

## Client Registration Form (Trading Account)

• NSE

• BSE

• MSEI

NAME : \_\_\_\_\_

PAN NO. : \_\_\_\_\_

DPID : \_\_\_\_\_

CLIENT ID : \_\_\_\_\_

UCC NO. : \_\_\_\_\_



### SS CORPORATE SECURITIES LIMITED

NDM 2, Block D, 3rd Floor, Netaji Subhash Place,  
Pitam Pura, Delhi-110034

Tele. : 91 11 4700 3600 (30 Lines), Fax : 91 11 4700 3601

Website : [www.sscorporate.com](http://www.sscorporate.com)



**WELCOME LETTER**

M/s SS Corporate Securities Limited  
NDM 2, Block D, 3rd Floor,  
Netaji Subhash Place,  
Pitam Pura, Delhi-110034

Dated \_\_\_\_\_

I/We hereby confirm:

1. That I/We have received photocopy of the Client Registration Form (KYC), Rights & Obligations, Guidance note, Policies & Procedures. Risk Disclosure Document and other 3 Voluntary Documents executed by me/us.
2. That Unique Client Code allotted to me/us is \_\_\_\_\_ and Email ID furnished by me/us is \_\_\_\_\_ and Aadhaar No. \_\_\_\_\_

**CONSENT FOR AUTHENTICATION:** I, the holder of the above stated Aadhaar Number, hereby give my consent to SS Corporate Securities Ltd to obtain my Aadhaar Number for authentication with UIDAI. I understand that the Biometrics and /or OTP I provide for authentication shall be used only for authenticating my identity through the Aadhaar Authentication system for that KYC purpose and for no other purposes.

3. That I/We have been informed by you that you do client based trading & PRO Account trading.

Signature of Client:  \_\_\_\_\_

**FOR OFFICE USE ONLY**

IN PERSON VERIFICATION : Details of person doing verification

Name : \_\_\_\_\_

Designation \_\_\_\_\_

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

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

**Disclosure Information**

In compliance to **SEBI circular reference No SEBI/MRD/SE/Cir-42/2003 dated 19.11.2003 and NSE circular reference No NSE/INVG/PRE/2003/16 dated 25.11.2003 and BSE circular reference No 20031125-7 dated 09.09.2003** This is to inform you that we do client based trading and Pro-account trading in National Stock Exchange of India Ltd/ Bombay Stock Exchange Ltd. (BSE) / Metropolitan Stock Exchange of India Ltd.

**NOTE :** IF ANY INFORMATION REQUIRED TO BE GIVEN DOES NOT FIT IN THE FORM, AN ANNEXURE MAY BE USED.

## **Instruction to the Applicants for opening a Trading Account:**

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

### **MANDATORY**

Sr. No	Document to be Filled & Signed
1.	Know Your Client (Individual)
2.	Know Your Client (Non-Individual) HUF
3.	Know Your Client (Non-Individual)

### **NON MANDATORY**

Sr. No	Document to be Filled & Signed
1.	Running Account Authorization
2.	Letter of Authority
3.	Authorization for Funds/Securities Transfer/Adjustment in Family Accounts

Pages to be signed	
For Individual	(i), 1,2,3, 13,15, 18,19,20,21,22,23
For Non-Individual	(i),5,7,9,11,12,13,15,18,19,20,21,22,23

**PLEASE DO NOT USE CORRECTION FLUID ON THE KYC KIT**

## INDEX

S.no.	Name of the Document	Brief Significance of the Document	Page No
<b>MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI &amp; EXCHANGES</b>			
1	Account Opening Form	A. KYC form Document captures the basic information about the constituent and an instruction/check list. B. Document captures the additional information about the constituent relevant to trading account and an instruction/check list.	1-12
2	Policies and Procedures	Document describing significant policies and procedures of the stock broker.	17-18
3	Tariff Sheet	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s).	19
<b>MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI &amp; EXCHANGES – to be provided to Applicant</b>			
4	Rights and Obligations of Stock brokers, Sub brokers and Clients	Document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	
5	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities market.	
6	Guidance note	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	
<b>VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER</b>			
7	Running account Authorization	Document authorize member to maintain a running balance	20
		ECN	21
8	Authority	Document authorize to member	22
9	Consent for Availing The NSE-MFSS and BSE Star MF Facility	Document for availing the NSE-MFSS and BSE Star MF facility	23

**All Financial Proof/Documents/Declaration subject to the Renewal of each and every year.**

# SS CORPORATE SECURITIES LIMITED

Exchange	Segment	SEBI Registration No.	Date
NSE TMID-07538	CASH	INZ 000219533	26/07/1995
	F&O	INZ 000219533	20/12/2001
	CDS	INZ 000219533	16/09/2008
BSE TMID-3268	CASH	INZ 000219533	04/12/2008
	F&O	INZ 000219533	14/08/2009
MSEI	CDS	INZ 000219533	01/06/2010

Registered office address: **NDM 2, Block D, 3<sup>rd</sup> Floor, Netaji Subhash Place, Pitampura, Delhi-110034**  
Ph: **91 - 11 - 4700 3600 (30 Lines)**, Fax: **91 - 11-4700 3601**  
Email: [info@sscorporate.com](mailto:info@sscorporate.com) Website [www.sscorporate.com](http://www.sscorporate.com)

Correspondence office address: **NDM 2, Block D, 3<sup>rd</sup> Floor, Netaji Subhash Place, Pitampura, Delhi-110034**  
Ph: **91 - 11 - 4700 3600 (30 Lines)**, Fax: **91 - 11 - 4700 3601**  
Email: [info@sscorporate.com](mailto:info@sscorporate.com) Website [www.sscorporate.com](http://www.sscorporate.com)

**Compliance officer details:**

Name: *Rajesh Gupta*

Phone No. : *91-11- 4700 3602/4700 3632*

Email Id: [rajesh@sscorporate.com](mailto:rajesh@sscorporate.com)

**CEO details:**

Name: *Sunil Kumar Gupta*

Phone No. *91-11-4700 3610/4700 3611*

Email Id [sgupta@sscorporate.com](mailto:sgupta@sscorporate.com)

*For any grievance/dispute please contact stock broker SS Corporate Securities Ltd. at the above address or email id- [investorgrievance@sscorporate.com](mailto:investorgrievance@sscorporate.com) and Phone no. 91-11-4700 3600 (30 Lines)  
In case not satisfied with the response please contact the concerned exchange(s) at*

Exchange	Email ID	Phone No
National Stock Exchange of India Ltd	<a href="mailto:ignse@nse.co.in">ignse@nse.co.in</a>	022-26598190
BSE Ltd.	<a href="mailto:is@bseindia.com">is@bseindia.com</a>	022-22728097
Metropolitan Stock Exchange of India Ltd.	<a href="mailto:investorcomplaints@msei.in">investorcomplaints@msei.in</a>	022-61129000

**NOTE:- WE DO NOT ACCEPT CASH, DRAW YOUR CHEQUE IN FAVOUR OF "SS CORPORATE SECURITIES LIMITED"**

# SS CORPORATE SECURITIES LTD.

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

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

**For office use only**

Application Type\*  New  Update

(To be filled by financial institution) KYC Number

(Mandatory for KYC update request)

Account Type\*  Normal  Simplified (for low risk customers)  Small

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

Prefix First Name Middle Name Last Name

Name\* (Same as ID proof) \_\_\_\_\_

Maiden Name (If any\*) \_\_\_\_\_

Father / Spouse Name\* \_\_\_\_\_

Mother Name\* \_\_\_\_\_

Date of Birth\*

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

Marital Status\*  Married  Unmarried  Others

Citizenship\*  IN- Indian  Others (ISO 3166 Country Code )

Residential Status\*  Resident Individual  Non Resident Indian  
 Foreign National  Person of Indian Origin

Occupation Type\*  S-Service (  Private Sector  Public Sector  Government Sector )  
 O-Others (  Professional  Self Employed  Retired  Housewife  Student )  
 B-Business  X- Not Categorised

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

**2. CONTACT DETAILS** (All communications will be sent on provided)

Tel. (Off) \_\_\_\_\_ Tel. (Res) \_\_\_\_\_ Fax \_\_\_\_\_

Mobile \_\_\_\_\_  Self  Spouse  Dependent Child  Dependent Parent

Email ID \_\_\_\_\_  Self  Spouse  Dependent Child  Dependent Parent

I hereby declare that the aforesaid Mobile Number and E-Mail ID belongs to me or my family members and My relationship with the holder of above

**3. PROOF OF IDENTITY (PoI)\*** (Please refer instruction **C** at the end)

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

A- Passport Number  Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence  Driving Licence Expiry Date

E- UID (Aadhaar)

F- NREGA Job Card

Z- Others (any document notified by the central government)  Identification Number

S- Simplified Measures Account - Document Type code  Identification Number

**4. PROOF OF ADDRESS (PoA)\***

**4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS** (Please see instruction **D** at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type\*  Residential / Business  Residential  Business  Registered Office  Unspecified

Proof of Address\*  Passport  Driving Licence  UID (Aadhaar)  
 Voter Identity Card  NREGA Job Card  Others  please specify   
 Simplified Measures Account - Document Type code

**Address**

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_ City / Town / Village\* \_\_\_\_\_

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

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

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

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_ City / Town / Village\* \_\_\_\_\_

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

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

Same as Current / Permanent / Overseas Address details  Same as Correspondence / Local Address details

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

5. TICK IF APPLICABLE  RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED\* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence\* \_\_\_\_\_  
Tax Identification Number or equivalent (If issued by jurisdiction)\* \_\_\_\_\_  
Place / City of Birth\* \_\_\_\_\_ ISO 3166 Country Code of Birth\* \_\_\_\_\_

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

Addition of Related Person  Deletion of Related Person KYC Number of Related Person (if available\*) \_\_\_\_\_

Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative  
Prefix First Name Middle Name Last Name  
Name\* \_\_\_\_\_  
(If KYC number and name are provided, below details of section 6 are optional) Tel. (Off) \_\_\_\_\_

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

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

7. REMARKS (If any) Mobile no. / Email-ID (Please refer instruction F at the end)

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

8. APPLICANT DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : DD - MM - YYYY Place : \_\_\_\_\_

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

Important Instructions:

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

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received  Certified Copies

KYC VERIFICATION CARRIED OUT BY

Date DD - MM - YYYY  
Emp. Name \_\_\_\_\_  
Emp. Code \_\_\_\_\_  
Emp. Designation \_\_\_\_\_  
Emp. Branch \_\_\_\_\_

[Employee Signature]

INSTITUTION DETAILS

Name **SS CORPORATE SECURITIES LTD.**  
Code \_\_\_\_\_

[Institution Stamp]



PAN           Trading       DP Code

Name

Place of Birth           Country of Birth

Nationality

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

Net Worth **Amount Rs.** ..... Net Worth as on             
*(Net worth should not be older than 1 year)*

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

Politically Exposed Person (PEP)  Related to Politically Exposed Person (RPEP)  Not a Politically Exposed Person (RPEP)

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

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

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

**DECLARATION**

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform SS Corporate Securities Limited for any modification to this information promptly.

I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).

Sign here : (I) 

Date :

Place :

For Investor convenience, SS Corporate Securities Limited collecting this mandatory information for updating across all Group Companies of SS Corporate Securities Limited whether you are already an investor or would become an investor in future.

Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest SS Corporate Securities Limited branch or you can dispatch the hard copy to-

**SS Corporate Securities Limited**  
**NDM 2, Block D, 3rd Floor, Netaji Subhash Place,**  
**Pitam Pura, Delhi-I 10034**

**General Instructions:**

- 1 Fields marked with ‘\*’ are mandatory fields.
- 2 Tick ‘✓’ wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- 6 Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of ‘Small Account type’ only personal details at section number 1 and 2, photograph, signature and self-certification required.

**A Clarification / Guidelines on filling ‘Personal Details’ section**

- 1 **Name:** Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either **father’s name or spouse’s** name is to be mandatorily furnished. In case PAN is not available father’s name is mandatory.

**B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India**

- 1 **Tax identification Number (TIN):** TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a “Functional equivalent”), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

**C Clarification / Guidelines on filling ‘Proof of Identity [PoI]’ section**

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if ‘Z- Others (any document notified by the central government)’ is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code	Description
01	Identity card with applicant’s photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
02	Letter issued by a gazetted officer, with a duly attested photograph of the person.

**D Clarification / Guidelines on filling ‘Proof of Address [PoA] - Current / Permanent / Overseas Address details’ section**

- 1 PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3 In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Document Code	Description
---------------	-------------

1. Gross Annual Income Details Please Tick ( )  
 01 Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).  
 Below ₹ 1 Lac  ₹ 1-5 Lac  ₹ 5-10 Lac  ₹ 10-25 Lac  ₹ 25 Lac - 1 Crore  ₹ More than 1 Crore

2. Net-worth (Net worth should not be older than 1 year) Amount ₹ \_\_\_\_\_ as on (date) | D | D | / | M | M | / | Y | Y | Y | Y |

02	Property or Municipal Tax receipt.
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

**E Clarification / Guidelines on filling ‘Proof of Address [PoA] - Correspondence / Local Address details’ section**

- 1 To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2 In case of multiple correspondence / local addresses, Please fill ‘Annexure A1’

**F Clarification / Guidelines on filling ‘Contact details’ section**

- 1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
- 2 Do not add ‘0’ in the beginning of Mobile number.

**G Clarification / Guidelines on filling ‘Related Person details’ section**

- 1 Provide KYC number of related person if available.

**H Clarification / Guidelines on filling ‘Related Person details – Proof of Identity [PoI] of Related Person’ section**

- 1 Mention identification / reference number if ‘Z- Others (any document notified by the central government)’ is ticked.

**KNOW YOUR CLIENT (KYC) Application Form - For Non-Individual**

NEW  CHANGE REQUEST (Please tick the appropriate)

Application 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)

" Please note that the KYC Application Form and overleaf instructions should be printed on the same page (back to back). If printed separately then both the pages should be attached and signed by the applicant."

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

1. Name of Applicant (Please write complete name as per Certificate of Incorporation / Registration ; leaving one box blank between 2 words. Please do not abbreviate the Name).  
 \_\_\_\_\_

2. Date of Incorporation   /   /      
 Place of Incorporation \_\_\_\_\_

3. Registration No. (e.g. CIN) \_\_\_\_\_  
 Date of commencement of business   /   /

4. Status Please tick ( ) Private Ltd. Co.  Public Ltd. Co.  Body Corporate  Partnership  Trust/ Charities / NGOs   
 FI  FII  HUF  AOP  Bank  Government Body  Non-Government Organisation   
 Defence Establishment  Body of Individuals  Society  LLP  Others (Please specify) \_\_\_\_\_

5. Permanent Account Number (PAN) (MANDATORY) \_\_\_\_\_



**B. Address Details (please see guidelines overleaf)**

1. Address for Correspondance  
 \_\_\_\_\_  
 City / Town / Village \_\_\_\_\_ Postal Code \_\_\_\_\_  
 State \_\_\_\_\_ Country \_\_\_\_\_

2. Contact Details  
 Tel. (Off.) \_\_\_\_\_ Tel. (Res.) \_\_\_\_\_ Fax \_\_\_\_\_  
 Mobile No \_\_\_\_\_ E-Mail Id. \_\_\_\_\_

3. Proof of Address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick ( ) against the document attached.  
 \* Lates Telephone Bill (only Land Line)  \* Latest Electricity Bill  \* Latest Bank Account Statement  Registered Lease/Sale Agreement of Office Premises  
 Any other proof of address document (as listed overleaf). (Please specify) \_\_\_\_\_  
 \* Not more than 3 Months old. Validity/Expiry date of proof of address submitted   /   /

4. Registered Address (if different from above)  
 \_\_\_\_\_  
 City / Town / Village \_\_\_\_\_ Postal Code \_\_\_\_\_  
 State \_\_\_\_\_ Country \_\_\_\_\_

5. Proof of Address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick ( ) against the document attached.  
 \* Lates Telephone Bill (only Land Line)  \* Latest Electricity Bill  \* Latest Bank Account Statement  Registered Lease/Sale Agreement of Office Premises  
 Any other proof of address document (as listed overleaf). (Please specify) \_\_\_\_\_  
 \* Not more than 3 Months old. Validity/Expiry date of proof of address submitted   /   /

**OTHER DETAILS**

1. Name, PAN, DIN/UID, residential address and photographs of Promoters /Partners / Karta / Trustees / Whole Time Directors  
 Please use Annexure to fill in details). \_\_\_\_\_

2. Is the entity involved providing any of the following services  
 - For Foreign Exchange Money Changer Services  Yes  No - Gaming / Gambling / Lottery Services  Yes  No  
 - Money Lending / Pawning  Yes  No (e.g. casinos, betting syndicate)  Yes  No

3. Any other information: \_\_\_\_\_

**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.

Date:   /   /

\_\_\_\_\_  
 NAME & SIGNATURE(S) OF AUTHORISED PERSON (S)

**FOR OFFICE USE ONLY**

**In Person Verification (IPV) Details:**  
 Name of the person who has done the IPV: \_\_\_\_\_  
 Designation: \_\_\_\_\_ Employee ID: \_\_\_\_\_  
 Name of the Organization: SS Corporate Securities Ltd.  
 Date of IPV:   /   /

Signature of the person who has done the IPV \_\_\_\_\_ Seal/Stamp of the Intermediary \_\_\_\_\_

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

For instruction - P. T. O

## INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

<p><b>IMPORTANT POINTS:</b></p> <ol style="list-style-type: none"> <li>1. Self attested copy of PAN card is mandatory for all clients</li> <li>2. Copies of all the documents submitted by the applicant should be self -attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.</li> <li>3. If any proof of identity or address is in a foreign language, then translation into English is required</li> <li>4. Name &amp; address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.</li> <li>5. If correspondence &amp; permanent address are different, then proofs for both have to be submitted.</li> <li>6. Sole proprietor must make the application in his individual name &amp; capacity.</li> <li>7. For non-residents and foreign nationals,(allowed to trade subject to RBI and FEMA guidelines), copy of passport / PIO Card / OCI Card and overseas address proof is mandatory.</li> <li>8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given</li> <li>9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.</li> <li>10. For opening an account with Depository participant or Mutual Fund for a minor, photocopy of the School Leaving Certificate/ Mark sheet issued by Higher Secondary Board/ Passport of Minor/ Birth Certificate must be provided</li> <li>11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.</li> </ol> <p><b>B. Proof of Identity (POI): List of documents admissible as POI :</b></p> <ol style="list-style-type: none"> <li>1. PAN card with photograph. This is mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).</li> <li>2. Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving license.</li> <li>3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments Statutory/Regulatory Authorities, Public Sector Undertakings Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks</li> </ol> <p><b>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.)</b></p> <ol style="list-style-type: none"> <li>1. Passport/Voters I -Card/Ration Card/Registered Lease or Sale Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.</li> </ol>	<ol style="list-style-type: none"> <li>2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill not more than 3 months old.</li> <li>3. Bank Account Statement/Passbook - Not more than 3 months old.</li> <li>4. Self-declaration by High Court and Supreme Court judges giving the new address in respect of their own accounts</li> <li>5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co -Operative Bank / Multinational Foreign Banks/ Gazetted Officer / Notary Public / elected representatives to the Legislative Assembly/ Parliament / Documents issued by any Govt. or Statutory Authority.</li> <li>6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI ICWAI, ICSI, Bar Council etc.,to their Members.</li> <li>7. For FII/sub account, Power of Attorney given by FII/sub -account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.</li> <li>8. The proof of address in the name of the spouse may be accepted.</li> </ol> <p><b>D Exemptions/clarifications to PAN (*Sufficient documentary evidence in support of such claims to be collected.)</b></p> <ol style="list-style-type: none"> <li>1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.</li> <li>2. Investors residing in the state of Sikkim.</li> <li>3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.</li> <li>4. SIP of Mutual Funds upto Rs 50,000/- p.a.</li> </ol> <p>In case of institutional clients, namely, FIIs, Mfs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.</p> <p><b>E. List of people authorized to attest the documents:</b></p> <p>Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation &amp; Seal should be affixed on the copy).In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, and Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents .</p>
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**Details of Promoters / Partners / Karta / Trustees and Whole time directors forming a part of  
Know Your Client (KYC) Application Form for Non- Individuals**

**Name of Applicant** \_\_\_\_\_

**PAN of the Applicant**

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Sr. No	PAN	Name	DIN for Directors / UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time Directors etc.	Whether Politically Exposed	Photograph
	Please Attach a copy of your PAN Card			Please attach proof of your residential address		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	Please Attach a copy of your PAN Card			Please attach proof of your residential address		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	Please Attach a copy of your PAN Card			Please attach proof of your residential address		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	Please Attach a copy of your PAN Card			Please attach proof of your residential address		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	Please Attach a copy of your PAN Card			Please attach proof of your residential address		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	Please Attach a copy of your PAN Card			Please attach proof of your residential address		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	



(Signature)

**Name & Signature of the Authorised Signatory (ies)**

**Date DD / MM / YYYY**

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

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

Types of entity	Documentary requirements
<b>Corporate</b>	<ul style="list-style-type: none"> <li>● Copy of PAN CARD &amp; Address Proof of Company</li> <li>● Original Signed cancelled cheque of Company</li> <li>● Bank Statement of Company (Duly Stamped) by Bank (Two Set)</li> <li>● Copy of Pan Card &amp; Address Proof of all Directors. (Name should match in all proofs)</li> <li>● Signed cancelled cheque of all Directors (Original) (Name should be printed on Cancelled Cheque, if no name on Cheque, Bank Statement duly stamped by bank reqd.)</li> <li>● Board Resolution to deal in securities market and authorisation to sign the documents on behalf of the company to its Director/s.</li> <li>● Photographs of all Directors in Annexure Sheet duly cross signed on photo.</li> <li>● Networth Certificate of company certified by CA</li> <li>● List of Directors</li> <li>● Share Holding Pattern including Promoters Holding.</li> <li>● List of Authorised Signatories duly signed by Directors.</li> <li>● Last Two years Audited Financial Accounts (Two Sets)</li> <li>● Memorandum &amp; Article of Association (Two Sets)</li> </ul> <p><b>(ALL DOCUMENTS SHOULD BE SELF CERTIFIED.)</b></p>
<b>Partnership firm</b>	<ul style="list-style-type: none"> <li>● Copy of the balance sheets for the last 2 financial years (to be submitted every year).</li> <li>● Certificate of registration (for registered partnership firms only).</li> <li>● Copy of partnership deed.</li> <li>● Authorised signatories list with specimen signatures.</li> <li>● Photograph, POI, POA, PAN of Partners.</li> </ul>
<b>Trust</b>	<ul style="list-style-type: none"> <li>● Copy of the balance sheets for the last 2 financial years (to be submitted every year).</li> <li>● Certificate of registration (for registered trust only).</li> <li>● Copy of Trust deed.</li> <li>● List of trustees certified by managing trustees/CA.</li> <li>● Photograph, POI, POA, PAN of Trustees.</li> </ul>
<b>HUF</b>	<ul style="list-style-type: none"> <li>● Copy of PAN CARD &amp; Address Proof of HUF Firm</li> <li>● Original Signed cancelled cheque of HUF Firm</li> <li>● Bank Statement of HUF Firm</li> <li>● Copy of Pan Card &amp; Address Proof of all Karta (Name should match in all proofs)</li> <li>● Original Signed cancelled cheque of Karta</li> <li>● Bank Statement of Karta</li> <li>● Karta's Details, Co-Parceners detail along with their photo (duly cross signed), their Pan card and address proofs in annexure detail page.</li> <li>● If Co-parcenor are minor, then DOB certificate</li> <li>● HUF declaration</li> </ul> <p><b>(ALL DOCUMENTS SHOULD BE SELF CERTIFIED.)</b></p>
<b>Unincorporated association or a body of individuals</b>	<ul style="list-style-type: none"> <li>● Proof of Existence/Constitution document.</li> <li>● Resolution of the managing body &amp; Power of Attorney granted to transact business on its behalf.</li> <li>● Authorized signatories list with specimen signatures.</li> </ul>
<b>Banks/Institutional Investors</b>	<ul style="list-style-type: none"> <li>● Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years.</li> <li>● Authorized signatories list with specimen signatures.</li> </ul>
<b>Foreign Institutional Investors (FII)</b>	<ul style="list-style-type: none"> <li>● Copy of SEBI registration certificate.</li> <li>● Authorized signatories list with specimen signatures.</li> </ul>
<b>Army/ Government Bodies</b>	<ul style="list-style-type: none"> <li>● Self-certification on letterhead.</li> <li>● Authorized signatories list with specimen signatures.</li> </ul>
<b>Registered Society</b>	<ul style="list-style-type: none"> <li>● Copy of Registration Certificate under Societies Registration Act.</li> <li>● List of Managing Committee members.</li> <li>● Committee resolution for persons authorised to act as authorised signatories with specimen signatures.</li> <li>● True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.</li> </ul>

**MANDATORY****DECLARATION BY HUF**

To,

**SS CORPORATE SECURITIES LIMITED**

NDM 2, Block D, 3rd Floor, Netaji Subhash Place,  
 Pitam Pura, Delhi-110034  
 Tele. : 91 11 4700 3600 (30 Lines), Fax : 91 11 47003601

As our HUF wishes to open an Trading Account with your Company in the said name \_\_\_\_\_

\_\_\_\_\_ This is to inform you that the first signatory to this letter Mr. \_\_\_\_\_  
 is the Karta of the joint family and other signatories are the co-parceners of the said family.

We further confirm that the business of the said joint family is carried on mainly by the said Karta as also by the other signatories here to in the interest and for the benefit of the entire body of co-parceners of the joint family. We all undertake that claims due to the Company from the said family shall be recoverable personally from all or any of us and also for the entire family properties of which the first signatory is the Karta, including the share of minor co-parceners.

In view of the fact that ours is not a firm governed by the Indian Partnership Act 1952, we have not got our said firm registered under the said act.

We hereby undertake to inform the Company of the death or birth of a co-parcener or change occurring at any time in the membership of our joint during the currency of the account.

Name of the Co-Parceners	Sex	Date of Birth	Relationship with the Karta	Signature of Co-parceners

**DETAILS OF MINOR**

Name of the Minor	Sex	Date of Birth	Relationship with the Karta	Signature of Karta

Your sincerely



Name of Karta \_\_\_\_\_  
 (Signature with rubber stamp)

**DECLARATION BY PARTNERSHIP FIRM**

(To be obtained on pre-printed letter head of the firm)

To,  
**M/s SS Corporate Securities Limited**  
**NDM 2, Block D, 3rd Floor,**  
**Netaji Subhash Place,**  
**Pitam Pura, Delhi-110034**

Dear Sir,

We refer to the trading account opened with you in the name of M/s.....we

hereby authorised following partners severally on behalf of the firm :-

S. No.	Name of Partner	Designation Specimen	Signature
1.	.....	.....	.....
2.	.....	.....	.....
3.	.....	.....	.....

To sign, execute and submit various papers and documents and to sell, purchase, transfer, endorse and negotiate and to do all acts and formalities that may be necessary to open add operate share trading account with SS Corporate Securities Ltd. On behalf of the firm, We also authorise them to sign the authority letter for adjustment of balances of family account.

We recognize that the beneficiary account cannot be opened with a depository participants in the name of the partnership firm as per regulations. To facilitate operations of the above trading account with you and for the purpose fo completing the securities transfer obligation, pursuant to the trading operations, we authorize you to recognize the beneficiary account. No. ....with depository.....having DP ID.....with opened as a joint account in the names of the all the partners of the firm.

I/We agree that the obligation for shares purchased and / or sold by the firm will be handled and completed through transfer to / from the above mentioned account. We recognize and accept transfer made by you to the beneficiary account as complete discharge of obligations by you in respect of trades executed in the above trading account of the firm.

Yours truly

  
(Signature)  
Client Name \_\_\_\_\_



# SS CORPORATE SECURITIES LIMITED

# FATCA & CRS Declaration - Non Individual

PAN  Trading  DP Code   
 Name

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India  Yes  No  
 (If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

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

In case Tax Identification Number is not available, kindly provide its functional equivalent.  
 In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.

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

### PART A (to be filled by Financial Institutions or Direct Reporting NFEs)

1. We are a, Financial institution  (Refer 1 of Part C) or Direct reporting NFE  (Refer 3(vii) of Part C) (please tick as appropriate)

**GIIN**

**Note:** If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below  
 Name of sponsoring entity \_\_\_\_\_

**GIIN not available** (please tick as applicable)  **Applied for**  **Not obtained – Non-participating FI**   
 **Not required to apply for - please specify 2 digits sub-category**  (Refer 1 A of Part C)

### PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")

1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C) Yes  (If yes, please specify any one stock exchange on which the stock is regularly traded)  
 Name of stock exchange \_\_\_\_\_

2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C) Yes  (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)  
 Name of listed company \_\_\_\_\_  
 Nature of relation:  Subsidiary of the Listed Company or  Controlled by a Listed Company  
 Name of stock exchange \_\_\_\_\_

3. Is the Entity an active NFE (Refer 2c of Part C) Yes  Nature of Business \_\_\_\_\_  
 Please specify the sub-category of Active NFE  (Mention code – refer 2c of Part C)

4. Is the Entity a passive NFE (Refer 3(ii) of Part C) Yes  Nature of Business \_\_\_\_\_

### UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)

**Category** (Please tick applicable category):  Unlisted Company  Partnership Firm  Limited Liability Partnership Company  
 Unincorporated association / body of individuals  Public Charitable Trust  Religious Trust  Private Trust  
 Others (please specify \_\_\_\_\_)

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). (Please attach additional sheets if necessary)

Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)

Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3(iv) (A) of Part C)			
Country of Tax residency*			
PAN #			
Address	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____
Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office
Tax ID <sup>96</sup>			
Tax ID Type			
City of Birth			
Country of birth			
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____
Nationality			
Father's Name			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Holding (%) <sup>5</sup>			

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

<sup>6</sup> If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.

<sup>96</sup> In case Tax Identification Number is not available, kindly provide functional equivalent

<sup>5</sup> Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary

### DECLARATION

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform SS Corporate Securities Limited for any modification to this information promptly. I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).

Name

Designation

Sign here : (1) 

Date :

Place :

For Investor convenience, SS Corporate Securities Limited collecting this mandatory information for updating across all Group Companies of SS Corporate Securities Limited whether you are already an investor or would become an investor in future.

Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest SS Corporate Securities Limited branch or you can dispatch the hard copy to-

**SS Corporate Securities Limited**  
**NDM 2, Block D, 3rd Floor, Netaji Subhash Place,**  
**Pitam Pura, Delhi-I 10034**

**A. FINANCIAL DETAILS**

1. Gross Annual Income Details (Please Specify) income range per annum:

Below ₹1 Lac  ₹1-5 Lac  ₹5-10 Lac  ₹10-25 Lac  More than ₹25 Lacs

OR

Net-worth (Net worth should not be older than 1 year) Amount ₹ \_\_\_\_\_ As on Date \_\_\_\_\_

2. Occupation (Please tick any one and give brief details) :

Private Sector  Public Sector  Government Service  Business  Professional  Agriculturist  Retired  
 Housewife  Student  Others (Please specify) \_\_\_\_\_

**B. BANK ACCOUNT(S) DETAILS (attach proof)**

Bank Name (1) \_\_\_\_\_

Branch Address \_\_\_\_\_

City \_\_\_\_\_ PIN Code \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

Bank Account No. \_\_\_\_\_

Account Type  Saving  Current  Others - In case of  NRI  NRE  NRO

MICR Number \_\_\_\_\_ IFSC Code \_\_\_\_\_

Bank Name (2) \_\_\_\_\_

Branch Address \_\_\_\_\_

City/Town/Village \_\_\_\_\_ PIN Code \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

Bank Account No. \_\_\_\_\_

Account Type  Saving  Current  Others - In case of  NRI  NRE  NRO

MICR Number \_\_\_\_\_ IFSC Code \_\_\_\_\_

**C. DEPOSITORY ACCOUNT(S) DETAILS (attach proof)**

Depository Participant Name (1) \_\_\_\_\_

Depository Name  NSDL DP ID \_\_\_\_\_ BO ID \_\_\_\_\_

CDSL DP ID \_\_\_\_\_ BO ID \_\_\_\_\_

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

Depository Participant Name (2) \_\_\_\_\_

Depository Name  NSDL DP ID \_\_\_\_\_ BO ID \_\_\_\_\_

CDSL DP ID \_\_\_\_\_ BO ID \_\_\_\_\_

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

**D. TRADING PREFERENCES**

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

Exchanges	Segments			Currency	
NSE	Cash	<input type="checkbox"/>	F&O	<input type="checkbox"/>	<input type="checkbox"/>

BSE	Cash	<input type="checkbox"/>	F&O	<input type="checkbox"/>
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#### D. PAST ACTIONS

Details of any action/proceedings initiated/pending/ taken by SEBI / Stock exchange/any other authority against the applicant/ constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

#### E. DEALINGS THROUGH SUB- BROKERS AND OTHER STOCK BROKERS

◆ **If Client is dealing through the sub-broker, provide the following details:**

Sub-broker's Name \_\_\_\_\_ SEBI Regn. No. \_\_\_\_\_

Registered Office Address \_\_\_\_\_

City/Town/Village \_\_\_\_\_ PIN Code \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Website \_\_\_\_\_

◆ **Whether dealing with any other stock broker/sub-broker** (if case dealing with multiple stock brokers/sub-brokers, provide details of all)

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

Name of Sub-broker (if any) \_\_\_\_\_

Registered Office Address \_\_\_\_\_

City/Town/Village \_\_\_\_\_ PIN Code \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

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

Details of disputes/dues pending from/to such stock broker/sub broker \_\_\_\_\_

#### F. ADDITIONAL DETAILS

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

#### G. INTRODUCER DETAILS (optional)

Name of the Introducer \_\_\_\_\_

Status of the Introducer  Sub-broker  Remisier  Authorized Person  Existing Client  Others, please specify \_\_\_\_\_

Address of Introducer \_\_\_\_\_

City/ \_\_\_\_\_ PIN Code \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

Phone No. \_\_\_\_\_

## H. NOMINATION DETAILS (for Individuals only)

I/We wish to nominate       I/We do not wish to nominate

Name of the Nominee \_\_\_\_\_

Relationship with the Nominee \_\_\_\_\_

PAN of Nominee \_\_\_\_\_ Date of Birth of Nominee \_\_\_\_\_

Address of Nominee \_\_\_\_\_

City/ \_\_\_\_\_ PIN Code \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

Phone No. \_\_\_\_\_

### If Nominee is a minor, details of guardian

Name of Guardian \_\_\_\_\_

Address of Guardian \_\_\_\_\_

City/ Town/ Village \_\_\_\_\_ PIN Code \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

Phone No. \_\_\_\_\_

Signature of Guardian \_\_\_\_\_

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

#### 1st Witness

#### 2nd Witness

Name \_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ PIN Code \_\_\_\_\_

\_\_\_\_\_ PIN Code \_\_\_\_\_

### DECLARATION

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

Place \_\_\_\_\_



Date \_\_\_\_\_

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

**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 \_\_\_\_\_

\_\_\_\_\_ **Seal/Stamp of the stock broker**

Date \_\_\_\_\_

**INSTRUCTIONS/ CHECK LIST**

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

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

## POLICY &amp; PROCEDURE

**a) Refusal of orders for Penny Stocks**

Penny Stocks are those securities, which are declared to be illiquid securities by the exchanges every month. These types of stocks are generally considered to be highly speculative and high risk because of their lack of liquidity. So clients are advised not to deal in penny stocks and if a client deals with the penny stocks, 100% margin will be taken from the client. Stock Broker also reserves the right to refuse to provide limit/exposure in Penny stocks if it does not commensurate with the risk profile of the client as assessed by the Broker.

**b) Setting up client's exposure limits**

The stockbroker may from time to time impose and vary limits on the orders that the client can place through the stock broker's trading system (including exposure limits, turnover limits, limits as to the number, value and/or kind of securities in respect of which orders can be placed etc.). The client is aware and agrees that the stock broker may need to vary or reduce the limits or impose new limits urgently on the basis of the stock broker's risk perception and other factors risk considered relevant by the stock broker including but not limited to limits on account level/market level limits in of exchange/SEBI directions/limits (such as broker security specific/volume specific exposures etc.), and the stock broker may be unable to inform the client of such variation, reduction or imposition in advance. The client agrees that the stock broker may at its sole discretion without prior notice, prohibit or restrict client from placing orders or trade in securities through the stock broker's trading system on account of any such variation, reduction or imposition of limits.

**c) Applicable brokerage rate**

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

**d) Imposition of penalty / delayed payment charges**

Clients will be liable to pay late pay in/delayed payment charges for non-making payment of their payin/margin obligation on time as per the exchange requirement/schedule at the rate as applicable. (Not exceeding 18% per annum) Further where the stock broker has to pay any fine same shall be borne by the client. or bear any punishment from any authority in connection with or any actions of the client, the same shall be borne by the client.

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

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

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

Stock broker shall not be obliged to deliver any securities or pay any money to the client unless and until the same has been received by the stock broker from the exchange, the clearing corporation / clearing house or other company or entity liable to make the payment and the client has fulfilled his/her/its obligations first.

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

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

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

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

**MANDATORY**

**i) Deregistering a client: -**

Notwithstanding anything to the contrary stated in the agreement with immediate effect in any of the following circumstances:

If the action of the client are prima facie illegal / improper or such as to manipulate the price of any the normal/proper functioning of the market, either alone or in conjunction with others.

If there is any commencement of a legal process against the client under any law in force; On the death/lunacy or other disability of the Client;

If the Client proceedings has voluntarily or under compulsorily become subject to any bankruptcy or insolvency law;

If the client being a partnership firm, has any steps taken by the Client and/or its partners for dissolution of the partnership;

If there is reasonable apprehension that the Client is unable to pay its debts or the Client has admitted its inability to pay its debts, as they become payable;

**Inactive Client account: -**

Client account will be considered as inactive if the client does not trade for period of one year. Calculation will be done at the beginning of every month and those clients who have not

traded even a single time will be considered as inactive, the shares/ credit ledger balance if any will be transferred to the client within one week of the identifying the client as inactive. The client has to make written request for reactivation of their account.

**Client Acceptance of Policies and Procedures stated herein above:**

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

Date \_\_\_\_\_



**Client's Signature**



**TARIFF SHEET**

**NSE**

**BSE**

	Maximum	Minimum	Maximum	Minimum
Jobbing	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Delivery	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**FUTURES**

**OPTIONS**

	Maximum	Minimum	Per Lot
NSE	<input type="text"/>	<input type="text"/>	<input type="text"/>
BSE	<input type="text"/>	<input type="text"/>	<input type="text"/>

**CURRENCY**

	Maximum	Minimum	Per Lot
NSE	<input type="text"/>	<input type="text"/>	<input type="text"/>

\* Transaction Charges, GST, STT, Stamp Duty, Other Govt. Levies are extra.

Date \_\_\_\_\_



(Signature)

Client Name \_\_\_\_\_

NON-MANDATORY

To

Date.....

**M/s SS Corporate Securities Limited**  
**NDM 2, Block D, 3rd Floor,**  
**Netaji Subhash Place,**  
**Pitam Pura, Delhi - 110034**

Dear Sir,

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

1. I/we would like to keep securities purchased by me/us with you as collateral for giving me exposure limits in my/our trading account / margin obligation. I/we authorize you not to transfer shares / securities purchased by me/us to my/our demat beneficiary account and keep them with yourselves. I /we also authorize you to pledge these shares / securities with the Clearing Member / Exchange / Custodian, at your discretion. In case any of the shares / securities are sold in a subsequent settlement, you may take this as a standing instruction to adjust against my/our previous purchase position in and of the Exchanges.
2. Whenever I / we require delivery of any shares / securities, I / we shall send you a written request. I / we understand that such payout of securities will be subject to your risk management policies.
3. In case there is debit in my / our account, you are authorized to sell at any point of time the share / securities held by me / us held on my / our behalf, at your sole discretion. Any profit or loss made on such transactions will be to my/ our account as it would have occurred in the normal purchase / sale made by me/us. I /we also agree to pay the balance amount, if any after deducting credit of sale of shares.
4. I / we request you to retain funds lying to my / our credit in running account as margin / pay-in /other-future obligation(s) at any segment (s) of any or all the Exchange (s)/Clearing Corporation unless I/we instruct you to transfer the same to my / our account.
5. In case I /we have an outstanding obligation on the settlement date, you may retain the requisite funds towards such obligation and may also retain the funds expected to be required to meet margin obligation for next 5 trading days, calculated in the manner specified by the exchanges.
6. The stock broker is authorize to transfer funds & /or securities from his / her / its account to one exchange & / or one segment of the exchange to his / her / its account for another exchange & / or another segment of the same exchange whenever applicable and found necessary by the stock broker. The client also agree and authorize the stock broker to treat / adjust his / her / its margin / security lying in one exchange & / or one segment of the exchange towards the margin / security / pay in requirements of another exchange & / or another segment of the exchange.
7. I/we request you to settle my fund and securities account  once in every Calendar Quarter or  once in a every Calendar Month of such other higher period as allowed by SEBI / Stock Exchange time to time except the funds given towards collateral / margin in form of Bank Guarantee and / or Fixed Deposit Receipt.
8. I / we confirm you that I will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 30 working days from the date of receipt of funds / securities or statement of account or statement related to it, as the case may be at your registered office.
9. I / We further authorize you to retain an amount of upto Rs. 10000/- (Ten Thousand Only) "either in the form of funds or securities" and it should be applicable on net amount across segment and across stock exchanges in order to avoid administrative / operational difficulties at the time of actual settlement of funds and securities."

The running account authorization provided by me shall continue and remain valid until it is revoked by me anytime in writing.

Thanking you

Yours faithfully



(Signature)

Client Name \_\_\_\_\_

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

I/We have been / shall be dealing through you as my / our broker on the Capital Market and/ or Futures & Options Segments / Currency Derivative Segments, This instruction is applicable for all the exchanges / segments in which I/we have opened account with you. As my/our broker / agent I/We direct and authorised you to carry out trading / dealings on my/our behalf as per instructions given below.

I/ We understand that, I / we have the option to receive the contract notes in physical form or electronic form. In pursuance of the same, I/we hereby opt for receipt of contract notes in electronic form. I/ We hereby also give my/our consent for providing me/ us Trade Confirmations through your SMS alert services. Accordingly, please note my current email id and Mobile Number on your record for sending the communication to me / us.

Email Id:.....

Mobile No.:.....

I/We understand that I am required to intimate any change in the email id/ mobile number mentioned herein above through a duly signed request letter in original to you, provided however that if I/we am/are an internet client then in that event the request for change in email id/ email account can be made by me/us through a secured access using client specific user id and password. Please treat this authorization as written ratification of my / our verbal directions / authorizations given and carried out by you earlier. I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my / our directions given above.

Thanks and best regards



(Signature)

Client Name \_\_\_\_\_

**Declaration for Name difference in PAN CARD and / or Bank Pass Book**

I \_\_\_\_\_ S/o, D/o, W/o \_\_\_\_\_ residing  
at \_\_\_\_\_ do hereby state as under:-

I refer to my account opening application for a Trading Account with SS Corporate Securities Limited in the name of \_\_\_\_\_.

I do hereby affirm, declare and undertake as under:-

1. That my name as it appears on the PAN CARD is \_\_\_\_\_ and on Driving License is \_\_\_\_\_.
2. That my name as it appears on the IT website <http://incometaxindiaefiling.gov.in/challan/enterpanforchallan.jsp> is \_\_\_\_\_.
3. That my name as it appears on the Bank Pass Book is \_\_\_\_\_.
4. That all the names mentioned above, i.e. the name mentioned on the PAN CARD, the name mentioned on the Bank pass Book and the name as it appears on the I T website pertains to me. Any losses, claims, liabilities, obligations, damages, deficiencies, judgments, actions, suits, proceedings due to these name differences will be mine and I only will be solemnly responsible for the same.
5. That I shall indemnify & keep indemnified SS Corporate Securities Limited, its directors, officers, employees and agents from and against any and all losses, claims, liabilities, obligations, damages, deficiencies, judgments, actions, suits, proceedings or any liability suffered or incurred or fastened on to SS Corporate Securities Limited due to SS Corporate Securities Limited accepting this Declaration cum Undertaking and acting on the same.

That the contents of this Declaration have been explained to me in vernacular and I have understood the same before signing it.

That this Declaration given by me to SS Corporate Securities Limited is given by me without any force, undue influence and at present I am having sound health and mind.

Client Signature :

Client Name :

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

Place :

Date :

(1st / 2nd / 3rd Holder has to submit separately in case of Joint Accounts)

Dear Sir,

Date.....

**Sub: Letter of Authority - CASH/F&O/Currency Derivative Segment of NSE/BSE/MSEI**

I/We are dealing in securities with you at NSE/BSE/MSEI in Cash, Derivative & Currency Segment and in order to facilitate ease of operations, I/We authorize you as under:

1. I/We authorize you to setoff outstanding in any of our accounts against credits available or arising in any other accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the Exchange or in any other exchanges and/or against the value of cash margin or collateral shares provided to you by us.
2. I/We request you to consider my/our telephonic instructions for order placing/order modification/order cancellation as a written instruction and give me/us all the confirmation on telephone unless instructed otherwise in writing. I/We am/are getting required details from contracts issued by you.
3. I/We will collect from your office Contract Notes, Bills, Securities, etc. as per our convenience.
4. I/We request that you may send/dispatch me/us contract notes other documents through E-mail: on my/our designated e-mail address of \_\_\_\_\_
5. It is understood that I am/we are entitled to receive following documents with regard to our dealings with you:
  - Contract notes within 24 hours
  - Quarterly statement of account (funds and securities)
  - (30<sup>th</sup> June, 30<sup>th</sup> September, 31<sup>st</sup> December and 31<sup>st</sup> March)**
6. I/We confirm that I/we will never sublet the trading terminal on any term of connectivity, from my/our place to any other place without your prior approval.
7. I/We have a Trading As well as depository relationship with **SS Corporate Securities Limited** Please debit the charges relevant with depository services from my/our trading account on monthly basis. I/We also agree to maintain the adequate balance in my trading account/pay adequate advance fee for the said reasons.

We have read the Risk Disclosure Documents as prescribed by SEBI/NSE/BSE/MSEI for Capital Market as well as for Future & Options Segment, Currency Derivatives Segment and have clearly understood the contents. We have also noted our rights and obligations as an investor and we undertake to timely and appropriately exercise our rights and fulfill our obligations.

We have visited the Internet sites of NSE (nseindia.com), BSE (bseindia.com), MSEI (mset.in) and SEBI (sebi.gov.in) have gone through various investor education contents (practices procedures and usage on the Indian capital markets) as well as Risk Disclosure Contents provided thereon. We have understood the risks as well as our rights and obligations as an investor with regard to our dealings with you. We shall continue to update ourselves on these matters by visiting these sites regularly.

Thanks and best regards.



(Signature)

Client Name \_\_\_\_\_

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

**SS Corporate Securities Limited**NDM 2, Block D, 3<sup>rd</sup> Floor

Netaji Subhash Place

Pitam Pura Delhi-34

Sub: Mutual Fund Service System (MFSS AND BSE STAR MF) facility

I/We \_\_\_\_\_ am/are registered as your client with Client Code No. \_\_\_\_\_ and have executed the Trading Member and Client Agreement for the purpose of trading in the Capital Market segment of National Stock Exchange of India Ltd. (Exchange).

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

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

I/We are willing to abide by the terms and conditions as mentioned in the Circular dated Dec 2, 2009 and as may be specified by the Exchange from time to time in this regard.

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

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

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

Thanking you,

Yours faithfully,



Signature

Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## FORMAT OF BOARD RESOLUTION IN CASE OF COMPANY / FIRM (ON LETTER HEAD)

Certified True Copy of the Resolution passed in the meeting of Board of Directors of.....Ltd. held on.....(DATE) at.....(Regd Address of the company)  
 "RESOLVED THAT the Company is empowered to deal in Capital Market / Derivatives/Currency Derivatives and any other segment that may be introduced by the NSE/BSE/MSEI/KRA and do enter into agreement for online investment products facility with SS Corporate Securities Ltd., a member of the National Stock Exchange Limited (NSE), BOMBAY STOCK EXCHANGE (BSE) (MSEI), & KRA and the said trading members be and is hereby authorised to deal for trading or instruction, oral or written, given on behalf of the Company by any of the under noted authorised signatories.

S.No.	Name	Designation

who is/are authorised to sell, purchase, trading, transfer, endorse, and negotiate document and / or / otherwise deal through SS Corporate Securities Ltd. in Capital Market, Derivatives (F & O, CD) Segment, Investment in securities market and other segments that may be introduced by the trading member of the Exchange time to time.

RESOLVED FURTHER THAT Mr.....and/or Mr....., Authorised Signatory of the Company whose specimen signatures are attested below be and are hereby severally / jointly authorised to sign, execute and submit application, submit such online investment products facility registration open account and give effect to this resolution.

"Further resolved that the above resolution be communicated to SS Corporate Securities Ltd. and shall remain in force until the same is cancelled or modified by the Board of Directors, by another resolution that is communicated to SS Corporate Securities Ltd.

True Certified Copy

for.....

Director / Company Secretary (along with rubber stamp)

Specimen Signatures of the Authorised Persons			
S.No.	Name	Designation	Specimen Signatures

### LIST OF AUTHORISED SIGNATORY (If more than one you may provide accordingly)

Specimen Signatures of the Authorised Persons			
S.No.	Name	Designation	Specimen Signatures

True Certified Copy

for.....

Director / Company Secretary (along with rubber stamp)

### LIST OF DIRECTORS (If more than four, you may provide accordingly)

S.No.	Name	Address	DIN No.	PAN No.	Designation
1					DIRECTOR
2					DIRECTOR
3					DIRECTOR
4					DIRECTOR

True Certified Copy

for.....

Director / Company Secretary (along with rubber stamp)

### LIST OF SHAREHOLDER (If more than four, you may provide accordingly)

S.No.	Name	No. of shares	Face Value	Total Capital (Rs.)	%age
1					
2					
3					
4					
	TOTAL				

True Certified Copy

for.....

Director / Company Secretary (along with rubber stamp)

