22. Name of the account holder
- _____ Instructions to fill Mandate: _____
- 1. UMRN-To be left blank
- 2. Date in DD/MM/YYYY format
- 3. Sponsor Bank IFSC/MICR code, left padded with zeroes where necessary. (Maximum length -11 Alpha Numeric Characters).
- Utility Code: Unique code of the entity to whom mandate is being given - To be provided by the entity.
- 5. Name of the entity to whom the mandate is being given
- 6. Account type SB/CA/CC/SB-NRE/SB-NRO/OTHER
- 7. Tick Select your appropriate Action
 - a. Create For New Mandate
 - b. Modify For Changes/Amendment on existing mandate
 - c. Cancel For cancelling the existing registered Mandate
- 8. Your Bank Account Number for debiting the amount
- 9. Name of your bank and branch
- 10. Your Bank branch IFSC code OR
- 11. Your Bank branch MICR code

- 12. Amount in words
- 13. Amount in figures
- 14. Frequency at which the debit should happen
- 15. Whether the amount is fixed or variable
- Reference-1: Any details requested by the entity to whom mandate is being given
- 17. Reference 2 : Any details requested by the entity to whom mandate is being given
- 18. Your phone number
- 19. Your email id
- 20. Period for which the debit mandate is valid
 - a. Start date
 - b. End Date
 - c. Or until cancelled
- 21. Signatures of the account holder
- 22. Name of the account holder



DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI)

I/We agree to the terms and conditions of Demat Debit & Pledge Instructions (herein referred after to as DDPI) between the undersigned individual(s)/entities (hereinafter referred to as client(s)) and SMC Global Securities Limited (hereinafter referred to as SMC) a company duly incorporated under the Companies Act, 1956 and having Registered Office at 11/6B, Shanti Chamber, New Delhi-110005.

Whereas SMC is a SEBI registered Stock Broker & Depository Participant and is providing stock broking and depository participant services to their registered clients. Whereas SMC has the following Principal account / Clearing Member account / Early pay-in / Pool / Margin Pledge accounts / CMBP IDs to receive securities from the clients:

12019101 00000412	CDSL BSE Pool	11000010 00013363	CDSL BSE early pay-in A/c
12019101 00000372	CDSL NSE Pool	11000011 00014914	CDSL NSE early pay-in
IN564844	NSDL NSE Pool	12019101 04319878	CDSLCM Client Securities Margin Pledge
IN655267	NSDL BSE Pool	IN303655 10227156	NSDL CM Client Securities Margin Pledge
12019101 02068772	CDSL MSEI Pool	1201910 104319903	CDSL Client securities Margin Funding
IN471837	NSDL MSEI Pool	IN303655 10229625	NSDL Client Securities Margin Funding

Whereas, the Client(s) are desirous of availing various broking and depository participant services offered by SMC and for the purpose of facilitating the transactions and services in broking and/or depository account(s)in a seamless manner, the Client(s) authorise SMC to execute instructions and perform severallythe following actsby accessing the beneficial owner account(s) of Client(s):

S. No.	Purpose	Signature of Client
1.	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker	(14) Signature of 1st / Sole Holder (10) Signature of 2nd Holder (10) Signature of 3rd Holder
2.	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	(15) Signature of 1st / Sole Holder (11) Signature of 2nd Holder (11) Signature of 3rd Holder
3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms.	(16) Signature of 1st / Sole Holder (12) Signature of 2nd Holder (12) Signature of 3nd Holder (12) Signature of 3rd Holder
4.	Tendering shares in open offers through Stock Exchange platforms.	(17) Signature of 1st / Sole Holder (13) Signature of 2nd Holder (13) Signature of 3nd Holder

This DDPI document is made on the date and place mentioned hereunder:

Client Name			
Demat DP ID & Client ID		Trading Code	
Date	//20	Place	



•	LETTER OF AUTHORISATION - AUTHORISED TRADING BY RELATIVE
1.	I, the undersigned write to notify you that I have appointed Mr./Ms
	[having residential address Phone No Mobile No Email address] (hereinafter called the 'Agent') who is my Father/ Mother/ Son/ Daughter/ Spouse* to act on my behalf to give buy or sell instructions on all exchanges and give trade confirmation of every type and description including but not limited to Cash, Futures, Options, Currency and Commodity Segments. (*score out the inapplicable and attach proof of relationship e.g. Ration card/ marriage certificate/ Voter ID)
2.	I ACKNOWLEDGE THAT PRIOR TO COMPLETING AND EXECUTING THIS LETTER I HAVE READ AND UNDERSTOOD THE DISCLOSURE STATEMENT PRINTED BELOW.
3.	 I further declare and agree that:- (a) my agent shall have power as my agent to act as fully and effectually for the purpose(s) as I could do personally; (b) all acts and matters previously done by my Agent in respect of my account(s) opened and maintained with you are hereby deemed ratified and confirmed; and
	(c) notwithstanding the authorisation given to my Agent above, I may still communicate instructions to you personally. However, in the event of any inconsistency between instructions communicated by my Agent and instructions communicated by me personally, you shall have the absolute discretion (but shall not obliged) to act upon the instructions communicated last in time and in your sole opinion considered capable of being acted upon, and in so acting you shall not be liable for any loss whatsoever and howsoever arising.
4.	I further acknowledge that my appointment of my Agent is made by me of my own free will and as a result of my own judgment and deliberations. You shall accordingly be under no liability whatsoever in respect of any loss or damage which I may suffer or incur as a result of the acts or omissions of my Agent (including any acts involving dishonesty, criminal breach of trust, theft or other criminal offences). I further agree to be fully responsible for such acts or omissions of my Agent and shall indemnify and hold you harmless from any and all claims, liabilities, penalties, adverse consequences, losses, damages, costs or expenses (including legal fees on a full indemnity basis) which you may incur, be subjected to or suffer, arising out of, in relation to or in connection with, your relying on or acting in accordance with acts and /or omissions of my Agent within the scope of my Agent's ostensible authority. I also acknowledge that you are not obliged to ascertain or enquire into the terms and conditions on which my Agent was appointed, the context or circumstances in which any decision was taken by my Agent, the soundness of such decision or the purpose for which any of the decisions were taken.
	The appointment of my Agent and authority conferred shall continue until written notice of revocation by me is received by you. I undertake to ratify and confirm all acts and things done by my Agent on my behalf until your receipt of such notification.
о.	I acknowledge that I have received a copy of the following Risk Disclosure and understand its contents. I am signing this letter of authorisation after having reviewed the risks pointed out to me and am willing to accept the same and I am signing this letter of authorisation voluntarily.
Sig	(18) 🕊
Ū	DISCLOSURE STATEMENT
tra for ha ne ne	EASE DO NOT SIGN THIS LETTER OF AUTHORISATION IF YOU DO NOT FULLY UNDERSTAND THE CONSEQUENCES OF GNING IT. This letter of authorisation is an IMPORTANT DOCUMENT. By signing it, you are authorising your Agent to enter into ding transactions on your behalf. You should know that your Agent will be acting as your agent. We will therefore not be responsible any acts or omissions of your Agent in respect of any acts and/or things which may be done by him or her in exercise of authority you we given by signing this letter. In particular, we will not be responsible for any theft, misappropriation or other criminal, fraudulent or gligent acts of your Agent with respect to your share transactions or any loss due to his/her incompetence, inexperience or gligence. Please also particularly note that in granting this discretionary trading authority your Agent may affect trading transactions thout reference to you.
-	CONSENT FOR AVAILING MARGIN TRADING FACILITY (MTF)
	Ve wish to avail the Margin Trading Facility (MTF) on the platform of National Stock Exchange of India Limited and BSE Limited as per e framework prescribed by SEBI vide its' circular No. CIR/MRD/DP/54/2017 dated Jun 13, 2017.
	rther, I/We have read and understood "Rights and Obligation of Stock Brokers & Client for Margin Trading Facility (MTF)" as prescribed by SE vide its Circular No. NSE/COMP/35260 dated June 30, 2017 and BSE vide its Circular No. 20170619-26 dated June 19, 2017.
CO	We have read & understood the "Policies & Procedures for MTF" as specified by SMC Global Securities Limited regarding terms and nditions of Margin Trading Facility, method of communication for confirmation of orders/trades, margin calls and calls for liquidation of llateral/security/positions etc and agreed to abide by the clauses mentioned therein all the times. Further, I/we will refer to SMC's ebsite from time to time for any updation w.r.t policies & procedures.

\$smc

(19) 🕊 Signature of Client

AUTHORISATION WHEN A CLIENT WANTS TO MAINTAIN A RUNNING ACCOUNT (As per SEBI Guidelines vide circular MIRSD/ SE /Cir-19/2009 Dt. December 3, 2009)

I/We confirm that I/We am/are desirous of regularly dealing in CM, F&O, CDS and Commodity segments of the stock exchange(s). I/We request you to maintain the account for funds, with you on a running account basis. I/we also request you to consider the balances in my/our running funds account for the purpose of margins/any other of my/our obligations due to you. I/We understand and agree that no interest will be payable to me/us on the amounts so retained by you.

I/We agree and empower/authorize you

- To act in your discretion of merging balances kept under various accounts held with the you, such as CDSL/NSDL DP Account, CM
 Trading Account, F&O Trading Account, Currency Trading Account, Commodity Trading Account, Online IPO / MF Account and
 MFSS etc., to nullify the debit in any of my/our other account held with you without taking any further instructions from me/us;
- b. To debit my/our trading account towards depository charges payable by me/us to the designated depository participant and make onward payment to the designated depository participant upon receipt of intimation from the designated depository participant;

I/We have the liberty to revoke this authorization at any time in writing with prospective effect. While settling the account you will be sending me/us a 'statement of account', containing an extract from the client ledger for funds and an extract from the register of stocks displaying all receipts/deliveries of funds/stocks. The statement shall also explain the retention of funds/stocks. Such periodic settlement of the running account shall not be necessary when (a) I start availing margin trading facility as per SEBI circulars; or (b) The margin provided by me to you is in the form of Bank Guarantee (BG)/Fixed Deposit Receipt (FDRs).

On actual settlement date you may retain the requisite stocks/funds towards any outstanding obligation and may also retain additional margin requirement on the day of settlement to take care of my margin obligation arising in the next 5 trading days, calculated in the manner specified by respective Exchanges.

I will bring any discrepancy or dispute arising from the Statement of account so issued by you or the settlement made by you to your notice preferably within 7 working days from the date of receipt of funds / stocks or statement as the case may be.

I/We understand that, unless otherwise required to meet my obligations for margin or on settlement you shall transfer the funds/stocks lying with you in credit of my/our account within one working day and those lying with the Clearing Member or Clearing Corporation within three working days of my request for transfer.

within three working days of my request for transfer.
My/Our preference for actual settlement of funds and stocks is at least:
Once in a Calendar Quarter Once in a Calendar Month
I/We further authorize you to retain an amount of up to Rs. 1,000/- (net amount across segment and across stock exchanges) in order to avoid administrative/operational difficulties in settling my/our account. The same can be release on my/our specific request
Please score out whatever not accepted/ not agreed with.
(20)
Signature of Client Date: DDMM20YY
SANCTION OF TRADING LIMIT ON THE SECURITY OF COLLATERALS
I/we wish to avail and enjoy from time to time trading limits against security of my/our shares and securities in my/our Demat Account(s) with your DP. I/we understand that the limit to be sanctioned to me/us will be based on the value of the securities after hair-cut as applicable from time to time and will be in the sole discretion of SMC.
I/we undertake not to withdraw or otherwise dispose off any of the securities on which limit is granted and you shall be fully entitled to ignore or reject my/our debit/payment instructions in whole or in part so as to first provide for the security cover to my/our trades allowed by you. You shall be fully authorized to adjust any sale proceeds of securities in my/our trading account to first reduce the limit before returning to me/us.
All the dues in the trading account including those in respect of trades utilizing the limits granted to me/us shall be my/our liability and you shall be further entitled to exercise the Power of Attorney separately granted to you with all the powers therein, in respect of my DP A/c and Bank A/c in relation to my/our trading account, for the purpose of pay-in obligations and/or to liquidate debit balance and/or to meet margin or losses in respect of the trades in the said trading account.
I/We declare that the security shall be a continuing security and will be operative even though limit is utilized in part or not utilized or nothing or part is due in the trading account, unless on my/our request and in view of the overall position of my/our obligations and funds

and other security, if any, the limit is reduced or the securities are released for the purposes of limit.



(21)
Signature of Client

AUTHORITY LETTER

With respect to the client - member relationship with you, we authorize you to do the following:

- 1) Adjustment of account between exchanges and segments: I/we hereby inform you that I have executed/intend to execute an agreement with you for trading on different exchanges in CM, F&O, CDS and Commodity segments. I/We request you to transfer, make adjustments and/or set off a part or whole of the stocks placed as collaterals and/or any surplus funds in any of the accounts maintained with you against the outstanding dues payable if any, by me/us to any of my/our account(s) maintained with you. You will have lien on the credit balance in any of my/our account for meeting the debit or obligations in progress in any other of my/our account. Any entries passed by you in accordance with this authorization will be binding on me/us.
- 2) Authorization to debit Demat Account charges: I/We opened/ have a Beneficiary account with you and I/we have a trading account with you for investment and trading purpose. It will be very difficult for me/us to issue separate cheques against your depository bills. Hence, I authorize you to debit the trading account for the debit charges payable to you as Depository Participant for providing depository services. Any such sum debited to my/our account shall be binding on me/us.
- 3) Authorization For Communication of Financial Products: I/We have opened an account with you and am/are interested in knowing about other financial products. I/We authorize you, your group companies and associates to keep me/us informed with any financial product which SMC Global Securities Ltd., its group companies and associates presently issue, deal in, or distribute or may, from time to time, launch, issue, deal in or distribute; through E-mail, SMS, telephone, print media or otherwise. This is without legal obligation on you, your group companies and associates to so inform and you or they may, in their discretion, discontinue sending such information.
- 4) Authorization for verification of information from independent agency(ies): I/We, do hereby certify that the information provided by me/us in this account opening form is true and correct in all respects and SMC Global Securities Limited (SMC) is entitled to verify this directly or through any third party agent. I/We further acknowledge the SMC's right to seek any information from any other source in this regard. I/We do understand that all the information will form the basis of any facility that SMC may decide to grant me/us at its sole discretion. I/We consent and authorize SMC to share or generate subsequently any report through CIBIL or authorized agency/bureau.
- 5) Authorization for not Providing Conformation Slips: I / We authorize you not to provide me / us Order Confirmation / Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I / We shall get the required details from contract notes issued by you.

Please score	out whatever not accepted/ not agr	eed with.
(22) Æ Signature of Client		

AUTHORISATION TO SEND CONTRACT NOTE, STATEMENT OF FUNDS & SECURITIES ETC. ELECTRONICALLY

I/we authorise you to issue the contract notes, statement of funds & stocks, circulars, amendments, Client Registration Documents and such other documents in electronic mode in lieu of physical mode on my E-mail ID as given in KYC form and updated from time to time.

Any change in the E-mail ID shall be communicated by me / us in writing to your customer care department or through secured login available on your website.

Further, to my /our authority to you to issue Contract Notes in digital format I/we authorise you not to provide me/us Order Confirmation / Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We shall get the required details from the Contract Notes issued to us.

I/We authorize you to send periodic statements of funds and stocks & margin statement etc. in digital format at my Email address unless I/We request you in writing to send them in paper form.

I/We hereby acknowledge that all the documents as send above by SMC electronically will be considered as having delivered to me once the e-mail leaves the SMC e-mail server unless the same is rejected by client e-mail server and bounced mail notification is not received by SMC. I/We further agree that in the absence of communication from my/our end regarding non-receipt of documents through e-mail, or notification of any discrepancy within 2 days from the date of issuance of digital contract note through e-mail, SMC may construe that there is a deemed acknowledgement of the document(s) send to client electronically

(23)	
Signature of Client	

Smc

FEMA/RBI DECLARATION (COMPULSORY)

I/We hereby undertake that I/we had already complied with all the formalities with regard to FEMA and RBI regulations. I/We hereby also undertake that I/we will continue to comply with regulations under Foreign Exchange Management Act, 2000 and Reserve Bank of India Act, 1934 as amended from time to time.

Name of Client :
(24) Signature of Client
DECLARATION FOR CURRENT FOREIGN RESIDENTIAL ADDRESS (COMPULSORY)
I/We hereby declare that my/our current foreign residential address is as follows:
Further, I/We undertake that whenever there is a change in the residential address, it will be informed to SMC at the earliest. However for correspondence, I/we have given the Post Office Box number which may be accepted as my/our correspondence in the demated trading account opened with SMC.
Name of Client :
(25) Signature of Client
DECLARATION CONFIRMING NOT BEEN APPROACHED BY SMC (COMPULSORY)
I/We hereby confirm that I/We have not been approached by SMC Global securities Limited or anybody on its behalf for solicitation or for any investment or advice for investment in any company in India. All investment decisions are/shall be my/our own, based or independent information, research and knowledge gathered from published materials and internet sites available anywhere in the worl and other sources. Name of Client:
(26) 🗷
MERCHANT NAVY DECLARATION
I hereby confirm that I have just returned after completion of my contract with
(name of company) registered in
(address of the principals)
I am on a break fordays / months and will be joining on a new contraction on by (date/timeframe). I request you to kindly open NRE depository and trading accounts in
my name on the basis of the documents submitted.
I also confirm that I will inform you in case I am unable to proceed on a new contract or choose not to go on a new contract, and have th non-resident accounts opened in my name redesignated to normal/resident trading accounts (if eligible).
Name of Client :
(27) Signature of Client

Ssmc

NRI CLIENT CODE APPLICATION TO BE SUBMITTED BY NRI TO THE CLEARING MEMBER (FOR F&O)

To,

SMC Global Securities Limited

11/6B, Shanti Chamber, Pusa Road, New Delhi-110005

Subject: Application for the allotment of NRI code.

Dear Sir,

Ssmc

I wish to appoint you as my Clearing Member for clearing and settlement of trades done on the futures and options segment of NSE. My details are as follows:

details are as follows:	,
Name (as appear in Passport)	
Passport No	
NRE/NROBankA/cNo.	
Telephone No.	
Email ID:	
Current Address	
Permanent Address in India	
We request you to kindly get an NRI client code allotted by NSE/NSCCL for the s I undertake that all the trades executed through the above allotted NRI Client code (*If the NRI Client code application is for an HUF then the details of the Karta undertaking should be provided as follows: "I undertake that all the trades exec HUF")	de will be on my* behalf. (Manager) has to be given in the application and in the
Yours sincerely,	
Name of Client :	
(28) Signature of Client	
Date : D D M M Y Y Y Y	
Place:	
DECLARATION OF HOLDING A SINGLE PA	ASSPORT FOR (F & O)
To, National Stock Exchange of India Ltd. India	
Subject: Declaration of holding a single passport	
Dear Sir/ Madam	
IS/o _	
resident at and hereby declare and confirm that I am holding only a number and will not be applying for custoc number.	
Yours sincerely	
Name of Client :	
(29) 🕊 Signature of Client	
Date : D D M M Y Y Y Y Place :	

C 10

	MOTOAL FOND SERVICE STSTEM FACILITY	
I/We		_ am/are registered as your clien
with Client Code No	and have executed the Trading Member and Client Agreement	t for the purpose of trading in the
Capital Market segment of Bo	ombay Stock Exchange Ltd./ National Stock Exchange of India Ltd. (Excha	ange).

MUTUAL CUMP SEDVICE SYSTEM EACH ITY

I/We am/are interested in availing the BSE StAR MF/MFSS facility of the Exchange for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the BSE StAR MF/MFSS of the Exchange.

For the purpose of availing the BSE StAR MF/ MFSS facility, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of BSE StAR MF/ MFSS and I/we further confirm that the details contained in same remain unchanged as on date.

I/We are willing to abide by the terms and conditions as mentioned in the Circular dated 24, November 2009 & 2, December, 2009 for NSE & BSE Respectively and as may be specified by the Exchanges from time to time in this regard.

I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India and Association of Mutual Funds of India (AMFI).

I/We shall read and understand the contents of the Scheme Information Document and Key Information Memorandum, addenda issued regarding each Mutual Fund Schemes with respect to which I/we choose to subscribe/redeem. I/We further agree to abide by the terms and conditions, rules and regulations of the Mutual Fund Schemes.

I/We therefore request you to register me/us as your client for participating in the MFSS/ BSE StAR MF.

Details of terms & conditions for the Investor / Client for using New BSE StAR MF / MFSS facility

Pre-requisites for becoming Investor / Client for the BSE StAR MF/MFSS facility

- 1.1. The client who is desirous of investing in units of mutual fund schemes through the New BSE StAR MF/MFSS.
- 1.2. The Client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the Participant of the New BSE StAR MF/MFSS.
- 1.3. The client has satisfied itself of the capacity of the Participant to deal in Mutual Fund units and wishes to execute its instruction through the Participant and the client shall from time to time continue to satisfy itself of such capability of the Participant before executing transacting through the Participant.
- 1.4. The Client has approached to the Participant with the application for availing the New BSE StAR MF/MFSS facility.
- 1.5. The client has submitted relevant KYC (Know Your Client) details to the Participants

2. Terms and Conditions

- 2.1. The client shall be bound by circulars issued by BSE/NSEIL, Rules, Regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
- 2.2.The client shall notify the Participant in writing if there is any change in the information in the 'client registration form' provided by the client to the Participant at the time registering as a client for participating in the New BSE StAR MF/MFSS or at any time thereafter.

(30) 🗷	
Signature of Client	

- 2.3. The client shall submit to the Participant a completed application form in the manner prescribed format for the purpose of placing a subscription order with the Participant.
- 2.4. The client has read and understood the risks involved in investing in Mutual Fund Schemes.
- 2.5. The client shall be wholly responsible for all his investment decisions and instruction.
- 2.6. The client shall ensure continuous compliance with the requirements of the BSE, NSEIL, SEBI and AMFI.
- 2.7. The Client shall pay to the Participant fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant renders to the Client.
- 2.8. The client will furnish information to the Participant in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
- 2.9. In the event of non-performance of the obligation by the Participant, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of BSE or BOISL/NSEIL or NSCCL.
- 2.10.In case of any dispute between the Participants and the investors arising out of the BSE StAR MF Fund / MFSS facility, BSE and /or BOISL and NSEIL and / or NSCCL agrees to extend the necessary support for the speedy redressal of the disputes.



DECLARATION FOR PROVIDING SMS/E-MAIL ALERTS AND OTHER REPORTS ON RELATIVE EMAIL/MOBILE

I hereby declare that the Mobile Number and/or Email ID given in the account opening form are of my relative. He / She already has a trading account with SMC Global Securities Limited under the below mentioned PAN or UCC.

"I request you to please accept his/her mobile number and/or E-mail ID for the purpose of sending SMS/Email alerts/ ECN and/or any other reports by the Stock Exchange/Depository/SMC to me."

Curor reporte by the Greek Exe	First / Sala Halder	Co	The sall to the
	First / Sole Holder	Second Holder	Third Holder
Relationship with the person whose Mobile /E-mail Id is provided	☐ Spouse☐ Dependent parent☐ Dependent child☐ Karta/Authorized Signatory	 ☐ Spouse ☐ Dependent parent ☐ Dependent child ☐ Karta/Authorized Signatory 	 □ Spouse □ Dependent parent □ Dependent child □ Karta/Authorized Signatory
PAN/UCC/Demat of relative			
Signature of Client	E	\boxtimes	\otimes
This is to bring to your notice to names as spelt in respective p	(To be filled if the name that my name is spelt differently in m	OR NAME MISMATCH on documents is different) by Identity proof, Address proof and	d Bank proof. Please find below the
Name as per PAN CARD			
Name as per Address Proof_			
I agree to indemnify and kee		rom and against all costs, charge	es, damages, penalties (including the above declaration.
This is to bring into your notice	ce that my signature on PAN Card /		
Signature as per Bank			
Signature as per Account Opening Form			
Signature as per PAN Card			
I hereby confirm that all the information.	above signatures are mine. I here	eby state and confirm that what is	s stated above is true and correct
	ep SMC indemnified at all times fi fered and/or incurred by SMC for any		
Name of the Applicant :			

Ssmc



FOR OFFICE USE ONL	.Υ							
UCC:								
I/We undertake that we have have also made the client as all the KYC documents. I/documents would be duly in be made available on my/ou	vare of 'Righ Ne undertal timated to th	ts and Obligation to that any characteristics that any characteristics is and the clients. I/We are clients.	ns' documen ange in the 'l also undertak	t(s), RDD a Policy and se that any	and Guidance l Procedures',	Note. I/We ha tariff sheet a	ive given/sent him and all the non-n	n a copy of nandatory
FOR & ON BEHALF OF SI	IC GLOBAL	SECURITIES	LIMITED					
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Signature : Signature of t	he Authorise		ate :	D M M		/ Stamp of S	SMC Global Secu	rities I td)
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FOR BRANCH PURPOSE	ONLY			2 1110117 1	Vobolio I			
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2021 KRISHI AWARD **DEVELOPING THE** RETAIL SEGMENT

O NCDEX

2019 **BUSINESS** EXCELLENCE AWARD (ORDER OF MERIT)

2019 BROKING HOUSE ON AGRICULTURAL

2018 REGIONAL RETAIL **MEMBER OF YEAR** (NORTH) NSE

2018 BEST BROKER WITH **IN-HOUSE RESEARCH** IN BULLION



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DELHI :SMC Global Securities Ltd. CIN no. L74899DL1994PLC063609, Registered Office: 11/6B, Shanti Chamber, Pusa Road, New Delhi 110005

• Tel +91-11-30111000. Email: info@smcindiaonline.com

MUMBAI : A Wing, 401/402, Lotus Corporate Park, Graham Steel Compound, Off Western Express Highway, Jay Coach Signal, Goregaon East, Mumbai 400063

• Tel +91-22-67341600 • Fax +91-22-28805606

KOLKATA: 18, Rabindra Sarani, Poddar Court, Gate No. 4, 4th & 5th Floor, Kolkata - 700001 • Tel +91-33-39847000 • Fax - +91-33-39847004

DUBAI :2404, One Lake Plaza Tower, Cluster T, Jumeirah Lake Towers, P.O. Box 117210, Dubai, U.A.E. • Tel +9714 -5139780 • Cell +97150-2612483 • Fax +9714-5139781

NSE INB/INF/INE 230771431, BSE INB/INF 011343937, MSEI INB/INF 260771432 INE 260771431, CDSL/NSDL-IN-DP-130-2015 (SMC Global Securities Ltd.), NCDEX/MCX (8200)/ NMCE/ICEX-INZ000035839 (SMC Comtrade Ltd.), PMS INP000003435 (SMC Investments and Advisors Ltd.) IRDAI Regi: No: DB 272/04 License No. 289, Valid upto 27/01/2020 (SMC Insurance Brokers Pvt. Ltd.), Merchant Banker INM000011427 (SMC Capitals Ltd.)