



KYC REGISTRATION APPLICATION NON-INDIVIDUAL

Name of Client: _____

Client Code: _____

TRUST FINANCIAL CONSULTANCY SERVICES PRIVATE LIMITED

CIN: U67120MH2002PTC135942

SEBI Registration No.: INZ000238639

Corporate Office: 1101, Naman Centre, BKC, Bandra (E), Mumbai – 400051.

Phone: 91 22 4084 5000 Fax:022 4084 5013, 4084 5007

Regd. Office: 109/110, Balarama, BKC, Bandra (E), Mumbai – 400051.

For any grievance/dispute please contact Trust Financial Consultancy Services Private Limited at the above address or email id rajesh.nag@trustgroup.in /grievances@trustgroup.in

www.trustgroup.in

Name of Stock Broker / Trading Member / Clearing Member	Trust Financial Consultancy Services Pvt. Ltd. (TFCS)		
SEBI Registration No.	INZ000238639		
Date of Registration	March 13, 2019		
Membership Code,	NSE Member Code No. 11987	BSE Member Code No. 3284	MSEI Member Code 70500
Clearing Member NSE F&O Segment	Stock Holding Corporation of India Limited Regd. Office: Unit No.301, 3rd Floor, Peninsula Center Point, OppBharatmata Cinema,Dr. BabasahebAmbedkar Road, Parel, Mumbai - 400012 Phone: 91-22-6177 8068 / 8070 / 8073 Fax: 91-22-6177 8066, SEBI Regn Number :- INZ000241237		
Clearing Member NSE, BSE & MSEI Interest Rate Future Segment	Axis Bank Ltd., Jeevan Prakash Building, Sir P.M. Road, Fort, Mumbai 400001. Tel. No.+91 22 40867520/25		
Registered Office Address	109/110, Balarama, 1st Floor Village, Parigkhari, Bandra Kurla Complex, Bandra (East), Mumbai: 400 051. Ph: 022-4062 6000 Fax:022-4084 5013, 4084 5007		
Correspondence office address	1101, Naman Centre, G – Block, C – 31, B.K.C, Bandra East – Mumbai –400 051. Ph:022-40845000, Fax:022-4084 5013, 4084 5007.		
Compliance officer Name, phone no. & email id	Mr. Rajesh Nag Tel No : 022-4084 5072 Fax: 022-4084 5013, 4084 5007. Email Id: rajesh.nag@trustgroup.in		
<p>For any grievance/dispute please contact Trust Financial Consultancy Services Private Limited at the above address or email id grievances@trustgroup.in and Phone no. 022 - 4084 5072 In case not satisfied with the response, please contact the concerned exchange(s) at ignse@nse.co.in and phone no. 022 - 2659 8190/ 18002660058 for NSE and is@bseindia.com and Phone no. 022 - 2272 8016 / 4355 0218 for BSE and investcomplaints@msei.in, and phone no. 022-61129028 for MSEI. If not satisfied with response or your grievance is still unresolved you may register complaint to SEBI on the SCORES website (link: https://scores.gov.in/scores/Welcome.html)</p> <p>Trust Financial Consultancy Services Private Limited is also doing proprietary trading in debt / equity securities.</p>			

INDEX OF DOCUMENTS

Sr. No.	Name of the Document	Brief Significance of the Document	Page No.
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES			
1	Account Opening Form	A Client Authorisation for fetching KYC Documents from KRA	4-15
		B KYC form- Document captures the basic information about the constituent and an instruction/check list.	
		C Document captures the additional information about the constituent	
2	Brokerage / Tariff sheet	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s)	
3	Policies and Procedures	Document describing significant policies and procedures of the stock broker	GIVEN TO CLIENT THROUGH SEPARATE HANDBOOK
4	Rights and Obligations	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.	

VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER			
Sr. No.	Name of the Document		Page No.
7	PMLA Investor's Education Write Up (To educate clients on Anti Money Laundering (AML) Norms)		GIVEN TO CLIENT THROUGH SEPARATE HANDBOOK
8	Voluntary Authorization Letter		16-18
9	SMS and Email Alerts to Investors by Stock Exchanges		19
10	FATCA and CRS Self Certification for Non-Individuals		20
11	Demat debit pledge Instruction		21-22
12	Aadhar Consent Form		23
13	Confirmation of Receipt of Executed Document		25

INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM**MANDATORY****A. IMPORTANT POINTS:**

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

B. Exemptions/clarifications to PAN

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

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.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50, 000/- p.a.
5. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

C. List of people authorized to attest the documents:

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

CHECK LIST FOR FILLING KYC FORM

(Please tick against documents provided)

MANDATORY

Types of entity	Documentary requirements
Proof of Identity (POI):	<input type="checkbox"/> Unique Identification Number (UID) (Aadhaar) <input type="checkbox"/> Passport <input type="checkbox"/> Voter ID card <input type="checkbox"/> Driving license. <input type="checkbox"/> PAN card with photograph. <input type="checkbox"/> 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.
Proof of Address (POA):	(*Documents having an expiry date should be valid on the date of submission.) 1. <input type="checkbox"/> Passport <input type="checkbox"/> Voters Identity Card <input type="checkbox"/> Ration Card <input type="checkbox"/> UID/Aadhar Card <input type="checkbox"/> Registered Lease or Sale Agreement of Residence/ Driving License/ Flat Maintenance bill/ Insurance Copy. 2. <input type="checkbox"/> Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill (Not more than 3 months old). 3. <input type="checkbox"/> Bank Account Statement/Passbook (Not more than 3 months old). 4. <input type="checkbox"/> Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts. 5. <input type="checkbox"/> 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. 6. <input type="checkbox"/> 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. 7. <input type="checkbox"/> For FPI/FII/sub account, Power of Attorney given by FI I/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address. 8. <input type="checkbox"/> The proof of address in the name of the spouse.
Bank Account Proof:	<input type="checkbox"/> 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
Demat Account Proof:	<input type="checkbox"/> Demat master or recent holding statement issued by DP bearing name of the client.

Non-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.
- c) Form need to be initialized by all the authorized signatories.
- d) Copy of board resolution or declaration (on the letter head) naming the persons authorized to deal in securities on behalf of company /firm/others and their specimen signatures.
- e) For activation of derivatives segment please provide any one of the documents from given below. 6 Months Bank Statement, Demat Holding Statement, Copy of ITR Acknowledgement, Net worth Certificate obtained from a Chartered Accountant or Any other certificate or document demonstrating your financial net worth. Copy of Audited Annual Accounts, 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.

In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, as mentioned below: (please tick against documents provided)

Types of entity	Documentary requirements	MANDATORY
Corporate	<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 yr). <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.	
Partnership Firm	<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.	
Trust	<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.	
HUF	<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"/> POI, POA, PAN of Karta.	
Unincorporated Association or a body of individual	<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"/> Authorized signatories list with specimen signatures	
Banks / Institutional Investors	<input type="checkbox"/> Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. <input type="checkbox"/> Authorized signatories list with specimen signatures.	
Foreign Institutional Investors (FII)	<input type="checkbox"/> Copy of SEBI registration certificate. <input type="checkbox"/> Authorized signatories list with specimen signatures.	
Army / Govt Bodies	<input type="checkbox"/> Self-certification on letterhead. <input type="checkbox"/> Authorized signatories list with specimen signatures.	
Registered Society	<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 chairmen /secretary	

KYC REGISTRATION (If client is KRA Compliant)

To,
M/s Trust Financial Consultancy Services Pvt. Ltd. (TFCS)
SEBI Registration No. INZ000238639,
Mumbai.

NAME :	
PAN :	Date of Birth/Incorporation :
FATHER's NAME :	
MOTHER's NAME :	
STATUS : Private Limited Co. / Public Ltd. Co. / Partnership / Trust / HUF / LLP	
ADDRESS :	

I/We authorize TFCS to fetch my/our kyc details available with KRA. I/We also request you to please consider the details fetched for account opening purpose.

 **1**

Date:

Place:

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TRUST FINANCIAL CONSULTANCY SERVICES PRIVATE LIMITED

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SEBI Registration No.: INZ000238639

Corporate Office: 1101, Naman Centre, BKC, Bandra (E), Mumbai – 400051.
Phone: 91 22 4084 5000 Fax:022 4084 5013, 4084 5007



NON-INDIVIDUAL CLIENT REGISTRATION FORM

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Legal Entity /Other than Individuals

Important Instructions

- A) Fields marked with '*' are mandatory fields. F) List of State I U.T code as per Indian Motor Vehicle Act,1988 is available at the end
B) Tick '✓' whenever applicable G) List of two character ISO 3166 country codes is available at the end
C) Please fill the date in DD-MM-YYYY format. H) Please read section wise detailed guidelines I instructions at the end.
D) Please fill the form in English and in BLOCK letters 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

(To be filled by financial institution)

Application Type* New Update
KYC Number (Mandatory for KYC update request)
Account Type* Normal Simplified (for low risk customers) Small

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 I Formation* DD - MM - YYYY Date of Commencement of Business DD - MM - YYYY
Place of Incorporation I Formation* Country of Incorporation I Formation* TIN or Equivalent Issuing Country
PAN* Form 60 furnished
TIN I GST Registration Number

2. PROOF OF IDENTITY (PoI)' (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 I 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 I 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



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Phone: 91 22 4084 5000 Fax:022 4084 5013, 4084 5007



Annexure A2 1 Legal Entity I Other than Individuals

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person (Please add additional sheet, if required)

Important Instructions

- A) Fields marked with '*' are mandatory fields. F) List of State I U.T code as per Indian Motor Vehicle Act,1988 is available at the end
B) Tick '✓' whenever applicable. G) List of two character ISO 3166 country codes is available at the end
C) Please fill the date in DD-MM-YYYY format. H) Please read section wise detailed guidelines I instructions at the end.
D) Please fill the form in English and in BLOCK letters. 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

(To be filled by financial institution)

Application Type* New Update
KYC Number (Mandatory for KYC update request)
Account Type* Normal Simplified (for low risk customers) Small

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 mandat01)
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)

Name* (Same as ID proof)	Prefix	First Name	Middle Name	Last Name
Maiden Name (If any*)	Prefix	First Name	Middle Name	Last Name
Father / Spouse Name*	Prefix	First Name	Middle Name	Last Name
Mother Name*	Prefix	First Name	Middle Name	Last Name

Date of Birth:

Gender* M - MALE F - Female T - Transgender

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

PAN* 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

PHOTOGRAPH
WITH
SIGNATURE
ACROSS

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 III Offline verification of Aadhaar IV Deemed POA

V Self Declaration

AddressLine 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.

Place: _____ Date: _____

Signature of Applicant  **4a** **3. ATTESTATION I 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

KYC VERIFICATION CARRIED OUT BY

Date _____

Emp. Name _____

Emp. Code _____

Emp. Designation _____

Emp. Branch _____

[Employee Signature]

INSTITUTION DETAILS

Name Trust Financial Consultancy Services Pvt Ltd

Code IN0946

[Institution Stamp]

ADDITIONAL TRADING ACCOUNT RELATED DETAILS**FINANCIAL DETAILS****Gross Annual Income Details Income Range per annum : (In Rs.)**

Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs 25-50 Lacs 50 Lacs-1 Cr More than 1 Cr

Net worth with date (should not be older than 1 year) **(Mandatory)**

Rs. _____ Date:/...../.....

Nature of Business (please tick any one and give brief details)

Agriculture Gems & Jewellery Money Lending Forex Dealer
 Real Estate Export-Import Casino Owner Manufacturing Service
 Industry Trading Firm Arms Manufacturer Pawn Broker Investment
 Others (Please Specify) _____

Please tick, if applicable : PEP RPEP

BANK ACCOUNT(S) RELATED DETAILS


Sr. No.	Bank Name and Branch Address	Account Type (Saving/Current/ Others In case of NRI/NRE/NRO)	Account No.	MICR Number	IFSC code
1					
2					

DEPOSITORY ACCOUNT(S) DETAILS

Sr. No.	Depository Participant Name	Depository Name (NSDL/CDSL)	Beneficiary Name	DP ID	Beneficiary ID (BOID)
1					
2					

TRADING PREFERENCES

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

Exchange	NSE & BSE	NSE	NSE & BSE	NSE & BSE
All Segments	Cash	F&O	Debt	Interest Rate Future
				

If you do not wish to trade in any of segments / Mutual Fund, please mention here _____.

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:	
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DEALINGS THROUGH AUTHORISED PERSONS AND OTHER STOCK BROKERS

If client is dealing through the Authorised Persons, provide the following details:

Name of Authorised Persons		BSE Reg No .
Regd office		NSE Reg No .
Address		MSEI Reg No
		Tel No
		Fax No
		Web Site

Whether dealing with any other Stock Broker/Authorised person (if case dealing with multiple stock brokers/Authorised persons, provide details of all)

Name of stock broker		Name of Authorised Persons (if any)		
Client Code		Exchange:		

Details of disputes/dues pending from/to such stock broker/Authorised person _____

ADDITIONAL DETAILS

Whether you wish to receive physical contract note or Electronic Contract Note (ECN)	Physical
Specify your Email id	
Whether you wish to avail of the facility of internet trading/ wireless technology (please specify) :	
Number of years of Investment/Trading Experience :	
Any Other Information:	

INTRODUCER DETAILS (optional)

Name of the Introducer -	Signature of the Introducer
Add /Tel No. of the Introducer -	
Status Of The Introducer Remisier/Authorized Person/Existing Client/others, Please Specify	

Document detailing the rate/amount of Brokerage and other charges levied on the client for trading on the stock exchange(s)

TARIFF SHEET (Brokerage)

	Intraday Transactions				Expiry		Delivery Settlement	
	1st Leg		2nd Leg		%	Minimum	%	Minimum
	%	Minimum	%	Minimum				
Cash Equity								
Futures (Equity)								
Options (Equity)								
Futures (IRF)								
Futures (Currency)								
Other Statutory Charges								
	Cash Rate			F&O / Currency / IRF contracts Rate				
GST	• As Applicable			• As Applicable				
Stamp Duty	• As Applicable			• As Applicable				
Transaction Charges	• As Applicable			• As Applicable				
SEBI Fees	• As Applicable			• As Applicable				
STT	• As Applicable			• As Applicable				

All statutory charges will be charged on actual (securities Transaction Tax, Services Tax, Turnover Tax, Stamp Duty and other Statutory Levies)

The company reserves the right to change pricing (brokerage and other levies) from time to time with prior intimation in writing and mutually agreed upon

TFCS does not accept any fees / payment / charges in Cash. Please do not make any payment in cash.

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.

✕ 6

.....

Place:

Name of the Client: _____

Date:/...../.....

VOLUNTARY

Date:/...../.....

To,
Trust Financial Consultancy Services Pvt. Ltd. (TFCS)
 109/110, Balarama, BKC, Bandra (E), Mumbai – 400051.

Dear Sir / Madam,

Subject : Voluntary Authorisation Letter**1. Authorisation for Periodic Settlement of Funds and Securities:** Yes No

(By ticking on YES you authorize TFCS to maintain the Trading Account as Running Account thereby adjusting any obligations and receivables.)

I/We_____having Client Code _____ are dealing through you as a client for BSE/ NSE/MSEI in Capital Market and / or Future & Option segment and / or Currency Derivatives Segment & in order to facilitate ease of operations and upfront requirement of margin for trade. I / We authorize you as under:

1. I / We request you to maintain running balance in my account & retain the credit balance in any of my / our account and to use the unused funds towards my / our margin / pay-in / other future obligation(s) at any segment(s) of any or all the Exchange(s) / Clearing corporation unless I/we instruct you otherwise.
2. My/our preference for periodic settlement of funds and securities is as follows:-
 - a. Monthly
 - b. Quarterly
3. In case I / We have an outstanding obligation in derivative market on the settlement date, apart from margin liability you may retain additional margins (maximum up to 125% of margin requirement on the day of settlement) to take care of any margin obligation arising in next 5 trading days.
4. I am / We are aware that in terms of SEBI Circular no. SEBI/HO/MIRSD/DOP/P/CIR/2021/577 date June 16, 2021, any credit balance in the account, in case of no transaction in the 30 calendar days since the last transaction, the credit balance will be released to me / us, within next three working days irrespective of the date when the running account was previously settled. This clause will prevail over the Month / Quarter preference selected by me / us for settlement.
5. In respect of Cash Market transactions, you may retain entire pay-in obligation of funds due from me/ us as on date of settlement. Further, for next day's business, you may retain funds / margin to the extent of value of transactions executed on the day of such settlement in the cash market only.
6. I/We confirm you that I/We will bring to your notice any dispute arising from the statement of account or settlement so made in writing preferably within 7 working days from the date of receipt of funds and securities or statement of account or statement related to it, as the case may be at your registered office.
7. I/We request you to keep my/our funds with you to meet my/our pay in obligations in the succeeding settlements in the same segment as well as other segments of BSE and/or NSE and/or MSEI where I/ We am/are registered with you as a Client.
8. Further it is observed that many times the date on which payment is due to me/us from you and the date which I am/ we are required to make payment to you are very close and therefore exchange of cheques become unnecessary paper work. Hence, I/We request you to maintain the running account facility with you. I/We agree that you shall not be required to pay any interest/ charges/ cost in respect of funds on a running account basis.

9. I/We hereby give my/our consent for periodic settlement of my /our funds.
10. I/We declare that this authorisation is revocable by me/us at any time without giving any prior notice of such revocation to Trust Financial Consultancy Services Pvt. Ltd.
11. I/We agree that for any pay outs from my trading account, I/We specifically shall intimate about the same and Trust Financial Consultancy Services Pvt. Ltd. shall upon due scrutiny of my account and upon adherence to its policy/procedure, shall release eligible amount to me/us. I/We agree that this authorisation shall have an equal binding effect to the successors, executors and assigns of Trust Financial Consultancy Services Pvt. Ltd..
12. I/We hereby authorise you to transfer/adjust all the additional funds lying in my/our ledger account after meeting my obligations/dues, to the collateral account to avail exposure or keep all funds in your margin account with you to meet my margin obligations or keep the same with any exchange and/or with clearing member in the form of fixed deposit or any other form to avail exposure/meet margin requirements. This arrangement would be without any consideration or the funds so moved will not bear any interest/commission payable to me/is in the event of above arrangement.

Note: To be signed by client himself/herself and not by his/her attorney/authorized person etc.

2. Authorization for receiving any documents/communications in electronic form by E-mail from the Stock Broker : Yes No

(By ticking on YES you authorize TFCS to send all important communication like notices, Statement of accounts for funds and securities, circulars etc. from TFCS by mail or SMS)

I am registered as a Client and having the captioned trading account hereby authorize TFCS for the following:

- a) I/we authorize TFCS to issue me/us bills, trade confirmations, ledgers, daily margin statements, statement of accounts for periodical settlement of funds and securities, any notices, circulars, amendments and such other correspondence or communication related to my/our trading account (hereinafter referred to as "Documents") and wherever required duly authenticated by means of a digital signature as specified in the information technology Act, 2000 and the rules made there under to the E-mail ID as mentioned hereunder:
- b) I/We understand that the documents received on e-mail are for my/our convenience. I/we will take all the necessary steps to ensure confidentiality and secrecy of the login name & password of the email account. I / we are aware that the documents as may be accessed by other entities in case the confidentiality/ secrecy of the login name and password is compromised.
- c) I/We shall verify the authenticity of the e-mails which I/we shall receive. TFCS shall not be responsible, if I/we do not receive the documents due to incorrect email ID and/or technical reasons
- d) I understand that wherever the e-mails have not been delivered to me or has been rejected (bouncing of mails) from the e-mail ID of mine, TFCS would send physical document to me. I further hereby agree that TFCS have fulfilled the legal obligation, if the above documents are sent electronically to the abovementioned e-mail ID. I agree that TFCS will not be responsible for non receipt of documents sent via electronic delivery due to change in email address or for any other reason which inter alia include my email/inbox running out of capacity, malfunction of my computer system/server/internet connection, mails received by frauds/imposters etc. I also agree that TFCS shall not take cognizance of out-of office/ out-of-station auto replies and I shall be deemed to have received such electronic mails. I shall inform TFCS in writing if there is any change in my registered e-mail ID_____

3. Authorisation for Transfer of Funds and / or Securities, Inter Segment and Inter Exchange : Yes No

I / We hereby authorize you as under:

1. To transfer funds and/or securities from my / our account in one segment against my / our obligations in another segment in the same Exchange or different Exchange.
2. To transfer funds and/or securities from my / our account in one segment against collaterals / margins for my / our trade in another segment in the same exchange or different exchange.
3. I / we am / are aware that the funds means monies that is lying as credit in my / our account or pay - outs that are to be received from the exchanges arising out of sale securities. Similarly, I / we am / are aware that securities means, shares lying with you, on my / our behalf. margin. In case if I / we wish to withdraw this authorisation, I / we shall inform you in writing and acknowledge by you at least 15 days in advance from the date of withdrawal.

4. Acceptance of securities as collateral for any or all segment(s) : Yes No

I/ We, _____ (PAN - _____)
having my/our Trading Account with do hereby provide my / our consent/ authorisation to further pledge /deposit my/our securities lying with you or in my/our Beneficial account (Demat Account No) with the clearing member / clearing corporation for additional exposure availed by me / us during the period of my relationship with you.

I/ We hereby declares and assure that

1. the said Securities are owned by me/us,
2. the Said Securities are in existence and are free from any charge, lien or encumbrance, whether prior or otherwise,
3. the Said Securities will be subject to the creation of pledge in favour of or for the benefit of Clearing corporation and further that the Securities over which pledge may be created in future would be in existence and owned by me/us at the time of creation of such pledge and that the Said Securities to be given in future as security to clearing corporation would likewise be unencumbered, absolute and disposable property of the clients
4. TFCS or its Clearing Member is authorized to do all such acts and things, sign such documents and pay and incur any such costs, debts and expenses as may be necessary and the same shall be subject to terms and conditions as contained herein
5. the Securities are subject to the first priority and lien in favour of Clearing corporation to secure, my/ our obligations and that my/our rights or interests with respect to the Said Securities shall be subject and subordinate to the rights, claims and interests of Clearing corporation in respect of the Said Securities
6. Clearing corporation may invoke the pledge without my reference or permission and upon receipt of the Said Securities, Clearing corporation may utilize the proceeds in meeting my/our obligations in such manner as it may deem fit and that such invocation of pledge will be final and irrevocable against the Clearing Member and me / us.
7. I/We shall not make any claims or demands for refund or any reimbursement in relation to the Said Securities.
8. I/we hereby confirm that I/we read the terms and conditions to this effect and fully aware of the consequences of the same.

Client Code: _____

Name _____ Signature  7 _____

Place: _____

Date: _____

VOLUNTARY**Opting for SMS and Email Alerts to Investors by Stock Exchanges**

I / We _____ having PAN _____ do hereby opting for the following facilities offered by Trust Financial Consultancy Services Pvt. Ltd. and/or Stock Exchanges:

SMS Email SMS and Email Both

(Please tick the appropriate box / facility opted)

The following is my/our Mobile Number and / or Email Address:

Mobile No. _____, Email Address: _____

I declare that mobile number _____ is in my name or in the name of my family member _____ (mention name and the relationship) having PAN _____.

Further, I declare that Email Address mentioned above is of my or in the name of my family member _____ (mention name and the relationship) having PAN _____.

In case of any changes in the above mentioned mobile number/ email address, I/we will inform you immediately in writing. This number / email address can be used for giving any information/alert/SMS.

 **8**

.....

Client Name: _____

Client Code: _____

[Note: To be signed by client himself/herself and not by his/her attorney/authorized person etc.]

The following Family member's mobile number or email id is allowed to be incorporated:

Self, Spouse, Dependent Children and Dependent Parents.

FATCA AND CRS SELF CERTIFICATION FOR NON-INDIVIDUALS

[MANDATORY for Non-Individual Investors] Please turn over for Definitions / Instructions / Guidance
(Please consult your professional tax advisor for further guidance on your tax residency, if required)

APPLICANT DETAILS

Applicant Name:																	
PAN						Application No						Folio Nos					
Type of address given at KRA	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office																

INCORPORATION and TAX RESIDENCY DETAILS (Mandatory)

Place of Incorporation:	Country of Incorporation:	Date of Incorporation:
Is Entity a tax resident of any country other than India? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below)		

	Country of Tax Residency	TIN or equivalent number^	Identification Type (TIN or Other, please specify)
1			
2			
3			
4			

^ 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 (as per definition E5), please mention the exemption code in the box (Refer instruction D4):

FATCA and CRS DETAILS (Mandatory)

(Please consult your professional tax advisor for further guidance on FATCA & CRS classification)

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

We are a, (Please ✓ as appropriate) :	GIIN
<input type="checkbox"/> Financial Institution (Refer definition A) or	Note: If you do not have a GIIN (Global Intermediary Identification number) but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below
<input type="checkbox"/> Direct reporting NFE (Refer definition B)	
GIIN - Not Available (Please ✓ as appropriate) If the entity is a financial institution	Name of sponsoring entity: <input type="checkbox"/> Applied for <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <input type="checkbox"/> Not obtained – Non-participating FI

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

Is the Entity a publicly traded company? No <input type="checkbox"/> (that is, a company whose shares are regularly traded on an established securities market) (Refer definition D1)	Yes <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange _____
Is the Entity a related entity of a publicly traded company? No <input type="checkbox"/> (a company whose shares are regularly traded on an established securities market) (Refer definition D2)	Yes <input type="checkbox"/> (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: <input type="checkbox"/> Subsidiary of the Listed Company OR <input type="checkbox"/> Controlled by a Listed Company Name of stock exchange _____
Is the Entity an Active NFE? No <input type="checkbox"/> (Refer definition D3)	Yes <input type="checkbox"/> Also provide UBO Form Nature of Business _____ Please specify the sub-category of Active NFE <input type="checkbox"/> (Mention code - refer D3)
Is the Entity a Passive NFE? No <input type="checkbox"/> (Refer definition E2)	Yes <input type="checkbox"/> Also provide UBO Form Nature of Business _____

If Passive NFE, please provide the below additional details for each of the Controlling person. (Please attach additional sheets if necessary)


Sr. No.	Name of UBO	Taxpayer Identification Number / PAN / Equivalent ID Number	Place of Birth	Country of Birth	Occupation Type [Service, Business, Others]	Nationality	Father's Name	Date of Birth dd/mmm/yyyy	Gender [Male, Female, others]
1									
2									
3									

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

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

If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification No. \$It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

DECLARATION & SIGNATURE(S)

I acknowledge and confirm that the information provided with respect to FATCA / CRS is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I am aware that I will be responsible for it. I authorize the Fund to update its records from the FATCA / CRS information provided by me and received by the Fund from other SEBI Registered Intermediaries. Further, I authorize the Fund to share the given information provided by me to the Fund with other SEBI Registered Intermediaries to facilitate single submission / updation. I also undertake to keep the Fund informed in writing about any changes / modification / updation to the above information in future and also undertake to provide any other additional information as may be required at the Fund's end and / or by the domestic tax authorities. I authorize the Fund / AMC / RTA to close or suspend my account(s) under intimation to me for non-submission of documentation.	 9
Date : ____/____/____ Place: _____	Authorized Signatories [with Company / Trust / Firm / Body Corporate seal]

DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI)**To,**

Trust Financial Consultancy Services Pvt. Ltd.
 1101, Naman Centre, BKC,
 Bandra (E),
 Mumbai – 400051.

Dear Sir,

I/We the Joint Account Holders, do herewith nominate and appoint Trust Financial Consultancy Services Pvt. Ltd. acting through any of its officers, employees or any agents to be my/our true and lawful agent and attorney for me/us and on my /our behalf and in my name from time to time to do and exercise or cause to be done and exercise following acts through Demat Debit and Pledge Instruction (DDPI).

UCC : _____**Client Name :** 1) _____

2) _____

3) _____

Client's DepositoryAccounts :

Sr. No.	Depository	DP Name	DP ID	Client ID

Description of Demat/Pool / MarginAccounts

Exchange	A/C Type	Purpose	DP NAME	DP ID	Client ID
NSE/BSE	Pool	Pay – In	IndusInd Bank Ltd.	IN300159	10863636
NSE/BSE	Pool	Pay – In	IndusInd Bank Ltd.	13029500	00013034
BSE	Principal A/c		IndusInd Bank Ltd.	13029500	00013211
NSE/BSE	Client Securities Margin Pledge Account	Margin Pledge for F&O segment (NSDL)	IndusInd Bank Ltd.	IN300159	11336070
NSE/BSE	Client Securities Margin Pledge Account	Margin Pledge for Cash and F&O Segment (CDSL)	Stock Holding Corporation of India Limited	16010100	00468420
NSE/BSE	Client Securities Margin Pledge Account	Margin Pledge for Cash Segment (NSDL)	Stock Holding Corporation of India Limited	IN301330	40370323

CM BP ID NSE: IN516553

CM BP ID BSE: IN632848

I/We the Joint Account Holders do herewith confirm that I/we are aware that DDPI is optional and I/we can opt to complete the settlement by issuing the Physical Delivery Instruction Slip (DIS) or electronic Delivery Instruction Slip (e-DIS) ourselves. The Stock Broker/ Depository Participant had not compelled us to execute the POA/ DDPI mandate. I/We can revoke, in writing, this authorization as and when I/we desire to do so.

Sr. No.	Instruction	Signature of all the holder (the DDPI can be signed either in a physical manner or through e-sign)
1.	Transfer of securities held in my/our beneficial owner accounts towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by me/us on the Stock Exchange through Trust Financial Consultancy Services Pvt. Ltd.	1. _____ 2. _____ 3. _____
2.	Pledging / re-pledging of securities in favour of Trust Financial Consultancy Services Pvt. Ltd. i.e., Trading Member (TM) / clearing member(CM) for the purpose of meeting margin requirements pertaining to me/us in connection with the trades executed by me/us on the Stock Exchanges.	1. _____ 2. _____ 3. _____
3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms	1. _____ 2. _____ 3. _____
4.	Tendering shares in open offers through Stock Exchange platforms	1. _____ 2. _____ 3. _____

Accepted By

Trust Financial Consultancy Services Pvt. Ltd.

Authorised Signatory

Trust Financial Consultancy Services Pvt. Ltd.**AADHAAR CONSENT FORM****To,**

Trust Financial Consultancy Services Pvt. Ltd.
 1101, Naman Centre, BKC,
 Bandra (E),
 Mumbai – 400051.

**Dear Sir,**

- a) I hereby declare that the KYC details furnished by me are true and correct to the best of my knowledge and belief and I under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false, untrue, misleading, or misrepresenting, I am aware that I may be held liable for it.
- b) I am aware of other modes of KYC, which are available, and I have chosen Aadhaar based method voluntarily. My Aadhaar record can be used for sharing of Aadhaar data/ related passcode / XML data / QR code from Aadhaar image / e-Aadhaar etc. with KRA and Registered Intermediaries for purpose of validation of KYC by KRA and as an audit evidence.
- c) I will have an option to request for deletion of my Aadhaar record.
- d) I hereby consent to receiving information from KRA through SMS/Email on the designated registered number/Email address.
- e) I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details through KRA. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only. UCC : _____

Name	Aadhaar No. (Last Four Digits only)	Signature															
	<table border="1"> <tr> <td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	X	X	X	X	X	X	X	X	X							
X	X	X	X	X	X	X	X	X									

Date: __ / __ / ____

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ACKNOWLEDGMENT OF DOCUMENTS

Date:/...../.....

To,

Trust Financial Consultancy Services Pvt. Ltd.

109/110, Balarama, BKC, Bandra (E), Mumbai – 400051.

Dear Sirs,

Sub: Confirmation of Receipt of executed documents.

Reference to my registration as client with you for BSE /NSE/MSEI in Capital Market and / or Future & Option segment and / or Currency Derivatives Segment / or Interest Rate Future Segment , I/we hereby confirm that I/we have received copies of the following executed mandatory and voluntary client registration documents.

1. Client Registration form (Know Your Client) including Tariff Sheet.
2. Policies and Procedures for client dealings (As per SEBI Circular Dated 03rd December, 2009).
3. Rights and Obligations of Stock Brokers, Sub-Brokers and Clients.
4. Risk Disclosure Document for Capital Market and Derivatives Segments.
5. Guidance Note – Do's and Don'ts for Trading on the Exchange(s) for Investors.
6. PMLA Investor's Education Write Up.
7. All other executed voluntary documents.

Thanking you

Yours Faithfully,

✍ **14**

Name of the Client: _____

Client code: _____

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FOR OFFICE USE ONLY

UCC Code allotted to the Client :			
Particulars	Documents Verified with Originals done By	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

For Trust Financial Consultancy Services Pvt Ltd

(.....)

Name and Signature of the Authorised Signatory

Seal/Stamp of the Stock Broker

Date:/...../.....



TRUST FINANCIAL CONSULTANCY SERVICES PRIVATE LIMITED

CIN: U67120MH2002PTC135942

SEBI Registration No.: INZ000238639

Corporate Office: 1101, Naman Centre, BKC, Bandra (E), Mumbai – 400051.

Phone: 91 22 4084 5000 Fax:022 4084 5013, 4084 5007

Regd. Office: 109/110, Balarama, BKC, Bandra (E), Mumbai – 400051.

www.trustgroup.in