



# CLIENT REGISTRATION FORM

## INDIVIDUAL

- NSE
- BSE
- NSDL
- CDSL



**SPFL SECURITIES LTD.**

*Let's Talk Investment*

## FOR INTERNAL USE ONLY

BRANCH STAMP & DATE	H O STAMP & DATE

## LIST OF ABBREVIATIONS

Sr. No.	Short form	Expansion
1	AMC	Asset Management Company
2	AMFI	Association of Mutual Funds in India
3	AML	Anti Money Laundering
4	AP	Authorised Person
5	BSE	BSE Limited
6	CBDT	Central Board of Direct Taxes
7	CDSL	Central Depository Services Limited
8	CIN	Corporate Identification Number or Company Identification Number
9	CRS	Common Reporting Standard
10	DHC	Delivery Handling Charges
11	DIN	Director Identification Number
12	DIS	Delivery Instruction Slip
13	F&O	Futures and Options
14	FATCA	Foreign Account Tax Compliance Act
15	FEMA	Foreign Exchange Management Act
16	EMF	Exchange Margin Funding
17	IFSC	Indian Financial System Code
18	IPV	In-person Verification
19	IRDA	Insurance Regulatory Development Authority
20	ITR	Income Tax Return
21	KRA	KYC Registration Agency
22	KYC	Know Your Client / Know Your Customer
23	MF	Mutual Fund
24	MICR	Magnetic Ink Character Recognition
25	MSEI	Metropolitan Share Exchange of India Limited
26	NRI	Non-Resident Indian
27	NSDL	National Securities Depository Limited
28	NSE	National Stock Exchange of India Limited
29	PAN	Permanent Account Number
30	PEP	Politically Exposed Person
31	POA	Proof of Address or Power of Attorney (as applicable)
32	POI	Proof of Identity
33	RBI	Reserve Bank of India
34	RDD	Risk Disclosure Document
35	RTA	Registrar and Transfer Agent
36	SEBI	Securities and Exchange Board of India
37	SIP	Systematic Investment Plan
38	SLB	Stock Lending and Borrowing
39	UID	Unique Identification Number
40	UIDAI	Unique Identification Authority of India

# INDEX

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2.	Know Your Client (KYC) Application Form	This Document captures the basic information about the client/ Joint Holders for Trading & Demat Account respectively	3-4 12-15
3.	Account Opening Form for Trading & Depository	This Document captures the additional information about the client relevant for opening Trading & Demat Account	5-8
4.	Nomination Form	This Document captures the details of nominee(s) w.r.t. the trading and/or demat account/Mutual Fund and the details of guardian in case of minor nominee(s)	9
5.	Tariff Sheet	This Document provides schedule of fee applicable for Depository Account	16
6.	Other Documents	This documents contains the Rights & Obligations (R&O), Risk Disclosure Document(RDD), Guidance note detailing the Do's & Don't' for the investors. Policy & Procedure documents	Seperate Document
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**SPFL SECURITIES LIMITED** CIN : U74899DL1995PLC069581 | GSTIN (UP) : 09AABCS2452C1ZP

**Registered Office :** A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019

Ph.: 011-23270163 | E-mail: info@spfl.co.in • Website: www.spfl.co.in

**Corporate Office :** 15/63-L, Civil Lines, Kanpur-208001 | Mobile No.: +91-7376325889, +91-7376335889

EXCHANGE	SEGMENT	SEBI REGISTRATION NO.	DATE	Compliance Officer Details for Equity Market Segment : Mr. Amit Agarwal, Tel. No : 8004807822, E-mail ID : info@spfl.co.in Compliance Officer Details for Depository Participant : Mrs. Seema Agarwal, Tel. No : 9389190739, E-mail ID : depository@spfl.co.in CEO Name : Mr. Narendra Kumar Gupta, Tel No. : 9336814252, E-mail ID : nkg@spfl.co.in For any grievance/dispute, please contact SPFL SECURITIES LIMITED at the above address or e-mail at grievance@spfl.co.in, info@spfl.co.in or contact at +91-7376325889, +91-7376335889. In case you are not satisfied with the response, please contact the concerned Exchange(s) as provided below: (1) NSE - ignse@nse.co.in or contact at 1800-2200-58 (2) BSE - is@bseindia.com or contact at 022 - 2272 8097 (3) NSDL - relations@nsdl.co.in or contact at 022 - 2499 4200 (4) CDSL - complaints@cdslindia.com or contact at 022 - 2272 3333 (5) SEBI - https://scores.gov.in or contact at 1800227575 / 18002667575
BSE	CASH, F&O & CURRENCY DERIVATIVES	INZ000214237	31/12/2018	
NSE				
CDSL	DP	IN-DP-543-2021	01/01/2021	
NSDL	DP			

#### IMPORTANT NOTE

 Signature of First Holder/Client/Applicant (17)  Signature of Second Holder (11)  Signature of Third Holder (11)

#### Declaration for Pro Trading

We SPFL Securities Limited , hereby inform all our clients that besides trading on behalf of our clients, we also do Proprietary Trading in our own account.

#### Acknowledgment for Receipt

I/We hereby acknowledge the receipt of duly executed copy of Account Opening Form, Rights and Obligations, RDD, Policies & Procedures, Depository Agreement, Schedule of Service Charges and All Other Documents as executed by me/us.

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

Signature of Client :  (1) Name of Client : \_\_\_\_\_

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

## INSTRUCTIONS / CHECK LIST FORM FILLING KYC FORM

### 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/PIOCard/OCIC 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. Proof of Identity( POI): List of documents admissible as Proof of Identity:

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

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

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

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
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.
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.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

### D. Exemptions/clarifications to PAN

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

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

### E. List of people authorized to attest the documents:

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 official s 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.

### INSTRUCTION / CHECK LIST

Additional documents in case of trading in derivatives segment (illustrative list) :

1. Copy of ITR Acknowledgement	4. Net worth Certificate - CA Certified	7. Demat Account Holding Statement along with valuation
2. Copy of Annual Accounts	5. Salary Slip	8. *Any other relevant documents substantiating ownership
3. Copy of Form 16 in case of salary income	6. Bank Statement (For last 6 months)	of Assets

\*Relevant documents as pe risk management policy of the stock broker to be provided by the client from time to time.



**4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES\***

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

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

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

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

State / U.T. \_\_\_\_\_ Country \_\_\_\_\_ Zip / Post Code\* [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

**5. RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA** (Additional Details Required\*(Mandatory only if section 4.3 is ticked)

Country of Jurisdiction of Residence\* \_\_\_\_\_ Country of Birth\* \_\_\_\_\_ Place/City of Birth\* \_\_\_\_\_

Tax Identification Number or equivalent (If issued by jurisdiction)\* [ ]

**6. DETAILS OF RELATED PERSON** (In case of additional related persons, please fill 'Annexure B1')

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

Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative

Name\* Prefix \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

(If KYC number and name are provided, below details of section 6 are optional)

**PROOF OF IDENTITY [PoI] OF RELATED PERSON\***

A- PAN Card [ ]

B - UID (Aadhaar) [ ]

C- Voter ID Card [ ]

\_\_\_\_\_ [ ]

E- Passport Number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ] Passport Expiry Date [D][D][M][M][Y][Y][Y][Y]

F- Driving Licence [ ]

Driving Licence Expiry Date [D][D][M][M][Y][Y][Y][Y]


G- Others (any document notified by the central government) [ ]

Identification Number [ ]

H- Simplified Measures Account - Document Type code [ ][ ]

Identification Number [ ]

PHOTO

 (2)

Signature of Applicant


**7. REMARKS (If any) :** \_\_\_\_\_

**7. APPLICANT DECLARATION**

- I hereby declare that the details furnished above 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 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 [D][D][M][M][Y][Y][Y][Y]

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

 (3)

Signature of Applicant

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

Originals Verified & Self -Attested Document Copies Received.  
This is certify that I have carried out in-person verification in respect of the client mentioned in the KYC form.

**IN-PERSON / KYC VERIFICATION CARRIED OUT BY**

Date \_\_\_\_\_  
Emp. Name \_\_\_\_\_  
Emp. Code \_\_\_\_\_  
Emp. Designation \_\_\_\_\_  
Emp. Branch \_\_\_\_\_

**INSTITUTION DETAILS**

Name **SPFL SECURITIES LIMITED**  
Code **102206**

Employee Signature

Institution Stamp & Signature of Authorised Signatory

**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 / U.T 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 (P) in the box available before the section number and strike off the sections not required to be updated.

# ACCOUNT OPENING FORM FOR TRADING & DEPOSITORY

Client-ID (to be filled by DP) | 1 | 2 | 0 | 6 | 1 | 2 | 0 | 0 | | | | | | | | | |

Client Code ID | | | | | | | | | | | | | | | |

Client-ID (to be filled by DP) | I | N | 3 | 0 | 0 | 5 | 5 | 6 | | | | | | | | | |

Client Code ID | | | | | | | | | | | | | | | |

I/We request you to open a  Trading  Demat Account  Both (Please fill all the details in CAPITAL LETTERS only)

### A. TYPE OF ACCOUNT INDIVIDUAL (Please tick whichever is applicable)

Resident Individual  Non Resident Indian  Foreign National  Person of Indian Origin

### B. DETAILS OF ACCOUNT HOLDERS

First Holder/Client | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Second Holder | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Relationship with 1<sup>st</sup> Holder  Spouse  Children  Parent  Others (please specify) \_\_\_\_\_


Third Holder | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Relationship with 1<sup>st</sup> Holder  Spouse  Children  Parent  Others (please specify) \_\_\_\_\_

Preferred user ID: (1) | | | | | | | | | | (2) | | | | | | | | | | (3) | | | | | | | | | |

### C. STANDING INSTRUCTIONS

Sr. No.	Authorisations	Plea	Relevant
1.	Consent to receive standard account opening documents in electronic form	<input type="checkbox"/>	Yes <input type="checkbox"/> No
2.	Consent to receive credits automatically into my/our Account. (If not ticked, the default option would be "Yes")	<input type="checkbox"/>	Yes <input type="checkbox"/> No
3.	Account to be operated through power of attorney (POA)	<input type="checkbox"/>	Yes <input type="checkbox"/> No
4.	Consent to send Electronic Transaction-cum-Holding Statement at Sole/First Holder's email id stated in the KYC	<input type="checkbox"/>	Yes <input type="checkbox"/> No
5.	Consent to share the email ID with the RTA	<input type="checkbox"/>	Yes <input type="checkbox"/> No
6.	Consent to receive SMS Alerts from CDSL (T & C available on www.spfl.co.in)	<input type="checkbox"/>	Yes <input type="checkbox"/> No
7.	Consent to avail of the facility of internet trading / wireless technology	<input type="checkbox"/>	Yes <input type="checkbox"/> No
8.	Consent to avail of Exchange Margin Funding	<input type="checkbox"/>	Yes <input type="checkbox"/> No
9.	Consent to accept all the pledge instructions in my/our account without any other further instruction from my/our end. (If not ticked, the default option would be 'No')	<input type="checkbox"/>	Yes <input type="checkbox"/> No
10.	Consent to receive dividend / interest directly in to my bank account given below through ECS (If not ticked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]	<input type="checkbox"/>	Yes <input type="checkbox"/> No
11.	Mode of receiving Annual Reports & Statement of Accounts <input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical & Electronic (For all online clients or if not ticked, the default option would be Electronic) (Applicable for Demat Account)		
12.	Account Statement Requirement <input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Monthly		

 To register for easi, please visit CDSL's website: www.cdslindia.com. Easi allows a BO to view his ISIN balances, transactions and value of the portfolio.

NSDL SPEED-e Facility  Yes  No

### In case of NRIs/ Foreign Nationals

RBI Approval Reference Number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

RBI Approval date | D | D | M | M | Y | Y | Y | Y

	FIRST HOLDER	SECOND HOLDER	THIRD HOLDER
Gross Income Range Per Annum (Rs. in Lakhs)	<input type="checkbox"/> <1 <input type="checkbox"/> 1-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-25 <input type="checkbox"/> 25-1cr <input type="checkbox"/> > 1cr	<input type="checkbox"/> <1 <input type="checkbox"/> 1-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-25 <input type="checkbox"/> 25-1cr <input type="checkbox"/> > 1cr	<input type="checkbox"/> <1 <input type="checkbox"/> 1-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-25 <input type="checkbox"/> 25-1cr <input type="checkbox"/> > 1cr
Networth : (should not be older than 1 year)	Amount (Rs.) _____ As on date  d d m m y y y y	Amount (Rs.) _____ As on date  d d m m y y y y	Amount (Rs.) _____ As on date  d d m m y y y y
Sources of Wealth / Income	<input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Gift <input type="checkbox"/> Rental Income <input type="checkbox"/> Royalty <input type="checkbox"/> Prize Money <input type="checkbox"/> Ancestral Property <input type="checkbox"/> Others (Please specify) _____	<input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Gift <input type="checkbox"/> Rental Income <input type="checkbox"/> Royalty <input type="checkbox"/> Prize Money <input type="checkbox"/> Ancestral Property <input type="checkbox"/> Others (Please specify) _____	<input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Gift <input type="checkbox"/> Rental Income <input type="checkbox"/> Royalty <input type="checkbox"/> Prize Money <input type="checkbox"/> Ancestral Property <input type="checkbox"/> Others (Please specify) _____
Country sources of Wealth / Income	<input type="checkbox"/> INDIA <input type="checkbox"/> Others _____	<input type="checkbox"/> INDIA <input type="checkbox"/> Others _____	<input type="checkbox"/> INDIA <input type="checkbox"/> Others _____
Details in case of Employed/ Business/Professiona (Name of Employer/Establishment & Address)	Name & Add. : _____ _____	Name & Add. : _____ _____	Name & Add. : _____ _____
Designation	<input type="checkbox"/> Chairman, Director, CEO, CFO, COO <input type="checkbox"/> Others _____	<input type="checkbox"/> Chairman, Director, CEO, CFO, COO <input type="checkbox"/> Others _____	<input type="checkbox"/> Chairman, Director, CEO, CFO, COO <input type="checkbox"/> Others _____
Nature of Business	<input type="checkbox"/> Goods & services related to defense, nuclear material <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Energy / commodities / mining <input type="checkbox"/> Precious metals and gems <input type="checkbox"/> ART dealing and allied business <input type="checkbox"/> Others _____	<input type="checkbox"/> Goods & services related to defense, nuclear material <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Energy / commodities / mining <input type="checkbox"/> Precious metals and gems <input type="checkbox"/> ART dealing and allied business <input type="checkbox"/> Others _____	<input type="checkbox"/> Goods & services related to defense, nuclear material <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Energy / commodities / mining <input type="checkbox"/> Precious metals and gems <input type="checkbox"/> ART dealing and allied business <input type="checkbox"/> Others _____

	FIRST HOLDER	SECOND HOLDER	THIRD HOLDER
Additional Details, if applicable.	<input type="checkbox"/> Politically Exposed Person(PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Bureaucrat <input type="checkbox"/> Civil Servant <input type="checkbox"/> Politician <input type="checkbox"/> Current/Former MP, MLA or MLC <input type="checkbox"/> Current/Former Head of State <input type="checkbox"/> Not PEP / Related to PEP	<input type="checkbox"/> Politically Exposed Person(PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Bureaucrat <input type="checkbox"/> Civil Servant <input type="checkbox"/> Politician <input type="checkbox"/> Current/Former MP, MLA or MLC <input type="checkbox"/> Current/Former Head of State <input type="checkbox"/> Not PEP / Related to PEP	<input type="checkbox"/> Politically Exposed Person(PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Bureaucrat <input type="checkbox"/> Civil Servant <input type="checkbox"/> Politician <input type="checkbox"/> Current/Former MP, MLA or MLC <input type="checkbox"/> Current/Former Head of State <input type="checkbox"/> Not PEP / Related to PEP
Place of Birth Country of Birth	<input type="checkbox"/> INDIA <input type="checkbox"/> Others _____	<input type="checkbox"/> INDIA <input type="checkbox"/> Others _____	<input type="checkbox"/> INDIA <input type="checkbox"/> Others _____
Mobile Number Declaration <small>(*Family to strictly include spouse, dependent children and dependent parents only. Kindly tick relevant option)</small>	I hereby declare that the Mobile number as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family*(specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Family PAN _____ Consent for SMS Alert facility <input type="checkbox"/> Yes <input type="checkbox"/> No	I hereby declare that the Mobile number as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family*(specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Family PAN _____ Consent for SMS Alert facility <input type="checkbox"/> Yes <input type="checkbox"/> No	I hereby declare that the Mobile number as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family*(specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Family PAN _____ Consent for SMS Alert facility <input type="checkbox"/> Yes <input type="checkbox"/> No
Email ID Declaration <small>(*Family to strictly include spouse, dependent children and dependent parents only. Kindly tick relevant option)</small>	I hereby declare that the Email ID as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family*(specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Family PAN _____	I hereby declare that the Email ID as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family*(specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Family PAN _____	I hereby declare that the Email ID as per CKYC belongs to <input type="checkbox"/> Self OR <input type="checkbox"/> Family*(specify relation) <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parents Family PAN _____
Any other information			
<b>FATCA Declaration</b>			
Is your Tax Residency/Country of Birth/Citizenship/Nationality other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, please specify) Country of Birth _____ Citizenship _____ Nationality _____	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, please specify) Country of Birth _____ Citizenship _____ Nationality _____	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, please specify) Country of Birth _____ Citizenship _____ Nationality _____
If yes, please indicate all countries in which you are resident for tax purpose and the associated Tax ID number below :			
Country of Tax Residency# Tax Identification Number* Identification Type			
Country of Tax Residency# Tax Identification Number* Identification Type			
<small>#To include all countries other than India, where investor is Citizen/Resident/Green Card Holder/Tax Resident in those respective countries especially of USA, India &amp; Canada.            *Incase tax identification number is not available, kindly provide its functional equivalent</small>			

#### D. OPTION FOR ISSUANCE OF DIS BOOKLET (\*Please refer to the details in Tariff Sheet)

Option 1 :  I/we wish to receive the Delivery Instruction Slip (DIS) booklet with account opening.

Option 2 :  I/we do not wish to receive the Delivery Instruction Slip (DIS) booklet with account opening. However, the DIS booklet should be issued to me/us immediately onmy/our request at any later date.

Details of disputes / dues pending from / to such Stock Broker / Authorised Person: .....

Whether Employee / Agent / Approved user / Authorised Person \*Trading / Clearing Member: Recognized Stock

Exchange  Yes  No Name of Member \_\_\_\_\_ (Please provide consent letter from such Trading/Clearing Member)

Whether Broker of any Exchange  Yes  No Name of Exchange/s \_\_\_\_\_ (Please provide consent letter from such Exchange/s)

Whether Declared Defaulter/debarred/suspended By SEBI/FMC/RBI/ANY Other Recognized Stock Exchange/Commodity Exchange: Yes  No

Details of any action/proceedings initiated /pending/taken by SEBI/Stock Exchange/any other authority against the Client during the last 3 years for violation of securities law/other economic offences (including action taken against relatives/associates) \_\_\_\_\_

#### E. INVESTMENT/TRADING EXPERIENCE & PREFERENCE

No Prior Investment Experience  Years in Equities  Years In Derivatives  Years in other Investment Related Field  
 Proposed Investment through SPFL SECURITIES LIMITED: ₹ \_\_\_\_\_



## F. BANK ACCOUNT DETAILS

Default Bank <i>(Through which payout transactions would be generally routed)</i>	Additional Bank
Name & Address : _____	Name & Address : _____
Account No.	Account No.
Account Type <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Other: _____	Account Type <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Other: _____
MICR Code	MICR Code
IFSC Code	IFSC Code

## G. DEPOSITORY ACCOUNT DETAILS *(Transactions would be generally routed through the below demat account.) (Default for Payout)*

Depository : NSDL  CDSL  DP Name: \_\_\_\_\_

Beneficiary Name: \_\_\_\_\_ DP ID : | | | | | | | | | | | | | | | | | | BO ID: | | | | | | | | | | | | | | | | | |

## H. DEALINGS THROUGH AUTHORISED PERSON & OTHER STOCK BROKERS No Yes *(If yes, please mention details below)*

Name of Authorised Person : \_\_\_\_\_

Registration No: NSE | | | | | | | | | | | | | | | | | | | | | |

R.O. Address: \_\_\_\_\_

Whether registered with any other Stock Broker / Authorised Person *(If registered with multiple Stock Broker, provide all details)*

Name of Broker: \_\_\_\_\_ Name of AP : \_\_\_\_\_


Name of Exchange \_\_\_\_\_ Client Code No.: \_\_\_\_\_

## I. INTRODUCER DETAILS (Optional)

Name & Address of the Introducer : \_\_\_\_\_

Status of the Introducer: *Authorised Person/ Existing Client/ Director or Employee of Trading Member/ any other Person*  
*(Please Specify)* \_\_\_\_\_ Mobile No. / Tel. No. : | | | | | | | | | | | | | | | | | |

Proof of Identity (POI):  PAN No  Passport No.  Driving Licence  Voter ID | | | | | | | | | | | | | | | | | |

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

## J. BROKERAGE STRUCTURE (Mandatory)




	Cash Segment		Derivatives Segment		Currency Derivatives Segment	
	(Percentage)	Min. Rupees/ Paisa Per Share	Futures Segment (Percentage)	Options Segment ★ (Percentage)	Futures Segment (Percentage)	Options Segment ★ (Percentage)
Delivery Brokerage					NA	NA
Jobbing / CF Brokerage						
Minimum Brokerage	NA	NA				
Brokerage Per Lot	NA	NA				
Default Brokerage		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

- ★ Minimum amount per lot would be applicable as per the details provided in the policy and procedures.
- Delivery Handling Charges (DHC) would be levied on each delivery based sale transaction (per scrip) where value of brokerage levied is less than Rs 20/-. The value of DHC would be difference of Rs 20/- and the brokerage charged.
  - Expiry handling charges would be charged as applicable
  - Statutory cost will be charged as per Exchange / Regulatory Authorities
  - KYC Registration Agency (CKYC & KRA) charges will be levied as applicable
  - Please refer the details of default brokerage, standard brokerage on option segments and schedule of charges in the Policy and Procedures.

**K. NOMINATION** ( Depository A/c only  Trading A/c only  Both) \* PAN of Nominee Mandatory for Nomination

<input type="checkbox"/>	I/We wish to make a nomination and do hereby nominate the person, details of whom are provided on nomination form who is/are entitled to receive securities / fund / Mutual fund units balances lying in my/our account, in the event of my/our death
<input type="checkbox"/>	I/ We do not wish to nominate any one for this Demat Account, Trading Account & Mutual Fund and consequently all rights and liabilities in respect of beneficiary ownership in the Securities / Funds / Mutual Fund units held by me/us shall vest in me/us




**L. STOCK EXCHANGES ON WHICH YOU WISH TO TRADE**

CASH	F & O	Currency
<input type="checkbox"/> BSE <input type="checkbox"/> NSE   (4)	<input type="checkbox"/> BSE <input type="checkbox"/> NSE <i>I have knowledge of trading in derivatives segment and am aware of risks associated therein</i>   (5)	<input type="checkbox"/> BSE <input type="checkbox"/> NSE <i>I have knowledge of trading in currency derivatives segment and am aware of risks associated therein</i>   (6)

1. Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off / mentioned as NA.
2. In future, if you need to trade in any additional Segment/Exchange, not opted above, separate authorisation letter will be required.
3. In case of trading in Derivatives it is compulsory to submit proof of Financial Details.

**DECLARATION**




1. I/we hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case of any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I may be held liable for it.
2. I/we confirm having read, received, explained and understood the contents of policies and procedures, terms & conditions governing Stock Broker, Risk Disclosure Documents & Do's & Don't's for trading on the Exchanges, Rights and Obligations applicable for Stock Brokers, Clients as well as Rights and Obligations applicable for the Beneficial Owner & Depository Participants & the tariff sheet, as available on the website on the company.
3. I/we have read and agree to be bound by the Rules, Regulations, bye laws, circulars and guidelines issued by SEBI, Exchanges, Stock Broker, AMFI, Mutual Funds, Depository and Depository Participant pertaining to my trading and demat account, as are in force from time to time.
4. I/we understand that the Stock Broker is relying on this information for the purpose of determining the status of the applicants named above in compliance with CRS/FATCA. The Stock Broker is not able to offer any tax advice on CRS or FATCA or its impact on the applicants and I/We shall seek advice from professional tax advisor for any tax questions. Further, I/We agree to submit a new form within 30 days if any information or certification on this form gets changed. I/We agree, as may be required by Regulatory authorities, Stock Broker shall be required to comply to report, reportable details to CBDT or close or suspend my account.
5. Under Penalty of perjury, I/We certify that:
  - i. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state of political subdivision thereof or therein, including the District of Columbia or any other states of U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person)
  - ii. The applicant is an applicant taxable as a tax resident under the laws of country outside India. (This clause is applicable only if the account holder is a tax resident outside of India)
6. I hereby confirm that I am not a US Person or a resident for tax purpose in any country other than India, though my Country of Birth suggests my relation with Us or one or more parameters suggest my relation with the country outside India. I am providing / already provided copy of my PAN card and now providing a certificate of relinquishment of US citizenship (loss of nationality) OR reasons for not having such a certificate despite relinquishing US citizenship OR for not obtaining US citizenship at birth (only if born in US)  
Please specify reason: \_\_\_\_\_
7. I/we confirm having read and understood the guidelines pertaining to BSDA and is eligible to open a depository account as a BSDA holder. I will comply with the said guidelines and that in case my/our Demat Account opened under BSDA facility does not meet the eligibility for BSDA facility as per guidelines issued by SEBI or any such authority at any point of time, my / our BSDA account will be converted to Regular Demat Account without further reference to me / us and will be levied charges as applicable to regular accounts (applicable only if consented for BSDA facility).

	Name (s) of holder(s)/client	Specimen Signature of holder(s)/client
Sole/First Holder		 (7)
Second Holder		 (3)
Third Holder		 (3)

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

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




**NOMINATION FORM**
**FOR INDIVIDUAL ONLY**

Nomination Details		Details of 1 <sup>st</sup> Nominee	Details of 2 <sup>nd</sup> Nominee	Details of 3 <sup>rd</sup> Nominee
I/We wish to make a nomination. [As per details given below] I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.				
<b>Nomination can be made upto three nominees in the account.</b>				
<b>1</b>	<b>Name of the nominee(s) (Mr./Ms.)</b>			
<b>2</b>	<b>Share of each Nominee</b> Equally <input type="checkbox"/> [If not equally, specify %]	%	%	%
Any odd lot after division shall be transferred to the first nominee mentioned in the form.				
<b>3</b>	<b>Relationship With the Applicant (If Any)</b>			
<b>4</b>	<b>Address of Nominee(s)</b> City / Place: State & Country:  PIN Code			
<b>5</b>	<b>Mobile/Telephone No. of nominee(s)</b>			
<b>6</b>	<b>Email ID of nominee(s)</b>			
<b>7</b>	<b>Nominee Identification details –</b> [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			
Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:				
<b>8</b>	<b>Date of Birth (in case of minor nominee(s))</b>			
<b>9</b>	<b>Name of Guardian (Mr./Ms.) (in case of minor nominee(s) }</b>			
<b>10</b>	<b>Address of Guardian(s)</b> City / Place: State & Country:  PIN Code			
<b>11</b>	<b>Mobile/Telephone no. of Guardian</b>			
<b>12</b>	<b>Email ID of Guardian</b>			
<b>13</b>	<b>Relationship of Guardian with nominee</b>			
<b>14</b>	<b>Guardian Identification details –</b> [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			
CLIENT SIGNATURE *				
	First / Sole Holder	Second Holder	Third Holder	
Sign of Client	 (8)	 (4)	 (4)	
Date :	D D M M 2 0 Y Y		Place :	

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

**DECLARATION FORM FOR OPTING OUT OF NOMINATION**
**FOR INDIVIDUAL ONLY**

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.

NAME AND SIGNATURE OF HOLDER(S)*			
	First / Sole Holder	Second Holder	Third Holder
Name			
Sign of Client	 (9)	 (5)	 (5)
Date :	D D M M 2 0 Y Y		Place :

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

**MANDATE FOR MAINTAINING THE ACCOUNT ON RUNNING ACCOUNT BASIS****(Voluntary)**

To,  
**SPFL SECURITIES LIMITED**

Registered Office : A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019 | Ph.: 011-23270163

Corporate Office : 15/63-L, Civil Lines, Kanpur-208001 • Mobile No.: +91-7376325889, +91-7376335889 • Website: www.spfl.co.in


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 and/or Mutual Fund Segment & in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as under:

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s)  at any segment(s) of any or all the Exchange(s)/Clearing corporation unless I/we instruct you otherwise.
2. I/We request you to settle my fund once in every calendar Quarter  or once in a calendar Month  or such other higher period as allowed by SEBI/Stock Exchange time to time except the funds given towards collaterals/margin in form of Bank Guarantee and/or Fixed Deposit Receipt.
3. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite securities/funds/Mutual Fund Units towards such obligations and may also retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the exchanges.
4. I/We confirm that I will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 7 working days from the date of receipt of funds/securities or statement of account or statement related to it, as the case may be at your registered office.

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

Thanking you,  
 Yours faithfully,

 (10)  
 \_\_\_\_\_  
 Signature of Client

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

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

\* Kindly tick relevant option. If not struck off, the option will be considered as "Quarterly".

**FOR OFFICE PURPOSES:**

UCC Code allotted to the Client: (As mention on page no. 5 on account opening form)

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Staff / Authorised Person			
Staff Code			
Designation of the Staff			
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 terms and conditions and handed over a copy of the same. 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', Terms and Conditions and RDD would be made available on my/ our website, if any, for the information of the clients.

I hereby confirm that, I have not directed, encouraged or assisted client with respect to strategies to their account as US accounts / Other reportable account. I have not given any tax advice to client."

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

**FOR OFFICE USE ONLY**

Seal/Stamp of SPFL SECURITIES LIMITED

\_\_\_\_\_  
 (Name & Signature of the Authorised Signatory)

Outlet Name	Code
Employee Name	Code
Authorised Person Name	Code
Referring Employee Name	
Name of Corporate	

# PROFILE SHEET

(Voluntary)

Dear Customer,  
Please select product that you wish to avail of:  
Also, please answer a few questions to help us serve you better

Sr. No.	Questions	Option							
		A	B	C	D	E	F		
1.	How would you like to trade with SPFL?	Internet	Phone/Branch	Both					
2.	Have you been investing or trading in the stock market?	Yes	No						
3.	Do you trade in Cash market or Derivative market?	Cash	Derivative	Both	None				
4.	What is your frequency of your investing / trading?	Many times a day	Once a day	Many times Week	Once a Week	Once a month or more	None		
5.	What is your current portfolio size? (Total investment in Shares and Mutual Funds)	Below 5 Lac	5-25 Lac	25-50 Lac	50 Lac and above	No Portfolio			
6.	How much more do you plan to invest in stock market in the next 2 years?	Below 5 Lac	5-25 Lac	25-50 Lac	50 Lac and above				
7.	In which range would your annual income fall in to?	Below 5 Lac	5-25 Lac	25-50 Lac	50 Lac and above				
8.	What is your existing mode of transaction?	Internet based account	Non Internet account	No Broker					
9.	Do you have a Relationship Manager allocated to you?	Yes	No	None					
10.	Would you like to undergo free education?	<input type="checkbox"/> Investments		<input type="checkbox"/> Trading strategies based on technical analysis					
11.	How long have you been investing in stocks?	<input type="checkbox"/> New <input type="checkbox"/> 5 to 10 years		<input type="checkbox"/> 1 to 5 years <input type="checkbox"/> More than 10 years					
12.	What is your source of stock market information?	<input type="checkbox"/> TV channels: <input type="checkbox"/> CNBC <input type="checkbox"/> Newspaper: <input type="checkbox"/> Economic Tim <input type="checkbox"/> SPFL Research Magazines <input type="checkbox"/> Friends/Relatives <input type="checkbox"/> Brok		<input type="checkbox"/> NDTV PROFIT <input type="checkbox"/> Others (Specify) _____ <input type="checkbox"/> Others (Specify) _____ <input type="checkbox"/> Other research magazines <input type="checkbox"/> Others (Specify) _____					
13.	What is your marketstock preference?	Market preference <input type="checkbox"/> Speculator <input type="checkbox"/> Regular investor <input type="checkbox"/> Occasional investment <input type="checkbox"/> Trader		Stock preference <input type="checkbox"/> High risk return <input type="checkbox"/> Bluechip <input type="checkbox"/> Stocks valued less than Rs10 <input type="checkbox"/> Stocks recommended by SPFL research <input type="checkbox"/> Stocks recommended by other research houses					
Other Brokerage Firm you are trading with please tick the		ICICI Securities	HDFC Securities	Kotak Securities	Reliance Money	Angel Broking	Anand Rathi		
		India Infoline	Motilal Oswal	Indiabulls	Geojit	Religare	Any other _____		
No Brokerage Firm <input type="checkbox"/>									
Other Product Interest		IPO		PMS		Mutual Fund		Insurance	

**FOR OFFICE USE**

Profiling Code

1	2	3	4	5	6	7	8	9

**FOR OFFICE USE ONLY**

Name of The Executive:  Executive Code:

Name of The Manager:  Manager Code:

City:  Lead Source:

Margin ₹ :  Account Opening Charges:

Signature: \_\_\_\_\_  
In case of waiver of account opening fee

Approved By Name :	Designation:
Signature With Stamp	





**4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES\***

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

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

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

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

State / U.T. \_\_\_\_\_ Country \_\_\_\_\_ Zip / Post Code\* [ ][ ][ ][ ][ ][ ]

**5. RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA** (Additional Details Required\*(Mandatory only if section 4.3 is ticked)

Country of Jurisdiction of Residence\* \_\_\_\_\_ Country of Birth\* \_\_\_\_\_ Place/City of Birth\* \_\_\_\_\_

Tax Identification Number or equivalent (If issued by jurisdiction)\* [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

**6. DETAILS OF RELATED PERSON** (In case of additional related persons, please fill 'Annexure B1')

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

Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative

Name\* Prefix \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

(If KYC number and name are provided, below details of section 6 are optional)

**PROOF OF IDENTITY [PoI] OF RELATED PERSON\***

A- PAN Card [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

B - UID (Aadhaar) [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

C- Voter ID Card [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

E- Passport Number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ] Passport Expiry Date [D][D][M][M][Y][Y][Y][Y]

F- Driving Licence [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Driving Licence Expiry Date [D][D][M][M][Y][Y][Y][Y]

G- Others (any document notified by the central government) [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Identification Number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

H- Simplified Measures Account - Document Type code [ ][ ]

Identification Number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

PHOTO

(1)

Signature of Applicant

**7. REMARKS** (If any) : \_\_\_\_\_

**7. APPLICANT DECLARATION**

- I hereby declare that the details furnished above 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 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 [D][D] [M][M] [Y][Y][Y][Y]

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

(2)

Signature of Applicant

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

Originals Verified & Self -Attested Document Copies Received.

This is certify that I have carried out in-person verification in respect of the client mentioned in the KYC form.

**IN-PERSON / KYC VERIFICATION CARRIED OUT BY**

Date \_\_\_\_\_

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

Emp. Branch \_\_\_\_\_

**INSTITUTION DETAILS**

Name **SPFL SECURITIES LIMITED**

Code **102206**

Employee Signature

Institution Stamp & Signature of Authorised Signatory

**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 / U.T 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 (P) in the box available before the section number and strike off the sections not required to be updated.



**SPFL SECURITIES LIMITED**

**CENTRAL KYC REGISTRY | KNOW YOUR CUSTOMER (KYC) APPLICATION FORM | INDIVIDUAL**

Registered Office : A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019 | Ph.: 011-23270163

Corporate Office : 15/63-L, Civil Lines, Kanpur-208001 | Mobile No.: +91-7376325889, +91-7376335889

**For office use only**

Application Type\*  New  Update

Fields marked with "\*" are mandatory fields

(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 fill the form in English and in BLOCK letters) (As per PAN - Advisable)

**Third Holder**

Name\* (Same as ID proof) Prefix \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Middle Name \_\_\_\_\_

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

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

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

Date of Birth\*           Marital Status\*  Married  Unmarried  Others \_\_\_\_\_

Gender\*  M - Male  F- Female  T-Transgender Citizenship\*  IN-Indian  Others \_\_\_\_\_

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

Occupation Type\*  S-Service  Private Sector  Public Sector  Government Sector  B-Business  O-Others  Self Employed  Retired  Housewife  Student

Professional (Registration / Licence No. provided by respective authority \_\_\_\_\_)

**Participant Category\*\***

(Commodity Segment only) Commercial Participant  Value Chain Participant  Exporter  Importer  Hedger

Non Commercial Participant  Financial Participant  Trader  Jobber  Arbitrager

X-Not Categorised (Please Specify \_\_\_\_\_)

GST. No. (If Any) \_\_\_\_\_ IEC Code (In case of Exporter / Importer) \_\_\_\_\_

**2. CONTACT DETAILS** (All communications will be sent on provided Mobile no. / Email-ID)

Mobile           Tel. (Off)

Tel. (Res)           Fax

Email ID \_\_\_\_\_

**3. PROOF OF IDENTITY (PoI)\*** (Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

A- PAN Card\*            B - UID (Aadhaar)\*

C- Voter ID Card            D- NREGA Job Card

E- Passport Number           Passport Expiry Date

F- Driving Licence           Driving Licence Expiry Date

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

H- Simplified Measures Account - Document Type code   Identification Number

**4. PROOF OF ADDRESS (PoA)\*** Certified copy of any one of the Proof of Address (PoA) as per the list in check list needs to be submitted

**4.1 CORRESPONDENCE / LOCAL ADDRESS DETAILS \***

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

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

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

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

Country \_\_\_\_\_ Land Mark \_\_\_\_\_

**4.2 PERMANENT / OVERSEAS ADDRESS DETAILS** Certified copy of any one of the Proof of Address (PoA) as per the list in check list needs to be submitted

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

Proof of Address\*  Passport  Driving Licence  UID (Aadhaar)  Others

Address  Voter Identity Card  NREGA Job Card  Simplified Measures Account - Document Type code

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

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

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

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

Country \_\_\_\_\_ Land Mark \_\_\_\_\_









## SPFL SECURITIES LIMITED

CIN: U74899DL1995PLC069581 | GSTIN (UP): 09AABCS2452C1ZP

Member: NSE, BSE, • DP (CDSL) DP ID: 12061200 | SEBI REGN. NO.: IN-DP-543-2021

DP (NSDL) DP ID: IN300556 | SEBI REGN. NO.: IN-DP-543-2021

Registered Office: A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019

Ph.: 011-23270163 | E-mail: info@spfl.co.in | Website: www.spfl.co.in

Corporate Office: 15/63-L, Civil Lines, Kanpur-208001 • Mobile No.: +91-7376325889, +91-7376335889

(Applicable wef 1st September, 2024)

S. NO.	PARTICULAR	TARIFF
1.	Account Opening	NIL
2.	Documentation (Stamp Charges for DDPI)	Actual as applicable State wise
3.	Individual A.M.C.	*Rs.100/- Quarterly
4.	Corporate A.M.C.	*Rs.250/- Quarterly + Depository Charges Rs.500/- P.A.
5.	Deposit for Lifetime AMC (refundable)	*3500/- (Refundable after deducting A/c Closing year AMC)
6.	Individual A.M.C. for BSDA	Free up to holding Value 4,00,000/-, Rs 100/- for Holding Value from Rs.4,00,000/- to Rs. 10,00,000/-
7.	Transaction Charges for market Trade	*For POA A/c min. Rs.15/- Per Transaction. *Non POA (In our CM) Rs.100/- Per transaction *For Other CM .05% or Min Rs 100/- (whichever is higher)
8.	Transaction Charges for off-market Trade	Min. 100/- or 0.05% whichever is higher.
9.	Demat Charges	Rs.50/-per certificate + Rs. 100/-mailing Charges (Same mailing charges will also applicable in demat rejection)
10.	Remat Charges	A fees of Rs. 50 for every hundred securities or part there of subject to maximum fee Rs. 5,00,000 or a flat fees of Rs. 50 per certificate, whichever is higher.+ Rs.100 mailing Charges.
11.	Pledge (Creation / Confirmation)	Min. 100/- or .05% whichever is higher.
12.	Margin Pledge (Creation / Confirmation)	Rs.40/- Per Creation
13.	Margin Pledge Release	Rs.40/- Per Release
14.	Client Account Updation	Rs. 100/- Per Modification
15.	Kyc Updation	Rs. 100/- Per Updation
16.	Failed Transaction Charges	Rs. 25/- Per Transaction
17.	Re-issuance Of DIS Booklet	Rs. 100/- Per Book
18.	Late Transaction charges	Rs.100/-Per transaction
19.	GST & Govt. Levies	As Applicable

### NOTES ON TARIFF :

- Annual Maintenance charge shall be deductible in the quarterly ratio in respect of all the Schemes on the Accounts opening during financial year except BSDA Accounts.
- No A.M.C. would be charged on the accounts under Lifetime A.M.C. option. The amount may be withdrawn at any point of time during the operation of the accounts on closure. The amount would be refunded after deducting A.M.C. for the corresponding Financial Year.
- Trade Instructions would be accepted against payment in cash for the accounts under without POA Scheme The transaction for the accounts under POA Scheme would be collected monthwise.
- All instructions for transfer shall be received from the clients under without POA scheme up to 4:00 p.m. on T day for pay- in securities. Late instructions would be accepted at the Client's sole risk and responsibility.
- Late charges would be collected for all instructions received after 4:00 p.m. for same day execution or execution date as pay-in-date.
- The charges are subject to revision at the DP's sole discretion with a notice period of 30 days.
- The selection of scheme will be on mutual consent of beneficiary owner and DP. Sole/First Holder can communicate to DP's through his/her registered email ID for opt out of BSDA Facility.
- Annual Maintenance charge is payable in advance on 1st April every year, wherever applicable.
- Any advance payment over and above the normal amount due may also be adjusted against the bills Raised from time to time.
- Delayed Payment charges applicable up to 13% p.a.
- All taxes/levies/cess as applicable.

(11)

Sole/First Holder Name & Signature

(6)

Second Holder Name & Signature

(6)













Third Holder Name & Signature

## DEMAT DEBIT AND PLEDGE INSTRUCTION

I/ We \_\_\_\_\_ having Demat Account No. \_\_\_\_\_ with SPFL Securities Limited to execute 'Demat Debit and Pledge Instruction' (DDPI) for the purpose of transfer of securities towards deliveries / settlement obligations and pledging / re-pledging.




I/We authorize you to follow these instructions across exchanges & across segments in which I/We have already opened accounts with you or I/We may open account in future. As my/our Broker i.e agent & or DP. I/We direct and authorize you to carry out dealings on my/our behalf as per instructions given below.

I/We shall be liable for all the loses, damages and actions which my arises a consequence of your adhering to and carrying out my/our directions given above and further agree that you shall not be liable for any claim what so ever, or for any consequential, incidental, special or exemplary damages, caused by transfer/pledge/re-pledge/de-pledge of securities under this DDPI authorization FOR THE FOLLOWING PURPOSES.

Purpose 1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker	 (12) 1st Holder	 (7) 2nd Holder	 (7) 3rd Holder
Purpose 2	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	 (13) 1st Holder	 (8) 2nd Holder	 (8) 3rd Holder
Purpose 3	Mutual Fund transactions being executed on Stock Exchange order entry platforms	 (14) 1st Holder	 (9) 2nd Holder	 (9) 3rd Holder
Purpose 4	Tendering shares in open offers through Stock Exchange platforms	 (15) 1st Holder	 (10) 2nd Holder	 (10) 3rd Holder

Exchange	Depository	CM BP ID	DP ID	Account No.	Account Type
NSE	CDSL		12061200	1206120000306745	NSE POOL
NSE	CDSL		12061200	1100001100016244	NSE EARLY PAY IN
NSE	NSDL	IN553523	IN300556	10000238	NSE NSDL POOL
NSE	NSDL		12061200	1206120000306764	BSE POOL
BSE	NSDL	IN632555	IN300556	10360122	BSE NSDL POOL
NSE	NSDL		IN300556	10368439	CUSA

Depository	TM/CM-Client Securities Margin Pledge Account	DP ID	Account No.
CDSL	TM/CM-Client Securities Margin Pledge Account	12061200	1206120000439590
NSDL	TM/CM-Client Securities Margin Pledge Account	IN300556	10368893

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Address			
Signatures	 (16)	 (11)	 (11)

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

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

## Electronic Contract Note [ECN] – DECLARATION

To,

**SPFL SECURITIES LIMITED**

Registered Office : A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019 | Ph.: 011-23270163

Corporate Office : 15/63-L, Civil Lines, Kanpur-208001 | Mobile No.: +91-7376325889, +91-7376335889

Dear Sir,

I, \_\_\_\_\_ a client with SPFL Securities Limited Member of NSE, BSE

- I am aware that the Member has to provide physical contract note in respect of all the trades placed by me unless I myself want the same in the electronic form.
- I am aware that the Member has to provide electronic contract note for my convenience on my request only.
- Though the Member is required to deliver physical contract note, I find that it is inconvenient for me to receive physical contract notes. Therefore, I am voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out / ordered by me.
- I have access to a computer and am a regular internet user, having sufficient knowledge of handling the email operations.
- \* My email Id is \_\_\_\_\_ this has been created by me and not by someone else.
- I am aware that this declaration form should be in English or in any other Indian language known to me.

Note: The following sentence have to be handwritten by the client :

(The above declaration have been read and understood by me. I am aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same.)

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

Date: \_\_\_\_\_ Place: \_\_\_\_\_ Signature of the client  (17) \_\_\_\_\_

\* Please specify the email ID as per KYC documents

## **Annexure A**

### **Most Important Terms and Conditions (MITC)**

*(For non-custodial settled trading accounts)*

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

Signature of the client  (18) \_\_\_\_\_

## Voluntary freezing/blocking of Trading Accounts by Clients

To,

**SPFL SECURITIES LIMITED**

Registered Office : A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019 | Ph.: 011-23270163

Corporate Office : 15/63-L, Civil Lines, Kanpur-208001 | Mobile No.: +91-7376325889, +91-7376335889

Dear Sir,


As per SEBI guidelines, a facility for our clients to voluntarily freeze/block their online trading account access. In case they want to block access to a website, they can reach out to us via a dedicated email address, phone number. The dedicated email address is [stoptrade@spfl.co.in](mailto:stoptrade@spfl.co.in) and the phone number is 7376325889 & 7376335889. For more details, kindly read the SEBI and Exchange Circular ref. No. SEBI/HO/MIRSD/POD-1/P/CIR/2024/4 dated January 12, 2024.

Timelines for Freezing/Blocking the Online Access:

Scenario	Timelines for Issuing Acknowledgement and Freezing/Blocking
Request received during trading hours and within 15 minutes before the start of trading.	Within 15 minutes
Request received after trading hours and 15 minutes before the start of the next trading session	Before the start of the next trading session

**Note:** By opting to block/freeze the account, you are only blocking online access to your trading account. There will be no restrictions on the risk management system.

Trading Code: \_\_\_\_\_

Client Signature:  (19) \_\_\_\_\_

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

# Mode of Operation in DP Account and Mode of Communication - CDSL

To,

**SPFL SECURITIES LIMITED**

Registered Office : A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019 | Ph.: 011-23270163

Corporate Office : 15/63-L, Civil Lines, Kanpur-208001 | Mobile No.: +91-7376325889, +91-7376335889

**Ref : Client ID : 12061200 \_\_\_\_\_**

Dear Sir,

*This is our consent to operate our DP Account as jointly or any of survivors.*

*Option 1. We wish to operate jointly.*

*Option 2 . We wish to operate any of survivors.*

**Communication to be sent to:**

- 1. First Holder**
- 2. All Joint Account Holders**

*Name of First Holder* \_\_\_\_\_

*Signature of First Holder* \_\_\_\_\_

*Name of Second Holder* \_\_\_\_\_

*Signature of Second Holder* \_\_\_\_\_

*Name of Third Holder* \_\_\_\_\_

*Signature of Third Holder* \_\_\_\_\_

# Mode of Operation in DP Account and Mode of Communication - NSDL

To,

**SPFL SECURITIES LIMITED**

Registered Office : A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019 | Ph.: 011-23270163

Corporate Office : 15/63-L, Civil Lines, Kanpur-208001 | Mobile No.: +91-7376325889, +91-7376335889

**Ref : Client ID : IN300556 \_\_\_\_\_**

Dear Sir,

This is our consent to operate our DP Account as jointly or any of survivors.

Option 1. We wish to operate jointly.

Option 2 . We wish to operate any of survivors.

**Communication to be sent to:**

- 1. First Holder**
- 2. All Joint Account Holders**

Name of First Holder \_\_\_\_\_

Signature of First Holder \_\_\_\_\_

Name of Second Holder \_\_\_\_\_

Signature of Second Holder \_\_\_\_\_

Name of Third Holder \_\_\_\_\_

Signature of Third Holder \_\_\_\_\_



**FOR AP / HEAD OFFICE USE ONLY**

<b>SPFL SECURITIES LTD. (AP)</b>	
FEEDER BY	
FEEDER SIGN.	
DATE & TIME	

<b>SPFL SECURITIES LTD.</b>	
RECEIVED DATE AT H.O.	
REG. SRL. NO.	
SIGNATURE	

<b>SPFL SECURITIES LTD.</b>	
CHECKED BY	
CHECKER SIGN.	
DATE & TIME	

<b>SPFL SECURITIES LTD.</b>	
AUDITED BY	
AUDITOR SIGN.	
DATE & TIME	

<b>SPFL SECURITIES LTD.</b>	
<b>UPLOADED SIGN. DATE &amp; TIME</b>	
KRA	
CKYC	
CDSL	
NSDL	
CAPEX	
NSE	
BSE	
F&O	
CURRENCY	

<b>SPFL SECURITIES LTD.</b>	
SERIAL NO.	
FOLDER NO.	
FILED SIGN.	

<b>SPFL SECURITIES LTD.</b>	
VERIFIED BY	
SIGN.	
DATE & TIME	

<b>File Ref. No. :</b>	Form No. <input type="text"/>	Unique Client Code <input type="text"/>
	Bag No. <input type="text"/>	Branch Code <input type="text"/>
<b>Client Name</b>	<input type="text"/>	Group Code <input type="text"/>
		Trading Map in ID <input type="text"/>



# SPFL SECURITIES LTD.

CIN : U74899DL1995PLC069581 | GSTIN (UP) : 09AABCS2452C1ZP

SEBI Registration No.:

NSE (Cash-FO-Currency), BSE (Cash-FO-Currency) : INZ000214237

NSDL DP ID : IN300556 | SEBI REGN. NO.: IN-DP-543-2021

CDSL DP ID : 12061200 | SEBI REGN. NO.: IN-DP-543-2021

Member: NSE & BSE

DP: NSDL & CDSL



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