



# MLB SECURITIES LIMITED

MEMBER : NATIONAL STOCK EXCHANGE OF INDIA LTD.  
CALCUTTA STOCK EXCHANGE LIMITED  
BSE LIMITED

## CLIENT REGISTRATION KIT (CAPITAL MARKET / F&O SEGMENT)

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CLIENT CODE \_\_\_\_\_

CLIENT NAME \_\_\_\_\_

GROUP HEAD/BRANCH \_\_\_\_\_

MARKETING EXECUTIVE \_\_\_\_\_

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# MLB SECURITIES LIMITED

<b>INDEX OF DOCUMENTS</b>		
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<b>MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI &amp; EXCHANGES</b>		
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\* Such documents are voluntary and the client need not execute such documents if he / she does not wish to use that facility. If executed, the client has a right to terminate the document any time he wishes by informing in writing.

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

**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.
- B) Tick '✓' wherever applicable.
- C) Please fill the form in English and in BLOCK letters.
- D) Please fill the date in DD-MM-YYYY format.
- E) For particular section update, please tick (✓) in the box section number and strike off the sections not required to be updated.

- F) Please read section wise detailed guidelines / instructions at the end.
- G) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.
- H) List of two character ISO 3166 country codes may be obtained from our office.
- I) KYC number of applicant is mandatory for update application.
- J) The 'OTP based E-KYC' check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode.



<b>For office use only</b>	Application Type*	<input type="checkbox"/> New	<input type="checkbox"/> Update	
(To be filled by financial institution)	KYC Number	(Mandatory for KYC update request)		
	Account Type*	<input type="checkbox"/> Normal	<input type="checkbox"/> Minor	<input type="checkbox"/> Aadhaar OTP based E-KYC (in non-face to face mode)

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

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
PAN*	<input type="text"/>	<input type="checkbox"/> Form 60 furnished		

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

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

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



**Address**

Line 1*	<input type="text"/>				
Line 2	<input type="text"/>				
Line 3	<input type="text"/>			City / Town / Village*	<input type="text"/>
District*	<input type="text"/>	Pin/Post Code*	<input type="text"/>	State/U.T Code*	<input type="text"/>
				ISO 3166 Country Code*	<input type="text"/>

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

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

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

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

**Address**

Line 1*	<input type="text"/>				
Line 2	<input type="text"/>				
Line 3	<input type="text"/>			City / Town / Village*	<input type="text"/>
District*	<input type="text"/>	Pin / Post Code*	<input type="text"/>	State/U.T Code*	<input type="text"/>
				ISO 3166 Country Code*	<input type="text"/>





**Important Instructions:**

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

**For office use only** Application Type\*  New  Update  
 (To be filled by financial institution) KYC Number  (Mandatory for KYC update request)

**1. ENTITY DETAILS\*** (Please refer instruction A at the end)

Name\*

Entity Constitution Type\*  Others (Specify)  (Please refer instruction B at the end)

Date of Incorporation / Formation\* ----- Date of Commencement of Business -----

Place of Incorporation / Formation\*  Country of Incorporation / Formation\*  TIN or Equivalent Issuing Country

PAN \*   Form 60 furnished

TIN / GST Registration Number

**2. PROOF OF IDENTITY (Pol)\*** (Please refer instruction B at the end)

Officially valid document(s) in respect of person authorised to transact

Certificate of Incorporation / Formation   Registration Certificate  Regn Certificate No.

Memorandum and Articles of Association  Partnership Deed  Trust Deed

Resolution of Board / Managing Committee  Power of attorney granted to its manager, officers or employees to transact on its behalf

Activity Proof - 1 (For Sole Proprietorship Only)  Activity Proof - 2 (For Sole Proprietorship Only)

**3. ADDRESS\*** (Please see instruction C at the end)

**3.1 Registered Office Address / Place of Business\***

Proof of Address\*  Certificate of Incorporation / Formation  Registration Certificate  Other Document

Line 1\*

Line 2

Line 3  City / Town / Village\*

District\*  PIN / Post Code\*  State / U.T Code\*  ISO 3166 Country Code\*

**3.2 Local Address in India (If different from Above)\***

Line 1\*

Line 2

Line 3  City / Town / Village\*

District\*  PIN / Post Code\*  State / U.T Code\*  ISO 3166 Country Code\*

**4. CONTACT DETAILS** (All communications will be sent to Mobile number/ Email-ID provided\* may be used) (Please refer instruction D at the end)

Tel. (Off) - FAX -

Mobile - Email ID

Mobile - Email ID

**5. NUMBER OF RELATED PERSONS**  (Please refer instruction E at the end)



**CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person**

**Important Instructions:**

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



For office use only      Application Type\*     New     Update     Delete  
 (To be filled by financial institution) KYC Number        (Mandatory for KYC update and delete request)

**1. DETAILS OF RELATED PERSON\*** (Please refer instruction E at the end)

Addition of Related Person       Deletion of Related Person       Update Related Person Details  
 KYC Number of Related Person (if available\*)  if KYC number is available, only 'Related Person Type' & 'Name' is mandatory  
**Related Person Type\***     Director     Promoter     Karta     Trustee     Partner     Court Appointment Official     Proprietor  
                                   Beneficiary     Authorised Signatory     Beneficial Owner     Power of Attorney Holder     Other (Please specify)  
 DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)

**1.1 PERSONAL DETAILS** (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male <input type="checkbox"/> F- Female <input type="checkbox"/> T-Transgender			
Nationality*	<input type="checkbox"/> IN- Indian <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )			
PAN*	<input type="text"/>			<input type="checkbox"/> Form 60 furnished

**1.2 PROOF OF IDENTITY AND ADDRESS\*** (Please refer instruction E at the end)

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

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



**Address**

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

**1.3. CURRENT ADDRESS DETAILS** (Please refer instruction E and the end)

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

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

- A- Passport Number
- B-Voter ID Card
- C- Driving Licence
- D-NREGA Job Card
- E- National Population Register Letter
- F - Proof of Possession of Aadhaar
- II  E-KYC Authentication
- II  Offline verification of Aadhaar
- IV  Deemed PoA
- V  Self Declaration

**Address**

Line 1\*

Line 2

Line 3  City / Town / Village\*

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

**1. 4 CONTACT DETAILS (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction D at the end)**

Tel. (Off)  -  Tel. (Res)  -  Mobile  -

Email ID

**2. APPLICANT DECLARATION**

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

Date :   -   -     Place:

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

**Documents Received**  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  
 Digital KYC process  Equivalent e-document

**IPV and KYC VERIFICATION CARRIED OUT BY**

Date  -  -

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

**INSTITUTION DETAILS**

Name **MLB SECURITIES LIMITED**

Code **IN1282**

Employee Signature

[Institution Stamp]



**CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person**



**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.
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- C) Please fill the date in DD-MM-YYYY format.
- D) Please fill the form in English and in BLOCK letters.
- E) KYC number of applicant is mandatory for update application.
- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.
- G) List of two character ISO 3166 country codes is available at the end.
- H) Please read section wise detailed guidelines / instructions at the end.
- I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only      Application Type\*     New     Update     Delete  
 (To be filled by financial institution) KYC Number        (Mandatory for KYC update and delete request)

**1. DETAILS OF RELATED PERSON\*** (Please refer instruction E at the end)

Addition of Related Person       Deletion of Related Person       Update Related Person Details  
 KYC Number of Related Person (if available\*)     *if KYC number is available, only 'Related Person Type' & 'Name' is mandatory*  
**Related Person Type\***     Director     Promoter     Karta     Trustee     Partner     Court Appointment Official     Proprietor  
                                   Beneficiary     Authorised Signatory     Beneficial Owner     Power of Attorney Holder     Other (Please specify)  
 DIN (Director Identification Number)     (Mandatory if Related Person Type is Director)

**1.1 PERSONAL DETAILS** (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male <input type="checkbox"/> F- Female <input type="checkbox"/> T-Transgender			
Nationality*	<input type="checkbox"/> IN- Indian <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )			
PAN*	<input type="text"/>			<input type="checkbox"/> Form 60 furnished

**1.2 PROOF OF IDENTITY AND ADDRESS\*** (Please refer instruction E at the end)

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

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- III  Offline verification of Aadhaar



**Address**

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

**1.3. CURRENT ADDRESS DETAILS** (Please refer instruction E and the end)

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- II  Offline verification of Aadhaar
- IV  Deemed PoA
- V  Self Declaration

**Address**

Line 1\*

Line 2

Line 3  City / Town / Village\*

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

**1. 4 CONTACT DETAILS** (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

Tel. (Off)  -  Tel. (Res)  -  Mobile  -

Email ID

**2. APPLICANT DECLARATION**

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

Date :   -   -     Place:

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

**Documents Received**  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  
 Digital KYC process  Equivalent e-document

**IPV and KYC VERIFICATION CARRIED OUT BY**

**INSTITUTION DETAILS**

Date  -  -

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

Name **MLB SECURITIES LIMITED**

Code **IN1282**

[Employee Signature]

[Institution Stamp]

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

## Important Instructions:

- A) Fields marked with "\*" are mandatory fields.  
 B) Tick '✓' wherever applicable.  
 C) Please fill the date in DD-MM-YYYY format.  
 D) Please fill the form in English and in BLOCK letters.  
 E) KYC number of applicant is mandatory for update application.
- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.  
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 H) Please read section wise detailed guidelines / instructions at the end.  
 I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.



For office use only Application Type\*  New  Update  Delete  
 (To be filled by financial institution) KYC Number  (Mandatory for KYC update and delete request)

## 1. DETAILS OF RELATED PERSON\* (Please refer instruction E at the end)

- Addition of Related Person  Deletion of Related Person  Update Related Person Details  
 KYC Number of Related Person (if available\*)  if KYC number is available, only 'Related Person Type' & 'Name' is mandatory
- Related Person Type\***  Director  Promoter  Karta  Trustee  Partner  Court Appointment Official  Proprietor  
 Beneficiary  Authorised Signatory  Beneficial Owner  Power of Attorney Holder  Other (Please specify)
- DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)

## 1.1 PERSONAL DETAILS (Please refer instruction E at the end)

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Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male <input type="checkbox"/> F- Female <input type="checkbox"/> T-Transgender			
Nationality*	<input type="checkbox"/> IN- Indian <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )			
PAN*	<input type="text"/>			<input type="checkbox"/> Form 60 furnished

## 1.2 PROOF OF IDENTITY AND ADDRESS\* (Please refer instruction E at the end)

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

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- D-NREGA Job Card
- E- National Population Register Letter
- F - Proof of Possession of Aadhaar
- II  E-KYC Authentication
- III  Offline verification of Aadhaar

PHOTO\*



## Address

Line 1\*

Line 2

Line 3

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

## 1.3. CURRENT ADDRESS DETAILS (Please refer instruction E and the end)

Same as above mentioned address (In such cases address details as below need not be provided)  
 I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

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- IV  Deemed PoA
- V  Self Declaration

**Address**

Line 1\*

Line 2

Line 3  City / Town / Village\*

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

**1. 4 CONTACT DETAILS** (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

Tel. (Off)  -  Tel. (Res)  -  Mobile  -

Email ID

**2. APPLICANT DECLARATION**

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

Date :   -   -     Place:

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

**Documents Received**  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  
 Digital KYC process  Equivalent e-document

**IPV and KYC VERIFICATION CARRIED OUT BY**

**INSTITUTION DETAILS**

Date  -  -

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

Name **MLB SECURITIES LIMITED**

Code **IN1282**

[Employee Signature]

[Institution Stamp]

# KNOW YOUR CLIENT (KYC) Application Form - For Individuals

NEW  CHANGE REQUEST (Please tick ✓ the appropriate)

Acknowledgement No. \_\_\_\_\_



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

(Please tick ✓ the box on left margin of appropriate row where **CHANGE/CORRECTION** is required and provide the details in the corresponding row)

A	IDENTITY DETAILS										
<input type="checkbox"/>	1. Name of the Applicant _____										
<input type="checkbox"/>	2. Father's/Spouse Name _____										
<input type="checkbox"/>	3a. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female    3b. Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married    3c. Date of Birth <table style="display: inline-table; border-collapse: collapse;"><tr><td style="border: 1px solid black; width: 20px; text-align: center;">D</td><td style="border: 1px solid black; width: 20px; text-align: center;">D</td><td style="border: 1px solid black; width: 10px; text-align: center;">/</td><td style="border: 1px solid black; width: 20px; text-align: center;">M</td><td style="border: 1px solid black; width: 20px; text-align: center;">M</td><td style="border: 1px solid black; width: 10px; text-align: center;">/</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td></tr></table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y		
<input type="checkbox"/>	4a. Nationality <input type="checkbox"/> Indian <input type="checkbox"/> Other (Please specify) _____										
<input type="checkbox"/>	4b. Status <input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National										
<input type="checkbox"/>	5a. PAN _____										
<input type="checkbox"/>	5b. Unique Identification Number (UID) / Aadhaar, if any: _____										
<input type="checkbox"/>	6. Specify Proof of Identity submitted <input type="checkbox"/> PAN card <input type="checkbox"/> Other (Please specify) _____										

**PHOTOGRAPH**

Please affix  
your recent passport  
size photograph and  
sign across it

B	ADDRESS DETAILS						
<input type="checkbox"/>	1. Residence / Correspondence Address _____  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; border-bottom: 1px solid black;">City / Town / Village</td> <td style="width: 40%; border-bottom: 1px solid black;">Country</td> <td style="width: 30%; border-bottom: 1px solid black;">Pin Code</td> </tr> <tr> <td style="border-bottom: 1px solid black;">State</td> <td></td> <td></td> </tr> </table>	City / Town / Village	Country	Pin Code	State		
City / Town / Village	Country	Pin Code					
State							
<input type="checkbox"/>	2. Specify the Proof of Address submitted for Residence / Correspondence Address: _____						
<input type="checkbox"/>	3. Contact Details <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;">Tel. (Off.)</td> <td style="width: 50%; border-bottom: 1px solid black;">Fax</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Tel. (Res.)</td> <td style="border-bottom: 1px solid black;">Mobile No</td> </tr> <tr> <td style="border-bottom: 1px solid black;">E-Mail Id.</td> <td></td> </tr> </table>	Tel. (Off.)	Fax	Tel. (Res.)	Mobile No	E-Mail Id.	
Tel. (Off.)	Fax						
Tel. (Res.)	Mobile No						
E-Mail Id.							
<input type="checkbox"/>	4. Permanent Address (If different from above or overseas address, mandatory for Non-Resident Applicant)  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; border-bottom: 1px solid black;">City / Town / Village</td> <td style="width: 40%; border-bottom: 1px solid black;">Country</td> <td style="width: 30%; border-bottom: 1px solid black;">Pin Code</td> </tr> <tr> <td style="border-bottom: 1px solid black;">State</td> <td></td> <td></td> </tr> </table>	City / Town / Village	Country	Pin Code	State		
City / Town / Village	Country	Pin Code					
State							

C	DECLARATION										
<input type="checkbox"/>	<p>I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.</p> <p style="text-align: right;">Date: <table style="display: inline-table; border-collapse: collapse;"><tr><td style="border: 1px solid black; width: 20px; text-align: center;">D</td><td style="border: 1px solid black; width: 20px; text-align: center;">D</td><td style="border: 1px solid black; width: 10px; text-align: center;">/</td><td style="border: 1px solid black; width: 20px; text-align: center;">M</td><td style="border: 1px solid black; width: 20px; text-align: center;">M</td><td style="border: 1px solid black; width: 10px; text-align: center;">/</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td></tr></table></p> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 10px;"></div> <p style="text-align: right; margin-top: 5px;">Signature of the Applicant</p>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y		

FOR OFFICE USE ONLY											
<p><b>In Person Verification (IPV) Details:</b></p> <p>Name of the person who has done the IPV: _____</p> <p>Designation: _____ Employee ID: _____</p> <p>Name of the Organization: _____</p> <p>Date of IPV: <table style="display: inline-table; border-collapse: collapse;"><tr><td style="border: 1px solid black; width: 20px; text-align: center;">D</td><td style="border: 1px solid black; width: 20px; text-align: center;">D</td><td style="border: 1px solid black; width: 10px; text-align: center;">/</td><td style="border: 1px solid black; width: 20px; text-align: center;">M</td><td style="border: 1px solid black; width: 20px; text-align: center;">M</td><td style="border: 1px solid black; width: 10px; text-align: center;">/</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td><td style="border: 1px solid black; width: 20px; text-align: center;">Y</td></tr></table> _____</p> <p style="text-align: right; margin-right: 50px;">Signature of the person who has done the IPV</p>	D	D	/	M	M	/	Y	Y	Y	Y	<div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p style="text-align: center; margin-top: 5px;">Seal/Stamp of the Intermediary</p>
D	D	/	M	M	/	Y	Y	Y	Y		
<p><input type="checkbox"/> Originals Verified and Self Attested Document copies received</p> <p style="text-align: center; margin-top: 20px;">_____</p> <p style="text-align: center; margin-top: 5px;">Date</p> <p style="text-align: right; margin-right: 50px;">_____</p> <p style="text-align: right; margin-top: 5px;">Signature of the Authorised Signatory</p>											

**INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM**

**A. IMPORTANT POINTS:**

- Self attested copy of PAN card is mandatory for all clients, including Promoters/Partners/Karta/Trustees and whole time directors and persons authorised to deal in securities on behalf of company/firm/others.
- 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 authorised for attesting the documents, as per the below mentioned list.
- If any proof of identity or address is in a foreign language, then translation into English is required.
- Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- If correspondence & permanent address are different, then proofs for both have to be submitted.
- Sole proprietor must make the application in his individual name & capacity.
- For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
- For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
- In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

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

- Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
- PAN card with photograph.
- Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

**C. Proof of Address (POA): - List of documents admissible as Proof of Address:**

(\*Documents having an expiry date should be valid on the date of submission.)

- Passport/Voters Identity Card/Ration Card/Unique Identification Number (UID)/Aadhar Letter/Registered lease or Sale Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.

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

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

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

**D. Exemptions/clarifications to PAN**

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

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

- Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- In case of NRIs, authorised 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.

# KNOW YOUR CLIENT (KYC) Application Form - For Non Individuals

NEW  CHANGE REQUEST (Please tick ✓ the appropriate)

Acknowledgement No. \_\_\_\_\_



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

(Please tick ✓ the box on left margin of appropriate row where **CHANGE/CORRECTION** is required and provide the details in the corresponding row)

<b>A</b>	<p><b>IDENTITY DETAILS</b></p> <p><input type="checkbox"/> 1. Name of the Applicant _____</p> <p><input type="checkbox"/> 2a. Date of incorporation   D   D   /   M   M   /   Y   Y   Y   Y   2b. Place of incorporation _____</p> <p><input type="checkbox"/> 3. Date of commencement of business   D   D   /   M   M   /   Y   Y   Y   Y  </p> <p><input type="checkbox"/> 4a. PAN _____</p> <p><input type="checkbox"/> 4b. Registration No. (e.g. CIN) _____</p> <p><input type="checkbox"/> 5. Status (Please tick ✓ the appropriate)</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Private Limited Co.</td> <td><input type="checkbox"/> Public Ltd. Co.</td> <td><input type="checkbox"/> Body Corporate</td> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Trust</td> </tr> <tr> <td><input type="checkbox"/> Charities</td> <td><input type="checkbox"/> NGO's</td> <td><input type="checkbox"/> FI</td> <td><input type="checkbox"/> FII</td> <td><input type="checkbox"/> HUF</td> </tr> <tr> <td><input type="checkbox"/> AOP</td> <td><input type="checkbox"/> Bank</td> <td><input type="checkbox"/> Government Body</td> <td><input type="checkbox"/> Non-Government Organization</td> <td><input type="checkbox"/> Defense Establishment</td> </tr> <tr> <td><input type="checkbox"/> BOI</td> <td><input type="checkbox"/> Society</td> <td><input type="checkbox"/> LLP</td> <td><input type="checkbox"/> FPI - Category I</td> <td><input type="checkbox"/> FPI - Category II</td> </tr> <tr> <td><input type="checkbox"/> FPI - Category III</td> <td colspan="4"><input type="checkbox"/> Others (Please specify) _____</td> </tr> </table>	<input type="checkbox"/> Private Limited Co.	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust	<input type="checkbox"/> Charities	<input type="checkbox"/> NGO's	<input type="checkbox"/> FI	<input type="checkbox"/> FII	<input type="checkbox"/> HUF	<input type="checkbox"/> AOP	<input type="checkbox"/> Bank	<input type="checkbox"/> Government Body	<input type="checkbox"/> Non-Government Organization	<input type="checkbox"/> Defense Establishment	<input type="checkbox"/> BOI	<input type="checkbox"/> Society	<input type="checkbox"/> LLP	<input type="checkbox"/> FPI - Category I	<input type="checkbox"/> FPI - Category II	<input type="checkbox"/> FPI - Category III	<input type="checkbox"/> Others (Please specify) _____			
<input type="checkbox"/> Private Limited Co.	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust																						
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<input type="checkbox"/> FPI - Category III	<input type="checkbox"/> Others (Please specify) _____																									

<b>B</b>	<p><b>ADDRESS DETAILS</b></p> <p><input type="checkbox"/> 1. Address for Correspondence _____</p> <p>City / Town / Village _____ Pin Code _____          State _____ Country _____</p> <p><input type="checkbox"/> 2. Specify the Proof of Address submitted for Correspondence Address: _____</p> <p><input type="checkbox"/> 3. Contact Details</p> <table style="width: 100%;"> <tr> <td>Tel. (Off.) _____</td> <td>Fax _____</td> </tr> <tr> <td>Tel. (Res.) _____</td> <td>Mobile No _____</td> </tr> <tr> <td colspan="2">E-Mail Id. _____</td> </tr> </table> <p><input type="checkbox"/> 4. Registered Address (If different from above)</p> <p>City / Town / Village _____ Pin Code _____          State _____ Country _____</p>	Tel. (Off.) _____	Fax _____	Tel. (Res.) _____	Mobile No _____	E-Mail Id. _____	
Tel. (Off.) _____	Fax _____						
Tel. (Res.) _____	Mobile No _____						
E-Mail Id. _____							

<b>C</b>	<p><b>OTHER DETAILS</b> (If space is insufficient, enclose these details separately [Illustrative format enclosed])</p> <p><input type="checkbox"/> 1. Name, PAN, residential address and photographs of Promoters/Partners/Karta/Trustees and whole time directors: _____</p> <p><input type="checkbox"/> 2a. DIN of whole time directors : _____</p> <p><input type="checkbox"/> 2b. Aadhar number of Promoters/Partners/Karta : _____</p>
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<b>D</b>	<p><b>DECLARATION</b></p> <p>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.</p> <p>Date:   D   D   /   M   M   /   Y   Y   Y   Y  </p> <p style="text-align: right;"><input type="checkbox"/> _____ Name &amp; Signature of the Authorised Signatory</p>
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<b>D</b>	<p><b>FOR OFFICE USE ONLY</b></p> <p><b>In Person Verification (IPV) Details:</b></p> <p>Name of the person who has done the IPV: _____</p> <p>Designation: _____ Employee ID: _____</p> <p>Name of the Organization: _____</p> <p>Date of IPV:   D   D   /   M   M   /   Y   Y   Y   Y  </p> <p style="text-align: right;">Signature of the person who has done the IPV _____</p> <p style="text-align: right;">Seal/Stamp of the Intermediary _____</p> <p><input type="checkbox"/> Originals Verified and Self Attested Document copies received</p> <p style="text-align: center;">_____ Date _____</p> <p style="text-align: right;">_____ Signature of the Authorised Signatory _____</p>
----------	---

1. Name

2. Relationship with Applicant (i.e. promoters, whole time directors etc.)

3a. PAN  3b. DIN

3c. Aadhar (UID) Number

4. Residential/ Registered Address

City / Town / Village  Country  Pin Code

State

**PHOTOGRAPH**

Please affix  
your recent passport  
size photograph and  
sign across it

1. Name

2. Relationship with Applicant (i.e. promoters, whole time directors etc.)

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State

**PHOTOGRAPH**

Please affix  
your recent passport  
size photograph and  
sign across it

Name & Signature of the Authorised Signatory (ies)

Date:  /  /



## TRADING ACCOUNT RELATED DETAILS - FOR INDIVIDUALS & NON-INDIVIDUALS

<b>BANK ACCOUNT(S) DETAILS</b>		
	First Bank Details	Second Bank Details
Bank Name		
Branch		
Address		
Bank A/c No.		
A/c Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others-In case of NRI/NRE/NRO	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others-In case of NRI/NRE/NRO
MICR No.		
IFSC code		
<b>DEPOSITORY ACCOUNT(S) DETAILS</b>		
	First Demat A/c Details	Second Demat A/c Details
Depository		
Participant Name		
Depository Name	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL
Beneficiary Name		
DP ID		
Beneficiary ID (BO ID)		
<b>TRADING PREFERENCES</b> - * Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.		
Exchange	Segment	Signature
1. National Stock Exchange of India Ltd. - Cash	✓	
	- F&O	✓
2. Calcutta Stock Exchange Limited	- Cash	✓
3. BSE Limited	- Cash	✓
	- F&O	✓
# If, in future, the client wants to trade on any new segment/new exchange, separate authorization/letter should be taken from the client by the stock broker.		

<b>OTHER DETAILS</b>			
<b>Gross Annual Income Details (please specify)</b>			
Income Range per annum	<input type="checkbox"/> Below ₹ 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> 25 Lacs-1 crore <input type="checkbox"/> > 1 crore		
<b>Net-worth</b>		<b>as on (date)</b>	
(Net worth should not be older than 1 year)		(dd/mm/yyyy)	
<b>Occupation (Individuals)</b> (Please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business		
	<input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student		
	<input type="checkbox"/> Others _____		
<b>Please tick, if applicable, for any of your authorized signatories / Promoters / Partners / Karta / Trustees / whole time directors</b>		<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)	
<b>PAST ACTIONS</b>			
Details of any action / proceedings initiated / pending / taken by SEBI / Stock exchange / any other authority against the applicant / constituent or its Partners / promoters / whole time directors / authorized persons in charge of dealing in securities during the last 3 years			
<b>DEALINGS THROUGH AUTHORISED PERSON OR OTHER STOCK BROKERS</b>			
Whether dealing with any other stock broker / AP (in case dealing with multiple stock brokers / APs, provide details of all)			
Name of stock broker			
Name of AP, if any		AP Regn. No.	
Client Code		Exchange	
Details of disputes/dues pending from/to such stock broker/authorised person			
<b>ADDITIONAL DETAILS</b>			
Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify)			
_____, Specify your Email id, if applicable :			
Whether you wish to receive the standard documents - Rights and Obligations, Risk Disclosure Document (RDD) and Guidance note - physically or electronically, (please specify) : _____			
<b>Please note that these documents are also available in certain vernacular languages on demand.</b>			
Whether you wish to avail of the facility of internet trading / wireless technology (please specify)			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
Number of years of Investment / Trading Experience			
In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorized to deal in securities on behalf of company/firm/others			As per Annexure
Any other information			

<b>INTRODUCER DETAILS (optional)</b>	
Name of the Introducer	
	(Surname)                      (Name)                      (Middle Name)
Status of the Introducer	<input type="checkbox"/> Sub-broker <input type="checkbox"/> Remisier <input type="checkbox"/> Authorized Person <input type="checkbox"/> Existing Client
	<input type="checkbox"/> Others, please specify
Address and Phone No. of the Introducer	
Signature of the Introducer	

### **DECLARATION**

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

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

✓  
 \_\_\_\_\_  
**Signature of Client/ (all) Authorized Signatory (ies)**

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



<b>10 Address of Guardian(s)</b> City / Place State & Country			
PIN Code			
<b>11 Mobile / Telephone No. of Guardian</b>			
<b>12 Email ID of Guardian</b>			
<b>13 Relationship of Guardian with Nominee</b>			
<b>14 Guardian Identification Details</b>			
[Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature			
<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar			
<input type="checkbox"/> Saving Bank A/c No.			
<input type="checkbox"/> Proof of Identity			
<input type="checkbox"/> Demat Account ID			
	<b>Name(s) of holder(s)</b>		<b>Signature(s) of holder*</b>
Sole / First Holder (Mr./Ms.)			
Second Holder (Mr./Ms.)			
Third Holder (Mr./Ms.)			

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

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

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

### DECLARATION FORM FOR OPTING OUT OF NOMINATION

<b>MLB Securities Limited</b>										Date			
13, Mahendra Road, 1st Floor, Kolkata - 700 025										D D M M Y Y Y Y			
UCC													
DP ID	I	N	3	0	2	6	5	4	Client ID (only for Demat account)				
Sole/First Holder Name													
Second Holder Name													
Third Holder Name													
I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.													
<b>Name and Signature of Holder(s)*</b>													
1 ✓				2 ✓				3 ✓					

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

## ANNEXURE 1

### DETAIL OF PERSONS AUTHORISED TO DEAL IN SECURITIES / DERIVATIVES

Particulars	1st	2nd	3rd
<b>Name</b>			
<b>Designation</b>			
<b>PAN</b>			
<b>Proof of Identity submitted</b>			
<b>Proof of Address submitted</b>			
<b>DIN / UID</b>			
<b>Residential Address</b>			
<b>Photograph</b>	Please affix your recent passport size colour photograph and sign across it  Paste, do not staple	Please affix your recent passport size colour photograph and sign across it  Paste, do not staple	Please affix your recent passport size colour photograph and sign across it  Paste, do not staple

**Use additional sheet, if required.**

**Where common with Page 7, just write the name and remaining details may not be repeated.**

## FOR OFFICE USE ONLY

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

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

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

\_\_\_\_\_  
**Signature of the Authorised Signatory**

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

**Seal/Stamp of the stock broker**

### INSTRUCTIONS / CHECK LIST

1. Additional documents in case of trading in derivatives segments - illustrative list :

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income - Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement	Bank account statement for last 6 months
Any other relevant documents substantiating ownership of assets	Self declaration with relevant supporting documents

*\*In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.*

2. Copy of cancelled cheque leaf / pass book / bank statement specifying name of the constituent, MICR Code or / and IFSC Code of the bank should be submitted.
3. Demat master or recent holding statement issued by DP bearing name of the client.
4. For individuals :
  - a. Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker / sub-broker's office.
  - b. In case of non-resident clients, employees at the stock broker's local office, overseas can do in-person verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
5. For non-individuals :
  - a. Form need to be initialized by all the authorized signatories.
  - b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company / firm / others and their specimen signatures.

**MANDATORY**

## POLICIES AND PROCEDURES

### A. Refusal of orders for penny stocks

The typical “penny stock” is a very small company with highly illiquid and speculative shares. They trade at a relatively low price and market capitalization. The company’s policy is to classify the following stocks as “penny” stocks :

- a. All stocks having current market price upto Rs.10.
- b. All stocks classified as Illiquid Securities as per Exchanges’ circulars from time to time.

An order for penny stock trading may be denied

1. If applicable exposure limit / market wide position limit / trading member position limit / client wise position limit will be exceeded.
2. If trading debarred / banned by any regulatory authority.
3. If trade pattern is objectionable (also includes frivolous, vexatious and malicious)
4. If otherwise not permissible under our Risk Management policy / Anti money laundering policy/ any other policy for the time being in force.
5. If 100% upfront margin is not paid or the securities are not to be delivered in Demat form.
6. Where circumstances appear to justify such action or on reasonable grounds.

We shall not be held liable for restricting / prohibiting trade in penny stocks at any time. Also the Client shall indemnify us in respect of any loss caused to us by virtue of the Client trading in penny stock.

### B. Setting up Client’s Exposure limit

Clients will be granted turnover and exposure limits on the basis of available deposits being sufficient to cover upfront margin requirements.

- a. Deposits to
  - include margins specifically deposited by the clients
  - include what is withheld from settlement obligations as margin on payout.
  - exclude what is ploughed back from margin to meet settlement obligation on pay in.
- b. Deposits may be made available in the form of cash, FDR, BG, Margin pledge of securities / other acceptable collaterals.
- c. In case of cheques, they must come from client’s designated bank account only. Depending upon the circumstances, the Risk Manager will be at liberty to give benefit / credit for cheques only on realization of funds.
- d. Haircuts will be applicable on the non cash component (other than Cash / BG/ FDR) of deposits at rates specified by Exchanges from time to time.
- e. Cash and Non cash component (after haircut) of deposits must be maintained in a specified ratio. Any non cash component in excess of specified proportion of cash component will not be reckoned. This specified ratio will depend upon the Credit Rating of the client from Risk Manager.

In case of derivatives, Clients shall be allowed to trade only upto the applicable clientwise position limits set by the Exchanges / Regulators from time to time.

The exposure limits set by MLB Securities Limited (MLB) does not by itself create any right for the Client and are liable to be withdrawn at any time without notice and the client shall bear the loss on account of withdrawal of such limits. The client agrees to compensate MLB in the event of MLB suffering any loss, harm or injury on account of exposure given and / or withdrawn.

### C. Applicable brokerage rate

- a. Brokerage on option contracts will be charged on the Premium amount.
- b. Brokerage rates not to exceed 2.5% of the contract price exclusive of statutory levies.



Exclusions:

- o In case of options, brokerage shall not exceed higher of 2.5% of premium amount or Rs. 100 per lot.
  - o Where sale / purchase value of a share is Rs.10/- or less, a maximum brokerage of 25 paise per share may be collected.
- c. Brokerage rate will be mutually decided before the onset of trading. Any change in future can only have prospective effect and must be effected in writing.

#### **D. Imposition of Penalty / Delayed Payment Charges**

Penalties will be levied on clients for :

- a. A violation by the client of the requirements / stipulations of Exchanges / any Regulatory Authority.
- b. His trading pattern been objectionable (includes disturbing fair price determination in the market or resorting to unfair trade practices).
- c. His suspension of information / providing false information.

Further, any penalty / fine / charge imposed on us by Exchanges / any Regulatory Authority shall be fully recoverable from the client and the client will have to bear the same.

Cheque Return Charges will be collected from Clients at actual.

Any relaxation of the penalty on a client will require the Board's specific approval which may grant the same depending on the circumstances on case to case basis. Any such relaxation in a case no way entitles any client to seek relaxation in the same circumstances, either then or in future.

Clients to note : Ignorance of law is no excuse at law.

#### **E. Right to sell clients' securities or close clients' positions, without giving notice to the client**

Any failure on part of a client to pay the whole of the margin deposit and/or settlement obligation requirements, within the time permitted by the Rules and Regulations of Exchanges/ Regulatory Authorities, will entitle us to, without any notice to the client:

1. Withdraw trading facility from the client.
2. Square off / close-out all or any part of outstanding positions of client forthwith or any time thereafter, at our discretion, to the extent possible, by placing at the Exchange, counter orders. Such close-out/ square off shall be limited to the extent of client's margin/ settlement obligations.
3. Sale all or any part of client's securities held in CUSA forthwith or any time thereafter at our discretion. Such close out shall be limited to the extent of client's margin / settlement obligations.
4. Invoke Margin Pledge.
5. Invoke BG / FDRs deposited with us.
6. Use other risk containment measures as may be deemed fit and appropriate under the circumstances.
7. Impose penalties / delayed payment charges / other disciplinary action fit and appropriate.

Though it will be our sincere effort to timely notify the client of the shortfall and give him reasonable time to make good the shortfall, this is a not a pre-condition to the exercise of the above rights, and the client should be aware of the timeliness of meeting obligations himself.

The Risk Manager will consider the credit risk rating of the client and take all or any of above measures in a manner a man of just and reasonable mind would have done under the circumstances. The action shall be final and binding on the client and any profit / loss shall be borne by the client only.

In case of cheques, they must come from client's designated bank account only. Depending upon the circumstances, the Risk Manager will be at liberty to give benefit / credit for cheques only on realization of funds. He will be exclusively guided by a risk containment focus and protection of company's interest. Clients are therefore advised to keep sufficient margins well in advance.

We reserve the above right, however, we are not obliged to close clients' positions / sell clients' securities, and it shall be the continued responsibility of the client to make payments towards outstanding dues/ obligations and / or applicable margins to MLB in time.

**F. Conditions under which a client may not be allowed to take further position or the broker may close the existing position of a client**

- a. When a ban of fresh position is in force in any security, no further position is allowed. In case a position has already been inadvertently taken, the existing position may be closed.
- b. In case of non-payment of dues – margin (which includes additional margins as and when levied) and settlement obligations (which includes daily MTM settlement of future contracts, final settlement of future contracts, premium settlement of option contracts, and exercise settlement of option contracts after commission, fees, and/or charges).
  - Margin requirement will be computed on a real-time basis.
  - Initial margin component is required on an upfront basis.
  - Depending upon the circumstances, the Risk Manager will be at liberty to give benefit / credit for cheques only on realization of funds.
- c. If we are in close-out mode for any reason / if we are disabled for any reason.
- d. If the trading pattern is objectionable (includes disturbing fair price determination in the market or resorting to unfair trade practices).
- e. In case violation of any directive / regulation/ laws / bye-laws of Exchanges / Other Regulatory Authorities will result or have resulted.
- f. Where the client is unable to provide funds / securities in a manner that can be transferred to the exchange immediately for pay-in / margin obligations.
- g. In the event of death or insolvency of the client or his / its otherwise becoming incapable of receiving / paying for any contracts which the client has ordered to be bought or sold, or of delivering or transferring securities.
- h. On failure to comply with any of the provisions relating to delivery, payment and settlement of deals or any failure to fulfill the terms and conditions subject to which the deal has been made.
- i. If applicable exposure limit / market wide position limit / trading member position limit / client wise position limit will be exceeded or has exceeded.
- j. In case of high market volatility, where the current margins of the clients with us does not cover the value at risk of the client.
- k. If otherwise not permissible under our Risk Management policy / Due diligence policy / Anti money laundering policy/ any other policy for the time being in force.
- l. Where circumstances appear to justify such action or on reasonable grounds.

Besides restricting further trades/ closing existing trades, other measures as may be deemed fit may further be taken.

Any profit / loss on closing out shall be borne by client only.

**G. Internal shortages of securities**

If securities are not received in our Pool A/c from the selling client before the pay in date but there is no failure to meet securities obligations towards the Exchange, i.e., there is an instance of internal shortage, the following procedure will be adopted.

1. There will be a buying-in of shares against the selling client through a “deemed auction” for the benefit of buying client. The buying-in shall be from the market and may be with or without the notice of the client.
2. If for any reason whatsoever there couldn't be a buying-in on T+2 day, the shares will be deemed to be closed on T+2 day using the following valuation:

Higher of :

- a. Highest price from the 1st day of the relevant trading period till the date of close out.

- b. Closing price on the auction day (T+2) plus 5%.

The selling client will be debited for “deemed auction” price / “close out” price. In case of close out, the buying client shall be credited for the close-out price.

Any loss of corporate benefit to the buyer of the securities shall be recovered from the defaulting seller’s account.

#### **H. Temporarily suspending or closing a client’s account at the client’s request**

A client may give a written request for temporarily suspending/ closing his account. The request will be processed within a maximum of 2 working days from the date of receipt of the request provided:

- a. He doesn’t owe us any money across all segments / Exchanges on any account.
- b. There are no outstanding / open positions of the client.

During such suspension, the client will not be in a position to trade with us. The suspension may be revoked by a request in writing from the client. This request will be processed within a maximum of 7 working days from the receipt of the request provided:

- a. He fulfills latest KYC standards applicable then.
- b. He provides any additional information that may be required by us / Regulatory Authorities then.
- c. He has not been debarred from trading by any Authority meanwhile.
- d. His conduct, till date, has been fair, honorable and just.

Notwithstanding any such suspension / closure, all rights, liabilities and obligations of the parties arising out of or in respect of transactions entered into prior to such closure / suspension shall continue to subsist and binding on the client.

#### **I. Deregistering a client**

Deregistering a client shall mean complete termination of his trading agreement (irrespective of segment / exchange) with us. Once deregistered, a client will not be entertained back for fresh registration for at least 1 year.

Deregistration can be initiated on client’s specific written request provided full and final settlement of all his accounts with us both for funds and securities have been effected.

Deregistration can also be initiated by us in the following situations :

1. He is guilty of breach of terms and conditions of the Member Client Agreement.
2. If he is guilty of contravention, non-compliance, disobedience, disregard or evasion of any of the Bye laws, Rules and Regulations of the Exchange / Clearing Corporation / Other Regulatory Authorities or of any of their Resolutions, Orders, Notices, Discretions, decisions or rulings.
3. If he is guilty of any conduct, proceeding or method of business which is deemed dishonorable, disgraceful or inconsistent with just and equitable principles or detrimental to the interests of MLB Securities Limited or prejudicial or subversive to its objects and purposes.
4. His financial condition is found to be unsatisfactory to the extent that he cannot be permitted to do business with safety to ourselves.
5. He is otherwise not incapacitated to deal in securities / derivatives contracts.

Such deregistration shall not affect our rights against such client to recover any dues against him, i.e., our right as a creditor shall remain unaffected. Also the deregistered client shall be bound to fulfill deals and obligations outstanding at the time of his deregistration.

The above Policies and Procedures are subject to change / updation from time to time. Clients are requested to refer to the updated Policies and Procedures and abide by the same.

# TARIFF SHEET

## A. BROKERAGE

	%	Min. Paisa	Min. Per Lot
<b>1. Capital Market Segment</b>			
Square up Brokerage			Not Applicable
Delivery Brokerage			Not Applicable
<b>2. Futures &amp; Options Segment</b>			
Brokerage in Futures			
Brokerage in Options			

## B. TRANSACTION CHARGES

	Basis of Calculation	NSE	CSE	BSE
Capital Market	% of Turnover			
Equity Futures	% of Turnover			
Equity Options	% of Turnover			

## C. OTHER CHARGES

	Basis of Calculation	CAPITAL MARKET	FUTURES & OPTION
Service Tax & Education Cess on Brokerage	% of Brokerage (A)		
Service Tax & Education Cess on Turnover Charges	% of Transaction Charges (B)		
Stamp	% of Square Up Turnover		
	% of Delivery Turnover		
SEBI Turnover Charges	% of Turnover		

✓ \_\_\_\_\_  
Signature of the Client

SCORES URL Link : <https://scores.gov.in/scores/Welcome.html>

### **Filing compliant on SCORES - Easy & Quick**

- a. Register on SCORES portal
- b. Mandatory details for filing complaints on SCORES
  - i. Name, PAN, Address, Mobile Number, E-mail ID
- c. Benefits:
  - i. Effective Communication
  - ii. Speedy redressal of the grievances

# AUTHORITY LETTER FOR RUNNING ACCOUNT OF FUNDS

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

To  
**MLB Securities Limited**  
13, Mahendra Road  
1st Floor  
Kolkata - 700 025

Dear Sir,

1. With reference to my/our trading account opened with you, I/we request you to maintain a running account for funds on my/our behalf without settling the account on settlement of each transaction. I/We further request you to retain all amounts receivable by me/us until specifically requested by me/us to be settled within one working day of request, if the same is lying with **MLB Securities Limited** & within 3 working days from the request if the same is lying with clearing member / clearing corporation.
2. I/we understand and agree that no interest will be payable to me/us on the funds so retained with you.
3. I/we may be trading in derivatives segment & cash segment of various Exchanges and hence have various accounts with you. In this regard I/we hereby authorize **MLB Securities Limited** to act at its discretion of adjusting any credit balance under my/ our various accounts against the debit in any account across segments/Exchange, without taking any further instruction from me/us.
4. Excess margins deposited towards one exchange / segment may be adjusted, on a running basis towards margin requirement / debit balance in same / other exchange / segment, where I/we have the client account.
5. I/we also confirm that the securities lying in my CUSA A/c should be considered as margin deposit / collateral.
6. I/we authorize you to set off a part or whole of the margin deposited by me/us against any of my / our dues, by appropriating relevant amount of fund or by sale of securities which form part of margin.
7. I / we hereby authorize you to deposit my / our funds deposited as margin to exchange / Clearing Corporation.
8. I/we may revoke the authorisation at any time by giving a written notice.
9. I/we also agree that the actual settlement of fund shall be done by us, at least once in a quarter or month, as preference given below and the statement of account for the same will be provided to me by **MLB Securities Limited**.
10. I/we agree that (a) in respect of derivatives market transactions, the Trading Member may retain the requisite funds on settlement date to take care of any margin obligation arising in next 5 days, calculated in the manner specified by the Exchange, (b) in respect of cash market transactions, the Trading Member may retain entire pay-in obligations of **T day & T-1 day** funds due from me/us as on the date of settlement to take care of margin obligation in next 5 days, calculated in the manner specified by the Exchange.
11. I/we agree/understand that there shall be no inter-client adjustment for the purpose of settlement of the running account.
12. I/we shall bring any dispute arising from the statement of account or settlement so made to the Notice of the Trading Member preferably **within 30 working** days from the date of receipt of funds / securities or statement as the case may be.

## PREFERENCE OF CLIENT FOR SETTLEMENT OF RUNNING ACCOUNT (FUNDS)

Settlement Preferences	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly
------------------------	----------------------------------	------------------------------------

Thanking you,

Yours truly,

✓

\_\_\_\_\_  
Signature of the Client

# AUTHORIZATION TO SEND ELECTRONIC STATEMENTS

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

To  
**MLB Securities Limited**  
13, Mahendra Road  
1st Floor  
Kolkata - 700 025

Dear Sir,

## Email Authorization :

I/ We hereby authorize you to electronically send me/ us my/ our Contract Notes, Daily Margin Statements, Monthly/ Quarterly Statements related to settlement of accounts, Annual Global Statement, Form 10DB, alerts, confirmations, etc. on my/our email id noted with you, i.e., \_\_\_\_\_, applicable with immediate effect.

Further:

- I/We hereby declare that the above email id belongs to  Self  Family  
(If family, specify the name of the person and relationship – Spouse / Dependant Parents / Dependant Children)  
Name (of Relative) : \_\_\_\_\_ Relation : \_(My)\_\_\_\_\_
- I/We agree that physical statements need not be sent to me/us, once sent over email.
- I/We also agree that non-receipt of bounced mail notification at your end shall amount to delivery at my/our email account. I/We also agree not to hold you responsible for late / non-receipt of contract notes/ other statements sent in electronic form for any reason including but not limited to failure of email services, loss of connectivity, email in transit etc. I/We agree that the log reports of your dispatching software shall be a conclusive proof of dispatch of contract notes / other statements to me/us and such dispatch shall not be disputed by me/us on any account.
- I/We agree to my/ our responsibility to regularly check my/ our email account and keep it alive, running and not full. My/ our non-verification or not accessing the contract notes / other statements on regular basis shall not be a reason for disputing the contract notes/ other statements at any time.
- If at any time my/our email address changes, I/ We will notify you of my/ our new email address through a physical letter\*.

✓ \_\_\_\_\_

(Signature of Client)

\*In respect of internet clients, the request for change of email id may be made through the secured access by way of client specific user id and password.

## Mobile Authorization:

I/ We hereby authorize you to send me/ us Trade confirmations and other commercial communication on my/ our mobile number noted with you, i.e., \_\_\_\_\_, applicable with immediate effect , even though I/We am/are registered or may register with National Do Not Call Registry.

Further:

- I/We hereby declare that the above mobile number belongs to  Self  Family  
(If family, specify the name of the person and relationship – Spouse / Dependant Parents / Dependant Children)  
Name (of Relative) : \_\_\_\_\_ Relation : \_(My)\_\_\_\_\_
- I/We understand and hereby accept that any message sent to the above mobile number regarding my/ our Trading would be deemed to have been duly received and acknowledged by me/ us.
- I/We hereby agree to notify you immediately on notice of any discrepancy / erroneous transaction done in my/ our Trading account, intimated to me/ us through SMS / Whatsapp alerts to the above mentioned mobile telephone number.
- I/We agree to your uploading my/ our mobile number to any Exchange and/or Exchange designated Agency to enable the concerned Exchange(s) to send details of Transaction on my account.
- If at any time my/our mobile number changes, I/ We will notify you of my/ our new mobile number through a physical letter.

✓ \_\_\_\_\_

(Signature of Client)

**VOLUNTARY**

Dated : \_\_\_\_\_

To  
**MLB Securities Limited**  
 13, Mahendra Road  
 1st Floor  
 Kolkata - 700 025

**DECLARATION IN CASE OF SAME MOBILE NUMBER AND / OR E.MAIL ID FOR DIFFERENT CLIENTS**

[Please tick (✓) wherever applicable]

Client ID		Date	
Name of account Holder			
<input type="checkbox"/> Mobile Number			
<input type="checkbox"/> Email ID			
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).			
Signature of account holder	✓		
Name of account Holder			

Client ID		Date	
Name of account Holder			
<input type="checkbox"/> Mobile Number			
<input type="checkbox"/> Email ID			
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).			
Signature of account holder	✓		
Name of account Holder			

Client ID		Date	
Name of account Holder			
<input type="checkbox"/> Mobile Number			
<input type="checkbox"/> Email ID			
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).			
Signature of account holder	✓		
Name of account Holder			

# CONSENT LETTER FOR EMAIL AND MOBILE ALERT FACILITIES

Dated : \_\_\_\_\_

To  
**MLB Securities Limited**  
13, Mahendra Road  
1st Floor  
Kolkata - 700 025

Sir,

This is with reference to my/our trading account opened with you. I/we request you to arrange facility of receiving email and/or mobile alert facility issued by Exchange in compliance with regulation and guidelines, issued by concerned authorities from time to time.

Email Facility	Service Required - YES <input type="checkbox"/> NO <input type="checkbox"/>
Email ID	
Owned by - Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	✓
SMS Facility	Service Required - YES <input type="checkbox"/> NO <input type="checkbox"/>
Mobile Number	
Owned by - Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	✓

\* Please specify the Name and PAN detail in case email id and/or Mobile Number is other than that of the client.

In this regards we state the following :

1. This is to further confirm that it will be my/our responsibility that my/our Email ID and/or Mobile Number are active and the relevant Inbox is not full. Further, the trading member will not be held liable for the mails and / or SMS alert not received.
2. I/we undertake that any change in my/our Email ID and/or Mobile Number shall be communicated to you in writing through a physical letter.
3. I/we agree that this authority shall be valid, until it is revoked by me/us at any time by giving a written notice to MLB Securities Limited.

✓ \_\_\_\_\_  
Signature of Client

**VOLUNTARY**



**Voluntary information provided by the client in relation to the Prevention of Money Laundering Act, 2002**

Name of the Client : \_\_\_\_\_

If Business / Profession : Nature of business : \_\_\_\_\_

Industry : \_\_\_\_\_

Details of my/our Relatives, having account with MLB Securities Limited :

Name	Relationship	UCC (Client Code)
1.		
2.		
3.		
4.		

Details of the Corporate / Partnership Firm / Trust etc. where I/We am/are affiliated

Name	Entity Type	Nature of Business	Relationship	UCC (Client Code)
1.				
2.				
3.				
4.				

I/We hereby submit and agree to submit every year following documents to MLB Securities Limited, before the due date as prescribed by MLB Securities Limited :

1. Profit and Loss Account & Capital Account
2. Balance Sheet
3. Self attested copy of Income Tax Return (If return not available, I/we will furnish Form 16)
4. Copy of Form 16 in case of Salary Income
5. Any other document providing financial details of the client

I/We confirm that I/We will immediately inform MLB Securities Limited in case I/We am/are convicted under any grounds or any action is taken against me/us by any authority(ies).

I/We intend to invest in the stock market with :  Own Funds  Borrowed Funds

(If Borrowed Funds, then please specify below Sources of funds :)

Sources of Borrowed Funds (if any)	Amount (₹)

I/We hereby declare that I/We am/are beneficial owner of the Trading / On-line account opened with MLB Securities Limited, and that I/We am/are investing my/our own funds with MLB Securities Limited.

✓ \_\_\_\_\_

Client Signature

Client's Name

**For Office use only :**

Risk categorisation of client as per PMLA, 2002 :  High Risk  Medium Risk  Low Risk

Verified by : \_\_\_\_\_

Authorised & Approved by : \_\_\_\_\_

# DECLARATION OF ULTIMATE BENEFICIAL OWNERSHIP

(Mandatory For Non-Individuals)

Investor Name \_\_\_\_\_ PAN \_\_\_\_\_

## Part I - LISTED COMPANY / ITS SUBSIDIARY COMPANY [If applicable, Part II Not Applicable]

We hereby declare that the Applicant/ Owner of the controlling interest in the applicant

- is a Company listed on a Stock Exchange
- is a majority-owned subsidiary of a Company listed on a Stock Exchange

Name of the holding/ parent company (with % share) \_\_\_\_\_

Name of such Listed Company (if not the Applicant itself) \_\_\_\_\_

Stock Exchange where listed \_\_\_\_\_ Security ISIN \_\_\_\_\_

## Part II - OTHER THAN LISTED COMPANY / ITS SUBSIDIARY COMPANY

Name & Address of the Ultimate Beneficial Owner [UBO]	PAN or any other identification proof where PAN not applicable	Country of tax residency	% of beneficial interest in the Applicant	Whether Politically Exposed?	UBO Code (see instruction next page)
(1)					
(2)					
(3)					

If UBO is already KYC compliant, KYC complied proof to be enclosed. Else PAN or any other valid identity proof and address proof must be attached (self certified by the UBO and certified by the Applicant)

## Part III - DECLARATION

<p>We understand that MLB Securities Limited is relying on this information for the purpose of determining the beneficial ownership of the account. We certify that the information we provided on this form is true and complete to the best of our knowledge and belief. We agree to submit a new form within 30 days if any information or certification on this form gets changed.</p>	<p style="text-align: center;">_____                  Authorised Signatory [with seal]</p> <p>Date : _____ Place : _____</p>
--	--

**In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit.**

## GENERAL INFORMATION & INSTRUCTIONS

As per SEBI Master Circular No. CIR/ISD/AML/3/2010 dated December 31, 2010 regarding Client Due Diligence policy, related circulars on anti-money laundering and SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

Ultimate Beneficiary Owner [UBO]:

### A. For Investors other than individuals or trusts:

- (i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:
  - more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
  - more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership;
  - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

### B. For Investors which is a trust:

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

### C. Exemption in case of listed companies/foreign investors

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/ MIRSD/ 11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client.

### UBO Code Description

- UBO-1 : Controlling ownership interest of more than 25% of shares or capital or profits of the Applicant, where the Applicant is a company
- UBO-2 : Controlling ownership interest of more than 15% of the capital or profits of the Applicant, where the Applicant is a partnership
- UBO-3 : Controlling ownership interest of more than 15% of the property or capital or profits of the Applicant, where the Applicant is an unincorporated association or body of individuals
- UBO-4 : Natural person exercising control over the Applicant through other means i.e., exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under UBO-1 to UBO-3 above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests]
- UBO-5 : Natural person who holds the position of senior managing official [In case no natural person could be identified as above]
- UBO-6 :The settler(s) of the trust
- UBO-7 :Trustee(s) of the Trust
- UBO-8 :The Protector(s) of the Trust [if applicable].
- UBO-9 :The beneficiaries with 15% or more interest in the trust if they are natural person(s)
- UBO-10 : Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership.

# FATCA/CRS DECLARATION FORM - FOR INDIVIDUAL

Applicant Name \_\_\_\_\_

## PART I - Please fill in the country for each of the following :

1. Country of :

a) Birth \_\_\_\_\_ b) Citizenship \_\_\_\_\_

c) Residence for Tax Purposes \_\_\_\_\_

2. US Person\* :  Yes  No

## PART II - Please note :

a. If in all fields above, the country mentioned by you is India and if you do not have US person status, please proceed to **Part III** for signature.

b. If for any of the above field, the country mentioned by you is not India and/or if your US person status is Yes, please provide the Tax Payer Identification Number (TIN) or functional equivalent\*\* as issued in the specific country in the table below :

i) TIN \_\_\_\_\_ Country of Issue \_\_\_\_\_

ii) TIN \_\_\_\_\_ Country of Issue \_\_\_\_\_

iii) TIN \_\_\_\_\_ Country of Issue \_\_\_\_\_

a. In case any of the parameters in **Part I** indicates that you are a US person or a person resident outside of India for tax purpose and you do not have Taxpayer Identification Numbers/functional equivalent, please complete and sign the Self-Certification section given in **Part IV**.

b. In case you are declaring US person status as 'No' but your Country of Birth is US, please provide document evidencing Relinquishment of Citizenship. If not available provide reasons for not having relinquishment certificate

\_\_\_\_\_

Please also fill **Part IV** Self-Certification.

## PART III - Customer Declaration (Applicable for all customers)

(i) Under penalty of perjury, I/we certify that :

1. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. **(This clause is applicable only if the account holder is identified as a US person)**

2. The applicant is an applicant taxable as a tax resident under the laws of country outside India. **(This clause is applicable only if the account holder is a tax resident outside of India)**

(ii) I/We understand that MLB Securities Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. MLB Securities Limited is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

(iii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

(iv) I/We agree that as may be required by domestic regulators/tax authorities MLB Securities Limited may also be required to report, reportable details to CBDT or close or suspend my account.

(v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Signature : \_\_\_\_\_

Name : \_\_\_\_\_ Date (DD/MM/YYYY) : \_\_\_\_\_

**PART IV - Self-Certification :**

To be filled only if-

- (a) Name of the country in Part I is other than India and TIN or functional equivalent is not available, or
- (b) US person is mentioned as Yes in Part I, and TIN is not available

I confirm that I am neither a US person nor a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India. Therefore, I am providing the following document as proof of my citizenship and residency in India.

---

Signature

Document Proof submitted (Please tick document being submitted)

Passport  Election Id Card  PAN Card  Driving License  UIDAI Letter  NREGA Job Card  Govt. Issued ID Card

---

**\* U.S. Person** means,

- (a) an individual, being a citizen or resident of the United States of America;
- (b) a partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;
- (c) a trust if,-
  - (i) a court within the United States of America would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust; and
  - (ii) one or more U.S. persons have the authority to control all substantial decisions of the trust; or
- (d) an estate of a decedent who was a citizen or resident of the United States of America;

**\*\* Functional Equivalent of TIN**

Many countries do not issue TIN to their taxpayers. However, such countries issue some other high integrity number with an equivalent level of identification (a functional equivalent). Examples of such numbers are-

- Social Security Number
- National Insurance Number
- Citizen Or Personal Identification Code Or Number
- Resident Registration Number

# FATCA/CRS DECLARATION FORM - FOR NON-INDIVIDUAL

Applicant Name \_\_\_\_\_

## PART I

A. Is the account holder a Government body/International Organization/listed company on recognized stock exchange:

Yes  No

*If "No", then proceed to point B. If "yes" please specify name of stock exchange, if you are listed company \_\_\_\_\_ and proceed to sign the declaration.*

B. Is the account holder a (Entity/Financial Institution) tax resident of any country other than India :  Yes  No

*If "yes", then please fill of FATCA/ CRS Self certification Form. If "No", proceed to point C.*

C. Is the account holder an Indian Financial Institution :  Yes  No

*If "yes", please provide your GIIN, if any \_\_\_\_\_. If "No", proceed to point D.*

D. Are the Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian citizen :  Yes  No

*If "yes", (then please fill FATCA/ CRS self-certification form)). If "No", proceed to sign the declaration.*

## CUSTOMER DECLARATION

( ) Under penalty of perjury, I/we certify that :

1. The applicant is:

(i) An applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District to Columbia or any other states of the U.S.,

(ii) An estate the income of which is subject to U.S. federal income tax regardless of the source thereof. **(This clause is applicable only if the account holder is identified as a US person)**

2. The applicant is an applicant taxable as a tax resident under the laws of country outside India.

(i) I/We understand that MLB Securities Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. MLB Securities Limited is not able to offer any tax advice on FATCA/CRS or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

(ii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

(iii) I/We agree that as may be required by domestic regulators/tax authorities MLB Securities Limited may also be required to report, reportable details to CDBT or close or suspend my account.

(iv) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Name of the Entity \_\_\_\_\_

Signature 1 \_\_\_\_\_ Signature 2 \_\_\_\_\_

Signature 3 \_\_\_\_\_ ( As per MOP)

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

**PART II**

**Self-Certification Form (Entity) for Foreign Account Tax Compliance Act ("FATCA") and Common Reporting Standards(CRS)**

**Section 1 : Entity information**

Name of Entity \_\_\_\_\_

Customer id (if existing) \_\_\_\_\_ Entity Constitution Type \_\_\_\_\_

Entity Identification type :  Tax Identification Number (TIN)  US GIIN  Company Identification Number  
 Global Entity Identification Number (EIN)  Other

Entity Identification No. \_\_\_\_\_

Entity Identification issuing country \_\_\_\_\_ Country of Residence for tax purpose \_\_\_\_\_

**Section 2 : Classification of Non-Financial entities**

I/We (on behalf of the entity) certify that the entity is:

a) An entity incorporated and taxable in US (Specified US person) :  Yes  No

*If "Yes", please provide your U.S. Taxpayer Identification Number (TIN)* \_\_\_\_\_

b) An entity incorporated and taxable outside of India (other than US) :  Yes  No

*If "Yes", please provide your TIN or its functional equivalent* \_\_\_\_\_

*Provide your TIN issuing country* \_\_\_\_\_

c) *Please provide the following additional details if you are not a Specified US Person :*

**FATCA / CRS classification for Non-financial entities (NFFE)**

Active NFFE  Passive NFFE without any controlling Person

Passive NFFE with Controlling Person(s) : US  Others

Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus  
MLB Securities Limited is not required to do the reporting)

Please provide GIIN number : \_\_\_\_\_

**Section 3 : Classification of financial institutions (including Banks)**

I/We (on behalf of the entity) certify that the entity is :

a. An entity is a U.S. financial institution :  Yes  No

*If "Yes", (i) Please provide your Taxpayer Identification Number (TIN)*

*(ii) Please provide GIIN, if any* \_\_\_\_\_

*If "No", please tick one of the following boxes below :*

**FATCA classification**

**Please provide the Global Intermediary  
Identification number (GIIN) or other information where**

Reporting Foreign Financial Institution in a Model 1  
Inter-Governmental Agreement ("IGA") Jurisdiction

\_\_\_\_\_

Reporting Foreign Financial Institution in a Model 2  
IGA Jurisdiction

\_\_\_\_\_

Participating FFI in a Non-IGA Jurisdiction

\_\_\_\_\_

Non-reporting FI

\_\_\_\_\_

Non-Participating FI

\_\_\_\_\_

Owner-Documented FI with specified US owners

\_\_\_\_\_

**Section 4 : Controlling person declaration**

If you are classified as “**Passive NFFE with Controlling Person(s)**” or “**Owner documented FFI**” or “**Specified US person**”, please provide the following details:

Name of controlling person	Correspondence Address	Country of residence for tax purpose	TIN	TIN issuing country	Controlling person type

Details	Controlling person 1	Controlling person 2	Controlling person 3	Controlling person 4	Controlling person 5
Identification Type					
Identification Number					
Occupation Type					
Occupation					
Birth Date					
Nationality					
Country of Birth					

**Section 5 : Declaration**

- (i) Under penalty of perjury, I/we certify that :
  1. The number shown on this form is the correct taxpayer identification number of the applicant, and
  2. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America (“U.S.”) or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof, or
  3. The applicant is an applicant taxable as a tax resident under the laws of country outside India.
- (ii) I/We understand that MLB Securities Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with CRS/FATCA. MLB Securities Limited is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form gets changed.
- (iv) I/ We agree as may be required by Regulatory authorities, MLB Securities Limited shall be required to comply to report, reportable details to CDBT or close or suspend my account.
- (v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct and complete including the tax payer identification number of the applicant.

**I/We hereby confirm that details provided are accurate, correct and complete**

\_\_\_\_\_  
Authorized Signatories and Company Seal (if applicable)

Name \_\_\_\_\_

Date (DD/MM/YYYY) \_\_\_\_\_



## **ANTI-MONEY LAUNDERING (AML) – COMBATING FINANCING OF TERRORISM (CFT) WHAT YOU MUST KNOW – FAQs**

Help us in preventing money laundering / terrorist financing.....Your assistance really matters us.

Ever wondered why the Broker is asking you certain personal information which has hitherto never been called for? Such information can include documents evidencing source of funds/ income tax returns/ bank records etc. By providing this information to the Broker, at the time of account opening and subsequently as and when required, you are actually assisting the efforts in prevention of money laundering / terrorist financing. Here are the details, presented in the form of frequently asked questions (FAQs) to let you know how.

### **What is Money Laundering?**

Money Laundering is the process by which criminals attempt to hide and disguise the true origin and ownership of the proceeds of their criminal activities, thereby avoiding prosecution, conviction and confiscation of the criminal funds. The term Money Laundering is also used when the funds are used for terrorist financing, though the origin of the funds may be legitimate.

Money-laundering has acquired a global character that not only threatens security, but also compromises the stability, transparency, and efficiency of financial systems. Money-laundering techniques are becoming more sophisticated and complex with each passing day.

The objective of AML & CFT Program is to prevent financial intermediaries from being used as a tool for the purpose of Money laundering & terrorist financing and to preserve the integrity of the Financial system.

In response to mounting concern over money laundering, the Financial Action Task Force on money laundering (FATF) was established by the G-7 Summit in Paris in 1989 to develop a co-ordinated international response. One of the first tasks of the FATF was to develop Recommendations, 40 in all, which set out the measures national governments should take to implement effective anti-money laundering programmes.

### **How much money is laundered per year?**

The IMF has stated in 1996 that the aggregate size of money laundering in the world could be somewhere between two and five percent of the world's gross domestic product.

Using 1996 statistics, these percentages would indicate that money laundering ranged between USD 590 billion and USD 1.5 trillion. However it must be said that overall it is absolutely impossible to produce a reliable estimate of the amount of money laundered and therefore the FATF does not publish any figures in this regard.

### **How is money laundered?**

In the initial - or placement - stage of money laundering, the launderer introduces his illegal profits into the financial system. This might be done by breaking up large amounts of cash into less conspicuous smaller sums that are then deposited directly into a bank account, or by purchasing a series of monetary instruments (cheques, money orders, etc.) that are then collected and deposited into accounts at another location.

After the funds have entered the financial system, the second – or layering – stage takes place. In this phase, the launderer engages in a series of conversions or movements of the funds to distance them from their source. The funds might be channelled through the purchase and sales of investment instruments, or the launderer might simply wire the funds through a series of accounts at various banks across the globe. This use of widely scattered accounts for laundering is especially prevalent in those jurisdictions that do not co-operate in anti-money laundering investigations. In some instances, the launderer might disguise the transfers as payments for goods or services, thus giving them a legitimate appearance.

Having successfully processed his criminal profits through the first two phases the launderer then moves them to the third stage – integration – in which the funds re-enter the legitimate economy. The launderer might choose to invest the funds into real estate, luxury assets, or business ventures.

### **Where does money laundering occur?**

Money laundering can occur practically anywhere in the world. Generally, money launderers tend to seek out countries or sectors in which there is a low risk of detection due to weak or ineffective anti-money laundering programmes.

### **How does money laundering affect business, economic development & society at large?**

Money laundering damages the integrity of the financial institution, entire society and undermines democracy and the rule of the law as it rewards corruption and crime.

There is a damping effect on foreign direct investment when a country's commercial and financial sectors are perceived to be subject to the control and influence of organised crime. Fighting money laundering and terrorist financing is therefore a part of creating a business friendly environment which is a precondition for lasting economic development.

The possible social and political costs of money laundering, if left unchecked or dealt with ineffectively, are serious. Organised crime can infiltrate financial institutions, acquire control of large sectors of the economy through investment, or offer bribes to public officials and indeed governments.

The economic and political influence of criminal organisations can weaken the social fabric, collective ethical standards, and ultimately the democratic institutions of society.

### **How does fighting money laundering help fight crime?**

Targeting the money laundering aspect of criminal activity and depriving the criminal of his ill-gotten gains means hitting him where he is vulnerable. Without a usable profit, the criminal activity will not continue.

### **What should individual governments be doing about it?**

A great deal can be done to fight money laundering, and, indeed, many governments have already established comprehensive anti-money laundering regimes. These regimes aim to increase awareness of the phenomenon – both within the government and the private business sector – and then to provide the necessary legal or regulatory tools to the authorities charged with combating the problem.

Some of these tools include making the act of money laundering a crime; giving investigative agencies the authority to trace, seize and ultimately confiscate criminally derived assets; and building the necessary framework for permitting the agencies involved to exchange information among themselves and with counterparts in other countries.

### **What are Local regulations on AML/CFT?**

- a) Prevention of Money Laundering Act, 2002 (PMLA) came in to force with effect from July 01, 2005 read with the prevention of Money Laundering (Amendment) Act, 2012.
- b) SEBI Guidelines on PMLA vide circular issued in January 2006 as amended from time to time.
- c) Exchanges have also issued Guidelines on PMLA to be followed by all registered intermediary.

### **How is Money Laundering defined under PMLA 2002?**

Section 3 of the Prevention of Money Laundering Act (PMLA) 2002 defines the "Offence of Money Laundering" as:

"Whosoever directly or indirectly attempts to indulge or knowingly assists or knowingly is party or is actually involved in any process or activity connected with the **proceeds of crime** and projecting it as untainted property shall be guilty of the offence of money laundering."

"**Proceeds of crime**" has been defined in Section 2 of the PMLA as the property derived or obtained directly or indirectly by any person, as a result of criminal activity relating to a scheduled offence or the value of such property.

"**Scheduled Offences**", as per section 2 of PMLA, are specified in two parts of the schedule to PMLA. The value involved in offences specified in Part B should be Rs.30 lakhs or more.

### **Why KYC/AML Policy for Market Intermediary?**

SEBI has instructed all Market Intermediary to adopt a KYC/AML Policy

- a) To prevent criminal elements from using the Capital Market for money laundering activities
- b) To enable the Broker to know/understand the customers and their financial dealings better, which in turn would help the Broker to manage risks prudently.
- c) To put in place appropriate controls for detection and reporting of suspicious activities in accordance with applicable laws/laid down procedures.
- d) To comply with applicable laws and regulatory guidelines.
- e) To take necessary steps to ensure that the concerned staff is adequately trained in KYC/AML procedures.

### **What are the obligations of Market Intermediary under PMLA 2002?**

Section 12 of PML Act 2002, places certain obligations on every banking company, financial institution and market intermediary, which include:

- a) Maintaining a record of prescribed transactions.

- b) Furnishing information of prescribed transactions to the specified authority (Financial Intelligence Unit-India (FIU-IND).
- c) Verifying and maintaining records of the identity of its clients.
- d) Preserving records in respect of a,b,c above, for a period of 10 years from the date of cessation of transactions with the clients.

**What is Financial Intelligence Unit-India (FIU-IND)?**

FIU-IND is a central, national agency, set up by Government of India on 18th November,2004, responsible for receiving (and as permitted, requesting), analyzing and disseminating to the competent authorities, disclosures of financial information (i) Concerning suspected proceeds of crime and potential financing of terrorism, or (ii) Required by national legislation or regulation, in order to combat money laundering and terrorist financing.

**What are the transactions to be reported by Market Intermediary to FIU-IND?**

- a) All cash transactions of the value of more than Rs.10 lakhs or its equivalent in foreign currency.
- b) All series of cash transactions integrally connected to each other, which have been valued below Rs.10 lakhs or its equivalent in foreign currency (excluding individual transactions below Rs.50,000/- in the reporting) where such series of transactions have taken place within a month and the aggregate value of such transactions exceeds Rs.10 lakhs.
- c) Counterfeit currency transactions.
- d) Suspicious transactions.

**What are suspicious transactions?**

Rule 2(1)(g) of PMLA-2002 defines suspicious transactions as:

A transaction whether or not made in cash which, to a person acting in good faith-

- (a) gives rise to a reasonable ground of suspicion that it may involve the proceeds of crime; or
- (b) appears to be made in circumstances of unusual or unjustified complexity; or
- (c) appears to have no economic rationale or bonafide purpose; or
- (d) gives rise to a reasonable ground of suspicion that it may involve financing of activities relating to terrorism.

**POLICY/DECLARATION ON AML/CFL**

SI.No.	AML Measures	Particulars
1	AML Policy	We have in place written policy & procedure as per guidelines issued by SEBI/ Exchange / FIU-IND
2	Know Your Customer (KYC)	We have in place system for identification of our clients including KYC documentation.
3	Maintenance of Records	We update the client profile on a regular basis.
4	Screening against negative lists	We have in place record maintenance and retention procedures as prescribed. We screen the client database to ensure that it is not held by or linked to anyone included in the specified list.
5	Risk Assessment	We have in place system to place clients into high, medium & low risk category and apply enhanced due diligence for clients that pose a higher risk.
6	Clients of Special Category	We have in place policy to place clients of special category such as persons with political link, non residents, Trusts, NGOs, closely held Companies, etc. in high risk category.
7	Monitoring, Identification & Reporting of Suspicious Transactions	We have in place, systems and procedures for monitoring, detection and reporting of suspicious transactions to the relevant authorities.
8	Audit	We are subject to inspection by SEBI/Exchange. Additionally we are periodically audited by an independent internal auditor that assesses AML policies and procedures too.



<b>F) BANK DETAILS :</b>														
Bank A/c Type	<input type="checkbox"/> Savings Account <input type="checkbox"/> Current Account <input type="checkbox"/> Others (Please specify)_____													
Bank A/c No.														
Bank Name														
Branch Address														
City/town/village								Pin Code						
State								Country						
MICR Code								IFSC						
<b>G) Please tick, if applicable</b> <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)														
<b>H) STANDING INSTRUCTIONS :</b>														
I/We authorise you to receive credits automatically into my/our account.								<input type="checkbox"/> Yes <input type="checkbox"/> No						
Account to be operated through Power of Attorney (PoA)								<input type="checkbox"/> Yes <input type="checkbox"/> No						
I/We would like to share the e-mail Id with the RTA								<input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>SMS Alert facility</b> : [Mandatory if you are giving Power of Attorney (PoA). Ensure that the mobile number is provided in the KYC Application Form]														
Sole/First Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No		Second Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No		Third Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No							
Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository														
Participant ( <i>Tick any one</i> )							<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form							
Mode of receiving Statement of Account ( <i>Tick any one</i> )							<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form							
<i>(Read Note 3 and ensure that email ID is provided in KYC Application Form)</i>														
Type of Account opted for							<input type="checkbox"/> BSDA Account <input type="checkbox"/> Non-BSDA Account							
Auto Pledge Confirmation							<input type="checkbox"/> Yes <input type="checkbox"/> No							
<b>I) Guardian Details</b> (where sole holder is a minor) : [For account of a minor, two KYC Application Forms must be filled i.e. one for the guardian and another for the minor (to be signed by guardian)]														
Guardian Name								PAN						
Relationship of guardian with minor														

## 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".

	Name(s) of holder(s)	Signature(s) of holder*
Sole/First Holder/Guardian (in case sole holder is minor) (Mr./Ms.)		✓
Second Holder (Mr./Ms.)		✓
Third Holder (Mr./Ms.)		✓

\* Please sign in black ink only.

**NOTES :**

1. All communication shall be sent at the address of the Sole/First holder only.
2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
3. For receiving Statement of Account in electronic form:
  - I. Client must ensure the confidentiality of the password of the email account.
  - II. Client must promptly inform the Participant if the email address has changed.
  - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
4. Strike off whichever is not applicable.

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**ADDITION OF AADHAAR DETAILS**

'I/We do hereby solemnly declare that the detail herein above submitted by me/us is/are true to my/our knowledge.

I/We voluntarily give my/our consent to '**MLB SECURITIES LIMITED**' to use my/our Aadhaar Details to authenticate from UIDAI and link the Aadhaar Number to all my/our existing/new accounts with your DP.

	NAME	AADHAAR															
<b>Sole/First Holder</b>																	
<b>Second Holder</b>																	
<b>Third Holder</b>																	

x \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_  
 Signature of First/Sole Holder      Signature of Second Joint Holder      Signature of Third Joint Holder



<b>10 Address of Guardian(s)</b> City / Place State & Country			
PIN Code			
<b>11 Mobile / Telephone No. of Guardian</b>			
<b>12 Email ID of Guardian</b>			
<b>13 Relationship of Guardian with Nominee</b>			
<b>14 Guardian Identification Details</b>			
[Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature			
<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar			
<input type="checkbox"/> Saving Bank A/c No.			
<input type="checkbox"/> Proof of Identity			
<input type="checkbox"/> Demat Account ID			
	<b>Name(s) of holder(s)</b>		<b>Signature(s) of holder*</b>
Sole / First Holder (Mr./Ms.)			
Second Holder (Mr./Ms.)			
Third Holder (Mr./Ms.)			

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

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

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

### DECLARATION FORM FOR OPTING OUT OF NOMINATION

<b>MLB Securities Limited</b>										Date	D	D	M	M	Y	Y	Y	Y
13, Mahendra Road, 1st Floor, Kolkata - 700 025										UCC								
DP ID	I	N	3	0	2	6	5	4	Client ID (only for Demat account)									
Sole/First Holder Name																		
Second Holder Name																		
Third Holder Name																		
I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.																		
<b>Name and Signature of Holder(s)*</b>																		
1 ✓						2 ✓						3 ✓						

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



**PART II - ACCOUNT OPENING FORM (FOR NON-INDIVIDUALS)**



**MLB SECURITIES LIMITED**

**Regd. Office :** 16, Maharana Pratap Sarani, 1st Floor, Room No. 9-10, Kolkata - 700 001  
 Phone : 2230-4042 / 1247, E.mail : mlbsec13@gmail.com, CIN : U67120WB1995PLC067682

**Corporate Office :** 13, Mahendra Road, 1st Floor, Kolkata - 700 025  
 Phone : (033) 2474-3993

**DP ID : IN302654 ❖ SEBI REGN. NO. : IN-DP-658-2021**

E.mail ID for Investor Complaint : mlbsecinvestorgrievance@gmail.com




<b>CLIENT ID</b>																		<b>Date</b>	D	D	M	M	Y	Y	Y	Y							
(To be filled by Participant)																																	
<b>We request you to open a Depository Account in our name as per the following details :</b>																																	
<b>(Please fill all the details in CAPITAL LETTERS only)</b>																																	
<b>A) DETAILS OF ACCOUNT HOLDER(S) :</b>																																	
	<b>Name</b>														<b>PAN</b>																		
<b>Sole/ First Holder</b>																																	
<b>Second Holder</b>																																	
<b>Third Holder</b>																																	
<b>B) Type of account</b>	<input type="checkbox"/> Body Corporate <input type="checkbox"/> FI <input type="checkbox"/> FII <input type="checkbox"/> Qualified Foreign Investor <input type="checkbox"/> Mutual Fund <input type="checkbox"/> Trust <input type="checkbox"/> Bank <input type="checkbox"/> CM <input type="checkbox"/> HUF <input type="checkbox"/> Others (Please specify) _____																																
<b>C) For Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., although the account is opened in the name of the partner(s), trustee(es) etc., the name &amp; PAN of the Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., should be mentioned below :</b>																																	
<b>Name</b>															<b>PAN</b>																		
<b>D) Income Details (please specify) - Income Range per annum</b>																																	
<input type="checkbox"/> Below ₹ 20 Lac <input type="checkbox"/> ₹ 20 - 50 Lac <input type="checkbox"/> ₹ 50 Lac - 1 Crore <input type="checkbox"/> Above ₹ 1 Crore, and																																	
<b>Networth Amount ₹</b>															<b>as on (Date)</b>	D	D	M	M	Y	Y	Y	Y										
(Net worth should not be older than 1 year)																																	
<b>E) In case of FIIs/Others (as may be applicable)</b>																																	
<b>RBI Approval Reference No.</b>															<b>RBI Approval date</b>	D	D	M	M	Y	Y	Y	Y										
<b>SEBI Registration Number (for FIIs)</b>																																	

<b>F) BANK DETAILS :</b>												
Bank A/c Type	<input type="checkbox"/> Savings Account <input type="checkbox"/> Current Account <input type="checkbox"/> Others (Please specify) _____											
Bank A/c No.												
Bank Name												
Branch Address												
City/town/village							Pin Code					
State							Country					
MICR Code							IFSC					
<b>G) Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/whole time directors:</b>							<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)					
<b>H) Clearing Member Details (to be filled up by Clearing Members only)</b>												
Name of Stock Exchange												
Name of Clearing Corporation/ Clearing House												
Clearing Member ID												
SEBI Registration Number												
Trade Name												
CM-BP-ID (to be filled up by Participant)												
<b>I) STANDING INSTRUCTIONS :</b>												
1. We authorise you to receive credits automatically into our account							<input type="checkbox"/> Yes <input type="checkbox"/> No					
2. Account to be operated through Power of Attorney (PoA)							<input type="checkbox"/> Yes <input type="checkbox"/> No					
3. I/We would like to share the e-mail Id with the RTA							<input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>4. SMS Alert facility :</b>												
Sole/First Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No		Second Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No		Third Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No					
5. Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository Participant (Tick any one)												
							<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form					
6. Mode of receiving Statement of Account (Tick any one)							<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form					
<i>(Read Note 3 and ensure that email ID is provided in KYC Application Form)</i>												
7. Auto Pledge Confirmation							<input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>J) LIST OF FAMILY MEMBERS (SEPARATE ANNEXURE MAY BE USED IN CASE NUMBER OF MEMBER IS HIGHER)</b>												
Sl. No.	Name of Coparcener / Member			Gender	Date of Birth	Relation with Karta	Whether Coparcener/ Member (Please specify)					

## DECLARATION

The Rules and Regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by us and we have understood the same and we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. We hereby declare that the details furnished above are true and correct to the best of our knowledge and belief and 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, we are aware that we may be held liable for it. I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

**Authorised Signatories** (Enclose a Board Resolution for Authorised Signatories. In case of HUF, details of Karta to be given)

Sole/First Holder	Name	Signature(s)
First Signatory / Karta of HUF		
Second Signatory		
Third Signatory		
<b>Other Holders</b>		
Second Holder		
Third Holder		
<b>Mode of Operation for Sole/First Holder</b> (In case of joint holdings, all the holders must sign. In case of HUF, this is not applicable.)		
<input type="checkbox"/> Any one singly		
<input type="checkbox"/> Jointly by		
<input type="checkbox"/> As per resolution		
<input type="checkbox"/> Others (please specify)		

### NOTES:

1. In case of additional signatures, separate annexures should be attached to the application form.
2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
3. For receiving Statement of Account in electronic form:
  - I. Client must ensure the confidentiality of the password of the email account.
  - II. Client must promptly inform the Participant if the email address has changed.
  - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
4. Strike off whichever is not applicable.

## Option for issuance of DIS booklet alongwith account opening

(to be filled by persons seeking to open a depository account who have given Power of Attorney to operate the depository account to a stock broker/Participant/Portfolio Manager and do not intend to open a Basic Services Demat Account)

# MLB SECURITIES LIMITED

**Regd. Office :** 16, Maharana Pratap Sarani, 1st Floor, Room No. 9-10, Kolkata - 700 001  
Phone : 2230-4042 / 1247, E.mail : mlbsec13@gmail.com, CIN : U67120WB1995PLC067682

**Corporate Office :** 13, Mahendra Road, 1st Floor, Kolkata - 700 025  
Phone : (033) 2474-3993

**DP ID : IN302654 ❖ SEBI REGN. NO. : IN-DP-658-2021**

E.mail ID for Investor Complaint : mlbsecinvestorgrievance@gmail.com

Name(s) of account holder(s)	
Sole / First Holder	
Second Holder	
Third Holder	

### Option for Issue of DIS booklet (please tick any one)

#### Option 1

I/We wish to receive the Delivery Instruction Slip (DIS) booklet with account opening.

#### Option 2

I/We do not wish to receive the DIS booklet with account opening. However, the DIS booklet should be issued to me/ us immediately on my/ our request at any later date.

Beneficial Owner	Name	Signature with date
Sole/First Holder		X
Second Holder		X
Third Holder		X

### FORMAT OF BOARD RESOLUTION (ONLY FOR CORPORATES)

on Company Letterhead & duly certified to be true

### CERTIFIED TRUE COPY OF THE RESOLUTION PASSED AT THE MEETING OF THE BOARD OF DIRECTORS OF HELD AT \_\_\_\_\_

RESOLVED that a depository account of the Company be opened with MLB Securities Ltd. and Mr. \_\_\_\_\_, Director and Mr. \_\_\_\_\_, Director are hereby authorized singly / jointly to complete all account opening formalities, sign receipts, delivery instructions, demat, remat requests, inter-settlement, transfers, account closure, shifting, freeze / defreeze requests, pledge / unpledge instructions, cancellations of aforesaid, execute Power of Attorney in favour of MLB Securities Ltd. or revoke the Power of Attorney so executed and do all other acts as may be necessary for the operation of the account.


RESOLVED FURTHER the copy of this resolution be delivered to "MLB Securities Ltd."


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


To  
**MLB Securities Limited**  
 13, Mahendra Road  
 1st Floor  
 Kolkata - 700 025

**DECLARATION IN CASE OF SAME MOBILE NUMBER AND / OR E.MAIL ID FOR DIFFERENT CLIENTS**

[Please tick (✓) wherever applicable]

DP ID	<b>IN302654</b>	Client ID		Date	
Name of Sole / First Holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).					
Signature of Sole/First holder					
Name of Sole / First Holder					

DP ID	<b>IN302654</b>	Client ID		Date	
Name of Second Holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).					
Signature of Second holder					
Name of Second holder					

DP ID	<b>IN302654</b>	Client ID		Date	
Name of Third Holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).					
Signature of Third holder					
Name of Third holder					

**AUTHORISATION FOR PROVIDING DP TRANSACTION STATEMENT BY EMAIL OR ON WEBSITE**

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

To  
**MLB Securities Limited**  
13, Mahendra Road  
1st Floor  
Kolkata - 700 025

Dear Sir,

You are requested to provide me/us holding/transaction statement including statement of account in the following manner :

1. I/we understand that I/we have a right to receive the Holding and Transaction Statement in physical form. I/we understand that I/we have the option to receive Holding & Transaction Statement by email, in lieu of physical form.
2. In case the DP sends the Holding and Transaction Statement through email at my/our registered Email Id \_\_\_\_\_, I/we hereby authorize them not to send physical form unless specifically requested by me.
3. I/we agree that the log reports of your dispatching software shall be a conclusive proof of dispatch of Holding and Transaction Statement to me/us and such dispatch shall be deemed to mean receipt by me/us and shall not be disputed by me/us on account of any non-receipt/delayed receipt for any reason whatsoever.
4. I/we also agree that non-receipt of bounced mail notification by you shall amount to delivery at my/our email ID.
5. I/we shall immediately inform the DP about change in email address.
6. I/we will take all the necessary means to ensure confidentiality and secrecy of the login name and password of the internet/email account.

Thanking you,

Yours faithfully,

✓ \_\_\_\_\_  
Signature of the Client



# MLB SECURITIES LIMITED

**Regd. Office :** 16, Maharana Pratap Sarani, 1st Floor, Room No. 9-10, Kolkata - 700 001  
**Phone :** 2230-4042 / 1247, **E.mail :** mlbsec13@gmail.com, **CIN :** U67120WB1995PLC067682  
**Corporate Office :** 13, Mahendra Road, 1st Floor, Kolkata - 700 025, **Phone :** (033) 2474-3993  
**DP ID : IN302654 ❖ SEBI REGN. NO. : IN-DP-658-2021**  
**E.mail ID for Investor Complaint :** mlbsecinvestorgrievance@gmail.com

## SCHEDULE - A

PARAMETER	Clients having Trading a/c with MLB	Clients not having Trading a/c with MLB
Account Opening	Nil	Nil
Account Maintenance - Individuals	₹ 500/- For Basic Service Demat Account (BSDA) - as per actuals	₹ 500/- For Basic Service Demat Account (BSDA) - as per actuals
- Corporate	₹ 1000/-	₹ 1000/-
Transaction Charges		
- Buy	Nil	Nil
- Sell (MLB MKT Delivery)	Per Debit - ₹ 20/-	Per Debit - ₹ 30/-
- Sell (Other transfers)	Per Debit - ₹ 20/-	Per Debit - ₹ 30/-
Pledge Creation	Minimum - ₹ 25/-	Minimum - ₹ 25/-
Pledge Invocation	Nil	Nil
Pledge Closure	Minimum - ₹ 25/-	Minimum - ₹ 25/-
Lending / Borrowing	₹ 25/- per ISIN	₹ 25/- per ISIN
Dematerialisation	₹ 3/- per Certificate (Min. ₹ 50/-) Plus Courier Charge ₹ 50/-	₹ 3/- per Certificate (Min. ₹ 50/-) Plus Courier Charge ₹ 50/-
Rematerialisation	₹ 10/- per 100 Qty. (Min. ₹ 40/-) Plus Courier Charge Rs 50/-	₹ 10/- per 100 Qty. (Min. ₹ 40/-) Plus Courier Charge ₹ 50/-
Conversion of Mutual Funds Units represented by Statement of Account into Demat	₹ 50/- per instructions Courier Charge ₹ 50/-	₹ 50/- per instructions Courier Charge ₹ 50/-
Re-conversion of Mutual Fund Units into SOA	₹ 50/- per instructions Plus Courier Charge ₹ 50/-	₹ 50/- per instructions Plus Courier Charge ₹ 50/-
Redemption of Mutual Fund Units	₹ 50/- per instructions	₹ 50/- per instructions
Instruction Failure	₹ 50/- per ISIN	₹ 50/- per ISIN
Mailing charges for non-periodic statement & other communications	₹ 50/- per request for inland address & ₹ 250/- for foreign address	₹ 50/- per request for inland address & ₹ 250/- for foreign address
Client Master Modification	₹ 25/- per modification (except E-mail & Mobile changes)	₹ 25/- per modification (except E-mail & Mobile changes)
Additional DIS Booklet	₹ 25/- per Booklet	₹ 25/- per Booklet
Transacted BO demat account		
- for physical CAS	₹ 10/- each	₹ 10/- each
- for email CAS	₹ 1/- each	₹ 1/- each
Fees for hold on securities for Non Disposal Undertakings/ Agreement (NDU)	0.02% of the value of securities minimum ₹ 50/-	0.02% of the value of securities minimum ₹ 50/-



Margin Pledge initiation from Client a/c to TM/CM	₹ 10/- per ISIN	₹ 25/- per ISIN
Re-pledge from TM a/c to CM a/c	₹ 10/- per ISIN	₹ 25/- per ISIN
Re-pledge from CM a/c to CC a/c	₹ 6/- per ISIN	₹ 25/- per ISIN
Re-pledge release by CM to TM a/c	₹ 6/- per ISIN	₹ 25/- per ISIN
Margin pledge release by TM/CM to Client a/c	₹ 10/- per ISIN	₹ 25/- per ISIN
Invocation by CM or TM	₹ 50/- per ISIN	₹ 50/- per ISIN

- ❖ GST and other levies as may be applicable from time to time.
- ❖ Charges are subject to revision at the sole discretion of MLB Securities Ltd.
- ❖ Charges are calculated on the basis of the rates provided by NSDL.
- ❖ Any Charges not mentioned above will be charged separately as and when required.
- ❖ Instructions will not be accepted in case of debit balance & upfront payment required in case of transferring all shares.
- ❖ Account Freezing / Defreezing ₹ 100/- Per request.
- ❖ Failed Transaction / Demat Rejection ₹ 50/- Per Instruction.
- ❖ Delayed Payment charges 1.5% per month.

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_  
First/Sole Holder                      Second Joint Holder                      Third Joint Holder

Dated : \_\_\_\_\_

From :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To

**MLB Securities Limited**

13, Mahendra Road

1st Floor

Kolkata - 700 025

**Ref. : Acknowledgement for the receipt of documents**

Dear Sir,

This is to acknowledge and declare that

- I/We have received a photocopy of the KYC (full booklet), duly executed with you, to my/our satisfaction including my / our Unique Client Code (Trading Code) at no cost.
- I/We have ( Physically  Electronically) received, read and understood the Rights & Obligations, Risk Disclosure Documents, Guidance Note and the Rights and Obligations of Beneficial Owner and Depository Participant” as prescribed by SEBI and Depositories..
- I/We have received, read and understood the Policies and Procedures and agree to abide by the same.
- The email id noted with you (for ECN and other purposes) is correct.
- I/We have received a photocopy of Power of Attorney.
- I/We have received Charge Structure & Client Master Report.

Thanking you,

Yours truly,

✓ \_\_\_\_\_

Signature of the Client

Client Code \_\_\_\_\_

## Acknowledgement



# MLB SECURITIES LIMITED

**Regd. Office :** 16, Maharana Pratap Sarani, 1st Floor, Room No. 9-10, Kolkata - 700 001

Phone : 2230-4042 / 1247, E.mail : mlbsec13@gmail.com, CIN : U67120WB1995PLC067682

**Corporate Office :** 13, Mahendra Road, 1st Floor, Kolkata - 700 025, Phone : (033) 2474-3993

**DP ID : IN302654 ❖ SEBI REGN. NO. : IN-DP-658-2021**

E.mail ID for Investor Complaint : mlbsecinvestorgrievance@gmail.com

**Serial No. :**

Received the application from Mr/Ms/M/s \_\_\_\_\_ as the sole/first holder alongwith \_\_\_\_\_ and \_\_\_\_\_ as the second and third holders respectively for opening of a depository account. Please quote the DP ID & Client ID allotted to you (CM-BP-ID in case of Clearing Members) in all your future correspondence.

For **MLB Securities Ltd.**

Seal and Signature

Date : 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Authorised Signatory

---

### Acknowledgement Receipt

Received Nomination Form from :

<b>DP ID</b>	<b>I</b>	<b>N</b>	<b>3</b>	<b>0</b>	<b>2</b>	<b>6</b>	<b>5</b>	<b>4</b>	<b>Client ID</b>																		
Name																											
Address																											
Nomination in favour of																											
No Nomination		<input type="checkbox"/> Does not wish to nominate																									
Registration No.										Registered on	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y								
D	D	M	M	Y	Y	Y	Y																				

For **MLB Securities Ltd.**

Seal and Signature

Authorised Signatory

---

### Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

<b>DP ID</b>	<b>I</b>	<b>N</b>	<b>3</b>	<b>0</b>	<b>2</b>	<b>6</b>	<b>5</b>	<b>4</b>	<b>Client ID</b>								
Name of the Sole / First Holder																	
Name of Second joint Holder																	
Name of Third joint Holder																	

For **MLB Securities Ltd.**

Seal and Signature

Authorised Signatory

## ACCOUNT OPENING KIT

Name of Stock Broker / Trading Member / Clearing Member (For NSE-F&O Segment) : **MLB SECURITIES LIMITED**

SEBI Regn. No. and Date : INZ000283735 Dt.18.09.2019

**Registered Office address :**

16, Maharana Pratap Sarani

1st Floor, Room No. 9-10, Kolkata - 700 001

Phone : 2230-4042 / 1247, E.mail id : mlbsec13@gmail.com

CIN : U67120WB1995PLC067682

**Correspondence Office address :**

13, Mahendra Road, 1st Floor, Kolkata - 700 025

Phone : (033) 2474-3993, E.mail id : mlbsec13@gmail.com

**Compliance Officer Name, Phone No. & email ID :**

Mr Dinker Bhaia, 98300-40300, dinkerbhaia@hotmail.com

**CEO Name, Phone No. & email ID :**

Mr Dinker Bhaia, 98300-40300, dinkerbhaia@hotmail.com

For any grievance/dispute, please contact **MLB SECURITIES LIMITED** at the above address or email id : mlbsecinvestorgrievance@gmail.com and Phone No. : 2474-3993. In case not satisfied with the response, please contact the concerned exchange(s) at ignse@nse.co.in and Phone No. (022) 2659-8190 for NSE, at cseisc@cseindia.com, Phone No. (033) 2210-4470 to 77 for CSE and at is@bseindia.com, Phone No. (022) 2272-8097 for BSE.

Disclosure of Proprietary trading pursuant to SEBI Circular No. : SEBI/MRD/SE/Cir-42/2003 dated 19th Nov., 2003, NSE Circular No. : NSE/INVG/PRE/2003/16 dated 25th Nov., 2003, BSE Notice No. 20031125-7 dated 25 November, 2003 and CSE Circulars & Guidelines :

We, **MLB SECURITIES LIMITED**, are also engaged in Proprietary trading apart from Client based business.



# **MLB SECURITIES LIMITED**

**MEMBER : NATIONAL STOCK EXCHANGE OF INDIA LTD.  
CALCUTTA STOCK EXCHANGE LIMITED  
BSE LIMITED**

**REGISTERED OFFICE :**

16, MAHARANA PRATAP SARANI  
1ST FLOOR, ROOM NO. 9-10, KOLKATA - 700 001  
PHONE : 2230-4042 / 1247, E.mail : mlbsec13@gmail.com  
CIN : U67120WB1995PLC067682

**CORRESPONDENCE OFFICE :**

13, MAHENDRA ROAD  
1ST FLOOR, KOLKATA - 700 025  
PHONE : (033) 2474-3993