

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

- 1. 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.
- 3. If any proof of identity or address is in a foreign language, then translation into English is required.
- 4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 5. If correspondence & permanent address are different, then proofs for both have to be submitted.
- 6. Sole proprietor must make the application in his individual name & capacity.
- For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
- 8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
- In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 10. For opening an account with Depository Participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark Sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- 11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

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

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

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

1. Passport/ Voters Identity Card/ Ration Card/ Registered Lease or Sale Agreement of Residence/ Driving License/ Flat Maintenance bill/ Insurance Copy.

- 2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill Not more than 3 months old.
- Bank Account Statement/Passbook Not more than 3 months old.
- 4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- 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 apostiled 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.
- 2. Investors residing in the state of Sikkim.
- 3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
- 4. SIP of Mutual Funds upto Rs 50, 000/- p.a.
- 5. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

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

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

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

INDEX OF DOCUMENTS

MANDATORY DOCUMENTS

| S.No. | Name of the Document | Brief Significance of the Document | Page No. |
|-------|---|---|-------------|
| 1. | Account Opening Form | KYC Form - Document captures the basic information about the constituent and an Instruction / checklist. | 1-7 |
| 2. | Uniform Risk Disclosure Document (RDD) | Document detailing risks associated with dealing in the commodities market | |
| 3. | Rights and Obligations of Members, Authorized Persons and Clients. | Document stating the Rights & Obligations of member, Authorized Person and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading). | By Email |
| 4. | Do's and Don'ts for the Investors | Guidance Note for dealing in commodities market. | |
| 5. | Tariff Sheet | Document detailing rate / amount of brokerage, Brokerage/Operational charges and other charges levied on the client for trading on the commodity exchange(s). | 8 |

VOLUNTARY DOCUMENTS

| S.No. | Name of the Document | Brief Significance of the Document | Page No. |
|-------|--|--|----------|
| 1. | Electronic Contract Note | Consent for receiving ECN & E-Documents | 9 |
| 2. | Running Account Authorisation | Running Account Authorisation | 10 |
| 3. | Undertaking to Act in Own Capacity | Letter giving clients confirmation to act in his own capacity | 11 |
| 4. | FATCA & CRS Declaration | FATCA & CRS Declaration for Non-Individual | 12-13 |
| 5. | Format of Declaration to be given by Partnership Firm | To be given by the Partners of the firm for opening of account | 14 |
| 6. | Most Important Terms and Conditions (MITC) | For non-custodial settled trading accounts | 15 |



Finvasia Securities Pvt. Ltd.

Member: Multi Commodity Exchange of India Ltd. / National Commodity & Derivative Exchange Ltd.

Research Analyst No.: INH000011927 - SEBI Regn. No.: INZ000176037 • Member ID: 55135 (MCX), 01259 (NCDEX)

Corporate Office:

FINVASIA CENTRE, D-179, Phase 8 B, (Sector 74), Mohali, Punjab (India) Phone: +91 9779 902 002, Fax: +91-172-6670070

E-mail id: ccofspl@shoonya.com • Website: www.shoonya.com

Compliance Officer

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Email: ccofspl@shoonya.com

CEO

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Ph.:+91 9779 902 002
Email: ccofspl@shoonya.com

For any grievance/dispute please contact **FINVASIA SECURITIES PVT. LTD.** at the above address or email id-complaints@shoonya.comandPhoneNo.+91 9779 902 002. Incase not satisfied with the response, please contact the concerned exchange(s) at (MCX) grievance@mcxindia.com and Phone No. +91-22-67318888, (NCDEX) ig@ncdex.com and Phone No.+91-22-66406789.

Finvasia Securities Pvt. Ltd.
FINVASIA CENTRE, D-179, Phase 8 B, (Sector 74)
Mohali, Punjab-160055 (India)

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| Date of commencement of busin | ess | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Permanent Account Number (PA | N) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Registration No. (e.g. CIN) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Status (Please tick any one) ☐ Private Limited Co. ☐ Trust ☐ HUF ☐ Defense Establishment ☐ | Public Chariti | | | Body NGC Banl Soci | Ò's k | rpor | ate | | Part FI Gov LLP | ern | | | dy [| | on-C | | | ient (| | | atio | n | | | | | | | |
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| Tel. (Off.) | | | | | | | | | | | | | | | | Fax | | | | | | | | | | | | | |
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| Specify the Proof of Address s | ubmitted | d for Co | rrespo | onde | nce | Addr | ess | : | | | | | | | | | | | | | | | | | | | | | |
| Registered Address (If differ | ent from | above |) 🔲 | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| OTHER DETAILS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name, PAN, Residential Addr If space is insufficient, enclose DIN OF Whole time director If space is insufficient, enclose AADHAR No. OF Promoter If space is insufficient, enclose | ed these rs: osed the rs/Partne | details | separ ails se ta : | rately epara | y (illu ately | ustra: y (illu | tive ustra | form ative | at en | clos nat | sed) enc | lose | d) | vhol | le tir | me c | irec | tors | : | | | | | | | | | | |
| DECLARATION //we hereby declare that the kyc details fun fformation is found to be false or untrue of egistered number/email address. I am/we eadable qr code or my aadhaar xml/digilo | mished by mor misleading are also aw | ne are true | and corpresention | rect to ng, i ar ar ovd | the be | est of a | my/ou ware my ky | ır knov that i/v | vledge ve may | and be hall be | pelief a | and i/\ ble fo | ve und | here aadha | eby co aar de | onseni tails. | to re /we h | ceivin | g info | ormati sent to | on fro shai | m cvl | kra t y/our | hroug masi | gh sn ked a | ns/er | nail or | the a | abo |
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| FOR OFFICE USE O | NLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ☐ Originals Verified & Self | Attested | | | • | es re | ecei | ved | | | | | | | | | | | | | | | | | | | | | | |
| | Attested | | | • | es re | ecei | ved | | | | | | | | | | | | | | | | | | | | | | |

| Details of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Applications of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Applications of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Applications of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Applications of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Applications of Promoters / Partners / Partn | ation Form for Non-Individuals |
|--|--|
| 1. Name | |
| 1. Name | PHOTOGRAPH |
| 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) | |
| 3a. PAN | |
| | Please affix your recent passport |
| 4. Residential/ Registered Address | size photograph and |
| | sign across it |
| City / Town / Village Pin Code State Country | |
| | |
| 1. Name | |
| | PHOTOGRAPH |
| 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) | |
| 3a. PAN 3b. DIN/ UID | Please affix |
| 4. Residential/ Registered Address | your recent passport |
| | size photograph and sign across it |
| City / Town / Village Pin Code | |
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| 1. Name | |
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| 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) | |
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| 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) | |
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| 2. Relationship with Applicant (i.e. promoters, whole time directors etc.) | |
| 3a. PAN 3b. DIN/ UID | Please affix |
| 4. Residential/ Registered Address | your recent passport size photograph and |
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(1a)

ANNEXURE 1 (PART - II)

| | HER DETAILS | ENGLISH and in | BLOCK | LEITE | :H5. | | | | | | | | | | | | | | | |
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| | nnual Income | Income Range p | er annur | m : [| Be | elow | Rs. | 1 L | ac | | Rs. | 1 Lac t | o 5 L | ac | | _ | | _ | | |
| Details (| (please specify) | Rs. 5 Lac to | 10 Lac | Rs | s. 10 La | ac to | 25 | Lac | | Rs. | 25 L | ac to 1 | Cror | е | ; | >1 C | rore | | | |
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| B. BAN | K ACCOUNT(S) | DETAILS | | | | | | | | | | | | | | | | | | |
| | Bank Name | Branch | Address | | Bar | nk Ac | cou | nt N | umber | A | coun | t Type | MI | CR N | Numbe | r | IFSC | Cod | le | |
| | | | | | | | | | | F | Sav | ring rent | | | | | | | | |
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| Provide a | a copy of cancelle | l ed cheque leaf/pass t | ook/bank | l stateme | ent spe | cifvii | na n | ame | of the | L | . MIC | CR Code | e or/a | and I | IFSC | L Cod | e of t | he E | Bank | |
| Provide a copy of cancelled cheque leaf/pass book/bank statement specifying name of the client, MICR Code or/and IFSC Code of the Back. DEPOSITORY ACCOUNT(S) DETAILS, if available | | | | | | | | | | | | | | | | | | | | |
| Deposit | tory Participant Name | Name of Depository | Benef | ficiary Nar | ary Name DP ID Beneficia | | | | | | | | | iary ID | y ID (BO ID) | | | | | |
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| Provide | a copy of either | r Demat Client Mas | ter or a r | ecent ho | olding | stat | eme | ent i | ssued | by D | P be | aring n | ame | of | the cl | ient | <u> </u> | _ | | |
| D. TRA | DING PREFERE | NCES | | | | | | | | | | | | | | | | | | |
| *Please s | ign in the releva | ant boxes with which | Exchang | | | | | | | ge n | ot ch | osen sł | oula | be | struci | k off | f by th | 1e c | lient | |
| Sr. No. | Name of the Na | ational Commodity Ex | changes | | Date of consent for trading on concerned Exchange Signature of the | | | | | | | | | | ie CI | ient | | | | |
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| 2. | NCDEX (F/O) | | | | | | J. | | 2b) | | | | | | | | | | | |
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| our webs | site)] | | | Offli | ne | | |] 0 | nline | | | | 2c) | | | | | | | |
| E. INVE | STMENT / TRAD | DING EXPERIENCE | | | | | | | | | | | | | | | | | | |
| | lo Prior Experie | ence | | | | | | | | | | | | | | | | | | |
| | Yea | ars in Commodities | | | | | | | | | | | | | | | | | | |
| | Yea | ars in other investn | nent rela | ted field | ds | | | | | | | | | | | | | | | |

| F. GST DETAILS (As app | licable, | State | wise) | | | | | | | | | | | | | | | | | | | |
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| Legal Name | | | | | | | | | | | | | | | | | | | | | | |
| Trade Name | | | | | | | | | | | | | | | | | | | | | | |
| GSTIN | | | | | | | | | | | Reg | jistra | tion | Date | Э | | | | | | | |
| Name of the State | | | | | | | | | | | Stat | te Co | ode | | | | | | | | | |
| Other State GSTIN | | | | | | | | | | | Reg | jistra | tion | Date | Э | | | | | | | |
| Name of the State | | | | | | | | | | | Stat | te Co | ode | | | | | | | | | |
| G. PAST REGULATORY AC | CTIONS | | | | | | | | | | | | | | | | | | | | | |
| Details of any action/pro authority against the clier | | - | | • | - | | | - | | | | | _ | | | | - | | - | | • | |
| H. DEALING THROUGH | H OTHE | R MEI | MBEI | RS | | | | | | | | | | | | | | | | | | |
| If client a dealing through a all in a separate sheet cont | - | | | | | | | - | | • | cas | e dea | aling | with | mul | tiple | Mem | bers | s, pro | ovide | deta | ails of |
| Member's/Authorised Person | s Name | | | | | | | | | | | | | | | | | | | | | |
| Exchange | | | | | | | | | | | | | | | | | | | | | | |
| Exchange's Registration | No. | | | | | | | | | | | | | | | | | | | | | |
| Concerned Member's Na with whom the AP is regis | | | | | | | | | | | | | | | | | | | | | | |
| Registered Office Addres | S | | | | | | | | | | | | | | | | | | | | | |
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| | | Tel.: | | | | | | | | | | | Fax | X | | | | | | | | |
| | | E-ma | ail | | | | | | | | | | | | | | | | | | | |
| Client Code | | | | | | · | | | | | | | | | | | | | | | | |
| Details of disputes / dues p from/to such Member / AP: | | | | | | | | | | | | | | | | | | | | | | |
| I. INTRODUCER DETAILS | S | | | | | | | | | | | | | | | | | | | | | |
| Name of the introducer | | | | | | | | | | | | | | | | | | | | | | |
| Status of the Introducer | | Autho | rised | l Perso | n | | Ex | istir | ng Cli | ent | |] C | thers | S | | | | | | | | |
| Address and Phone No. of the Introducer | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | Sig | gn. of | the | Intro | oduc | er | | | | | | | | | |

| J. ADDITIONAL DETAILS | | | | |
|---|--|--|---|--|
| ■ Whether you wish to receive commu Member in electronic form on your E | | Yes (If yes then | No please fill in Appen | dix - A) |
| | | DECLARATION | ON | |
| undertake to inform you of any char misleading or misrepresenting, I am 2. I/We confirm having read/been ed documents. 3. I/We further confirm having read a Document' and 'Do's and Dont's'. I/ | nges therein, im / We are aware xplained and understood We do hereby a | nmediately. In case that I/we may be understood the contents of the contents o | se any of the above i e held liable for it. contents of the tarif of the 'Rights and O d by such provisions | of my/our knowledge and belief and I/we nformation is found to be false or untrue or if sheet and all voluntary/non-mandatory bligations' document(s), 'Risk Disclosure as outlined in these documents. I/We have for Information on company's website |
| Place | | | | d |
| Date *Form need to be signed by all the authorize | zed signatories | | | Client Signature |
| Tom need to be signed by an are authorize | - | FOR OFFICE US | E ONLY | |
| UCC Code allotted to the Client : | | | _ • | |
| | | Docum | ent verified with O | riginals |
| Name of the Employee | | | | |
| Employee Code | | | | |
| Designation of the Employee | | | | |
| Date | | | | |
| Signature | | | | |
| made the client aware of 'Rights and Ob a copy of all the KYC documents. I/We | ligations' docu undertake that 'We also under | ment (s), RDD, 'I any change in th take that any ch | Do's and Dont's' and ne tariff sheet and all | on-mandatory documents. I/We have also Guidance Note. I/We have given/sent him the voluntary/non-mandatory documents and Obligations' and RDD would be made For Finvasia Securities Pvt. Ltd. Signature of the Authorised Signatory |
| | | | | Seal / Stamp of the Member |

TARIFF CHARGES

- 1. All charges (namely, Exchange Transaction Charges, Clearing Member Charges, SEBI Fee, etc.) and statutory taxes (GST and stamp duty, etc.) shall be charged as per rates applicable from time to time in addition to brokerage.
- 2. Brokerage/ operational cost of ₹5 or 0.03% (whichever is lower) plus GST will apply to executed orders in Equity Intraday, Futures, Currency and Commodity Derivatives trades. Flat ₹5 plus GST on per executed order in all Options.
- 3. Charges mentioned above are in respect of the services listed. Any charges for additional services provided to clients will be charged extra and communicated accordingly.
- 4. Late penalty of 2% per month calculated on the daily overdue balance shall be charged until actual realization.
- 5. There shall be no software charges, However in case of any change in future, clients will be informed with two months notice.

Shoonya(EXE/ WEB/ MOB):-Zero Charges

6. I/We hereby authorize you to debit charges in respect of the pledge of securities against margin/settlement obligations to Exchanges, Clearing Members, Clearing Corporations, Banks, or any other Financial Institutions from my Trading account.

(4)

ACKNOWLEDGEMENT RECEIPT

To,

Finvasia Securities Pvt. Ltd.

FINVASIA CENTRE, D 179, Phase 8 B, (Sector 74) Mohali, Punjab-160055 (India)



by Finvaria

Date_____

Dear Sir.

I/We hereby wish to receive the below mentioned documents either electronically (email) or physically.

- Uniform Risk Disclosure Document for Commodities Market.
- 2. Rights & obligations of Member, Authorized Persons and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
- 3. Guidance Note Do's and Don'ts for dealing in Commodities Market for Investors.
- Policies and Procedures.
- Additional Risk Disclosure Document for Option Trading.

| Electronically (E-mail) | Physically | / |
|-------------------------|------------|---|
| L D(5) | | |
| Client Signature | | |

Client Name

ELECTRONIC CONTRACT NOTE (ECN) DECLARATION

To,

Finvasia Securities Pvt. Ltd.

FINVASIA CENTRE, D 179, Phase 8 B, (Sector 74) Mohali, Punjab-160055 (India)

| De | ar Sir, |
|-----|--|
| I_ | a client with member M/S |
| of_ | Exchange undertakes as follows: |
| • | I am aware that the member has to provide physical contract note in respect of all the trades placed by me unless I myself want the same in the electronic form. |
| • | I am aware that the member has to provide electronic contract note for my convenience on my request only. |
| • | Though the member is required to deliver physical contract note, I find that it is inconvenient for me to receive physical contract notes. Therefore, I am voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out/ordered by me. |
| • | I have access to a computer and am a regular internet user, having sufficient knowledge of handling the email operation. |
| • | My email id is* |
| | This has been created by me and not by someone else. |
| • | I am aware that this declaration form should be in English or in any other Indian language known to me. |
| • | I am aware that non-receipt of bounced mail notification by the member shall amount to delivery of the contract note at the above e-mail ID. |
| • | I/We am/are aware that this authorisation can be revoked any time by giving a notice in writing. |
| | me. I am aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same. *(The email id must be written in own handwriting of the client) |
| Cli | ent Name: |
| Ur | ique Client Code : |
| PA | N: |
| Ad | dress: |
| Się | gnature of Client 🔎 |
| Da | te :Place: |
| Ve | rification of the client signature done by, |
| Na | me of the designated officer of the Member |
| Siç | gnature |

RUNNING ACCOUNT AUTHORISATION

To, Finvasia Securities Pvt Ltd

FINVASIA CENTRE, D 179, Phase 8 B (Sector 74) Mohali, Punjab 160055 (India)

the manner specified by the exchanges.

I/We are dealing through you as a client in Capital Market and/or Future & Option segment and/or Currency segment and/or Commodity segment and/or Interest Rate future Segment and/or Mutual Fund Segment & in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as under:

- 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. I/We request you to settle my fund once in 30 days or once in 90 days or such other higher period as allowed by SEBI/Stock Exchange time to time.

 3. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite securities/funds/Mutual Fund Units towards such obligations and may also retain the funds expected to be required to meet future margin obligations, calculated in
- 4. I/We confirm you that I will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 30 working days from the date of receipt of funds/securities or statement of account or statement related to it, as the case may be at your registered office. The running account authorization provided by me shall continue and remain valid until it is revoked by me anytime in writing.

| Thanking You | |
|-------------------|-------------|
| Yours faithfully, | |
| Signature | Date:/ |
| Name | Client Code |

UNDERTAKING TO ACT IN OWN CAPACITY

I/We do hereby solemnly affirm and declare as under:

- That my/our registration with FINVASIA SECURITIES PVT. LTD. (FSPL) is in individual capacity and is
 for transacting on my/our own account. And that no one except myself/ourself has/have any interest in
 the account with FSPL.
- 2. That I/We shall not be acting further as an intermediary / sub-broker in any manner whatsoever for the transactions executed in any segment of any security exchange(s) in my/our account with FSPL.
- 3. That I/We further state that if anybody on my/our behalf makes claim of any amounts / securities on account of the transactions in my/our account, the said act shall be null and void and shall be ineffective from all corners.
- 4. In case FSPL finds that I/We am/are acting as an un-registered Sub-broker, FSPL can immediately cancel my/our account with them and adjust all credit against my/our liabilities.
- 5. That I/We shall inform FSPL any of my/our registration in any capacity with any other member of the exchange(s) to transact on the same segment as at FSPL.
- 6. I/We shall not make any payment to FSPL drawn on the account of any third party whether related to me/us or not. All payments to my/our above A/c shall be from bank accounts that stand in my/our own name and registered with FSPL.
- 7. I/We shall not make any cash payment to FSPL nor shall I/We insist on any sales person/business associate to accept cash in lieu of account payee cheque/fund transfer. I/We understand that FSPL does not accept cash from clients and therefore any cash payment made by me/us to any staff shall be at my/our sole risk and I/We absolve FSPL of all liability and claim that may arise from any cash payment made by me/us.
- 8. I/We have been made understood by FSPL that it does not permit any of Its employee to place any discretionary orders in the account of any client therefore I/We must not authorise any of FSPL's staff member to place any discretionary order under any circumstances in my / our trading account and that FSPL limits its liability in the event of I/we giving any such authorisation to any of the Employee of FSPL.

| L D(8) | | |
|-------------------------|-------------|--|
| Signature of the Client | | |
| | | |
| | | |
| Client Name | Client Code | |

| FATCA & CRS Declaration - Non Individual | | | | | | |
|---|--|----------------|---|--|--|--|
| PAN | | | | | | |
| Plea | se tick the applicable tax resident declaration - | | | | | |
| | s "Entity" a tax resident of any country other tha | | Yes No | | | |
| Sr. | yes, please provide country/ies in which the | entity is a re | | Identification Type | | |
| No. | Country | | Tax Identification Number | (TIN or Other*, please specify) | | |
| I. | | | | | | |
| 2. | | | | | | |
| | | | | | | |
| In case Tax Identification Number is not available, kindly provide its functional equivalent. In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc. In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here | | | | | | |
| DAL | | | | | | |
| 1. | PART A (to be filled by Financial Institutions or Direct Reporting NFEs) I. We are a, Financial institution (Refer I of Part C) or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate) GIIN Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's name below Name of sponsoring entity Name of sponsoring entity | | | d by another entity, please provide your sponsor's | | |
| | GIIN not available (please tick as applicable) | = | Applied for Not obtained – Non-participating FI Not required to apply for - please specify 2 digits sub-category (Refer I A of Part C) | | | |
| PAF | RT B (please fill any one as appropriate "to be filled by | | | , | | |
| I. | ls the Entity a publicly traded company (that is, whose shares are regularly traded on an establish securities market) (Refer 2a of Part C) | , a company | | ck exchange on which the stock is regularly traded) | | |
| 2. | Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C) | | Name of listed company | company and one stock exchange on which the stock is regularly traded) the Listed Company or Controlled by a Listed Company | | |
| 3. | Is the Entity an active NFE (Refer 2c of Part C) | | Yes Nature of Business Please specify the sub-category of Active | NFE (Mention code – refer 2c of Part C) | | |
| 4. | Is the Entity a passiveNFE (Refer 3(ii) of Part C) | | Yes Nature of Business | | | |
| UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company) | | | | | | |
| Cate | egory (Please tick applicable category): | | Company Partnership Firm | Limited Liability Partnership Company | | |
| Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust | | | | | | |
| Others (please specify) | | | | | | |
| Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). (Please attach additional sheets if necessary) Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C) | | | | | | |

| Details | UBO1 | UBO2 | UBO3 | | | |
|--|--|--|--|--|--|--|
| Name of UBO | | | | | | |
| UBO Code (Refer 3(iv) (A) of Part C) | | | | | | |
| Country of Tax residency* | | | | | | |
| PAN # | | | | | | |
| Address | | | | | | |
| | | | | | | |
| | Zip | Zip | Zip | | | |
| | State: | State: | State: | | | |
| | Country: | Country: | Country: | | | |
| Address Type | ☐ Residence ☐ Business ☐ Registered office | ☐ Residence ☐ Business ☐ Registered office | ☐ Residence ☐ Business ☐ Registered office | | | |
| Tax ID [%] | | | | | | |
| Tax ID Type | | | | | | |
| City of Birth | | | | | | |
| Country of birth | _ | _ | _ | | | |
| Occupation Type | ☐ Service ☐ Business ☐ Others | ☐ Service ☐ Business ☐ Others | ☐ Service ☐ Business ☐ Others | | | |
| Nationality | | | | | | |
| Father's Name | | | _ | | | |
| Gender | ☐ Male ☐ Female ☐ Others | ☐ Male ☐ Female ☐ Others | ☐ Male ☐ Female ☐ Others | | | |
| Date of Birth | DD/MM/YYYY | DD/MM/YYYY | DD/MM/YYYY | | | |
| Percentage of Holding (%) \$ | | | | | | |
| * To include US, where controlling person is a US citizen or green card holder f If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable. f In case Tax Identification Number is not available, kindly provide functional equivalent Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary | | | | | | |
| | | RATION | | | | |
| I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform FINVASIA SECURITIES PVT. LTD. for any modification to this information promptly. | | | | | | |
| I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI). | | | | | | |
| Name | | | | | | |
| Designation | | | | | | |
| | | | M M Y Y Y Y | | | |
| (Client Signature) (9) | | Place : | | | | |
| For Investor convenience, FINVASIA SECURITIES PVT. LTD. collecting this mandatory information for updating across all Group Companies of Stratagem FINVASIA SECURITIES PVT. LTD. whether you are already an investor or would become an investor in future. | | | | | | |
| Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest FINVASIA SECURITIES PVT. LTD. branch or you can dispatch the hard copy to- | | | | | | |
| FINVASIA SECURITIES PVT. LTD. FINVASIA CENTRE, D 179, Phase 8 B, (Sector 74) | | | | | | |

Mohali, Punjab-160055 (India)

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

| To, Finvasia Securities Pvt. Ltd. FINVASIA CENTRE, D 179, Phase 8 B, (Sector 74) Mohali, Punjab-160055 (India) | Date | | | | |
|---|---|--|--|--|--|
| Dear Sir, | | | | | |
| We refer to the Commodities trading account being of and declare and authorise yo | | | | | |
| We recognize that a beneficiary account cannot be opened with a depository participant in the name of a partnership firm as per applicable law. To facilitate the operation of the above trading account with you and for the purpose of completing the Commodities transfer obligations pursuant to the trading operations, we authorise you to recognize the beneficiary account No | | | | | |
| the names of the partnership of the firm. | | | | | |
| We agree that the obligations for Commodities purchased and/or so transfer to/from the above mentioned account. We recognize and accomplete discharge of obligations by you in respect of trades executive. | cept transfers made by you to the beneficiary account | | | | |
| We hereby authorize, p | | | | | |
| documents, agreements, deeds etc. as may be necessary to enter into the agreement and engage in business with Finvasia Securities Pvt. Ltd. and to place order for buying and selling of Commodities, sell, purchase, transfer, endorse, negotiate and do other things that may be necessary to engage in business on behalf of the partnership and to sign the authority letter for adjustment of balances in family accounts. | | | | | |
| Name of Partners (in block letters) | Signature | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| FORMAT OF BOARD RESOLUTION TO BE G (TO BE PRINTED ON LETTER HI | | | | | |
| CERTIFIED TRUE COPY OF EXTRACTS OF THE MINI | JTES OF THE MEETING OF THE BOARD | | | | |
| OF DIRECTORS OF | (Co. Name) CONVENED ON | | | | |
| THE (da | te) /TIME AT | | | | |
| | | | | | |
| "RESOLVED THAT an account for the purpose of trading in Commodities be opened with M/s. Finvasia Securities Pvt. Ltd., Member - Multi Commodity Exchange of India Ltd. and National Commodity & Derivative Exchange Ltd., hereinafter referred to as the Broker, for undertaking sale & purchase of Commodities on the said exchange(s). | | | | | |
| FURTHER RESOLVED THAT Shri | and | | | | |
| Shri, Directors of the Comp | any, be and are hereby, authorised severally to do all such | | | | |
| acts, deeds, things and sign all documents papers, authorisations, agreements said account with Broker. $ \\$ | nents etc. as may be necessary for opening and operating | | | | |
| FURTHER RESOLVED THAT the aforementioned Directors, be and are of the Company. for conducting trading in Commodities for and on behalf of | | | | | |
| FURTHER RESOLVED THAT, a copy of this resolution be forwarded to the | e Broker by Shri | | | | |
| | rs, & the Broker, be instructed to honour the instructions of | | | | |
| Shriand / or Shri_ the Company to carry on trading in Commodities. | , Directors of | | | | |
| | | | | | |
| Certified true copy For (Name of the Company) | | | | | |
| For (Name of the Company) | | | | | |
| | | | | | |
| D' | Dated : | | | | |
| Director | | | | | |

Most Important Terms and Conditions (MITC)

(For non-custodial settled trading accounts)

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

| L i | |
|--------------------|--|
| (Client Signature) | |

Most Important Terms and Conditions (MITC)

[Forming part of the Terms and Conditions for providing research services]

- 1. These terms and conditions, and consent thereon are for the research services provided by the Research Analyst (RA) and RA cannot execute/carry out any trade (purchase/sell transaction) on behalf of, the client. Thus, the clients are advised not to permit RA to execute any trade on their behalf.
- The fee charged by RA to the client will be subject to the maximum of amount prescribed by SEBI/ Research Analyst Administration and Supervisory Body (RAASB) from time to time (applicable only for Individual and HUF Clients).
 Note:
 - 2.1. The current fee limit is Rs 1,51,000/- per annum per family of client for all research services of the RA.
 - 2.2. The fee limit does not include statutory charges.
 - 2.3. The fee limits do not apply to a non-individual client / accredited investor.
- 3. RA may charge fees in advance if agreed by the client. Such advance shall not exceed the period stipulated by SEBI; presently it is one quarter. In case of pre-mature termination of the RA services by either the client or the RA, the client shall be entitled to seek refund of proportionate fees only for unexpired period.
- 4. Fees to RA may be paid by the client through any of the specified modes like cheque, online bank transfer, UPI, etc. Cash payment is not allowed. Optionally the client can make payments through Centralized Fee Collection Mechanism (CeFCoM) managed by BSE Limited (i.e. currently recognized RAASB).
- 5. The RA is required to abide by the applicable regulations/ circulars/ directions specified by SEBI and RAASB from time to time in relation to disclosure and mitigation of any actual or potential conflict of interest. The RA will endeavor to promptly inform the client of any conflict of interest that may affect the services being rendered to the client.
- 6. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. No scheme of this nature shall be offered to the client by the RA.
- 7. The RA cannot guarantee returns, profits, accuracy, or risk-free investments from the use of the RA's research services. All opinions, projections, estimates of the RA are based on the analysis of available data under certain assumptions as of the date of preparation/publication of research report.
- 8. Any investment made based on recommendations in research reports are subject to market risks, and recommendations do not provide any assurance of returns. There is no recourse to claim any losses incurred on the investments made based on the recommendations in the research report. Any reliance placed on the research report provided by the RA shall be as per the client's own judgement and assessment of the conclusions contained in the research report.
- 9. The SEBI registration, Enlistment with RAASB, and NISM certification do not guarantee the performance of the RA or assure any returns to the client.
- 10. For any grievances, Step 1: the client should first contact the RA using the details on its website or following contact details: (RA to provide details as per 'Grievance Redressal / Escalation Matrix') Step 2: If the resolution is unsatisfactory, the client can also lodge grievances through SEBI's SCORES platform at www.scores.sebi.gov.in
 Step 3: The client may also consider the Online Dispute Resolution (ODR) through the Smart OD
 - Step 3: The client may also consider the Online Dispute Resolution (ODR) through the Smart ODR portal at https://smartodr.in
- 11. Clients are required to keep contact details, including email id and mobile number/s updated with the RA at all times.
- 12. The RA shall never ask for the client's login credentials and OTPs for the client's Trading Account Demat Account and Bank Account. Never share such information with anyone including RA.

| (Client Signature) | |
|--------------------|--|