



CLIENT REGISTRATION FORM

NON-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	Bombay Stock Exchange 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	E & C Traders	“Energy & Commodity traders” or “E&C traders” are entities deriving their revenue from the international purchase and sale of physical commodity goods such as oil, natural gas, metals, soft commodities, etc. - excluding entities for which origin and sales of the commodities are exclusively domestic* (directly or indirectly); - excluding industrial groups that buy commodities for their transformation activities, and/or sell commodities that they have produced; - but including the trading affiliates of such industrial groups
14	F&O	Futures and Options
15	FATCA	Foreign Account Tax Compliance Act
16	FEMA	Foreign Exchange Management Act
17	EMF	Exchange Margin Funding
18	IFSC	Indian Financial System Code
19	IPV	In-person Verification
20	IRDA	Insurance Regulatory Development Authority
21	ITR	Income Tax Return
22	KRA	KYC Registration Agency
23	KYC	Know Your Client / Know Your Customer
24	MF	Mutual Fund
25	MICR	Magnetic Ink Character Recognition
26	MSEI	Metropolitan Share Exchange of India Limited
27	NRI	Non-Resident Indian
28	NSDL	National Securities Depository Limited
29	NSE	National Stock Exchange of India Limited
30	PAN	Permanent Account Number
31	PEP	Politically Exposed Person
32	POA	Proof of Address or Power of Attorney (as applicable)
33	POI	Proof of Identity
34	RBI	Reserve Bank of India
35	RDD	Risk Disclosure Document
36	RTA	Registrar and Transfer Agent
37	SEBI	Securities and Exchange Board of India
38	SIP	Systematic Investment Plan
39	SLB	Stock Lending and Borrowing
40	SMO	Senior Managing Official Senior Managing Officials (SMOs) are the Chairman of the Board of Directors or Supervisory Board*, the CEO*, the CFO*, and possibly other natural persons that have a prominent influence on the client’s decisions – e.g. the COO* or other executives
41	UID	Unique Identification Number
42	UIDAI	Unique Identification Authority of India
43	UPI	Unified Payments Interface
44	VPA	Virtual Payment Address
45	NHB	National Housing Bank
46	PFRDA	Pension Fund Regulatory and Development Authority

INDEX

Sr. No.	Name of the Document	Brief Significance of the Document	Page No.
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI, DEPOSITORY & EXCHANGES			
1.	Account Opening Form-Checklist & Instructions	The Document provides Instructions & Checklist relevant to opening of trading & demat account	2-3
2.	Know Your Client (KYC) Application Form	This Document captures the basic information about the client/ Joint Holders for Trading & Demat Account respectively	4-15
3.	Account Opening Form for Trading & Depository	This Document captures the additional information about the client relevant for opening Trading & Demat Account	16-20
4.	Tariff Sheet	This Document provides schedule of fee applicable for Depository Account	21
5.	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
6.	Terms and Conditions	Most Important Terms and Conditions (MITC)	32
7.	Declaration	Voluntary freezing/blocking of Trading Accounts by Clients	33
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER			
8.	Mandate for maintaining the account on running account basis	This Document enables you to maintain your account on a running account basis.	20
9.	Format	Format of the Board Resolution Declaration to be Given By HUF on the Letter Head of the HUF	22
10.	Addendum Declaration	Addendum To The Client Registration Form / Key Information Declaration to be signed by all the members of HUF [applicable in case of 'HUF' Client]	23
11.	Declaration	<ul style="list-style-type: none"> • Declaration by Partners • Declaration by Partner(s) to recognize Demat A/c for trading purpose • Declaration By HUF To Recognize Demat A/c For Trading Purpose. 	24
12.	Profile Sheet	This Document enables us to know your interest in the stock market so that we can serve you better	25
13.	UBO & FATCA Declaration	This Document captures the Details of the Ultimate Beneficial Owner & details required under FATCA	26-29
14.	Demat Debit and Pledge Instruction	Demat Debit and Pledge Instruction	30
15.	ECN Declaration	This Document enables clients to receive contract not in electronic form	31
16.	Format	No Objection From Co-parceners of HUF on Execution of DDPI by Karta	34
17.	Instructions	Mode of Operation in DP Account and Mode of Communication - CDSL	35
18.	Instructions	Mode of Operation in DP Account and Mode of Communication - NSDL	36

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 (18)  Signature of Second Holder (9)  Signature of Third Holder (9)

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.

In case of Non-Individuals, following additional documents to be obtained (as applicable)	
<i>Types of entity</i>	<p><i>Copy of the balance sheets for the last 2 financial years (to be submitted every year).</i></p> <p><i>Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year).</i></p> <ul style="list-style-type: none"> • <i>List of all Directors with details as Full name, Date & Place of birth</i> • <i>Photograph, POI, POA, PAN, DIN numbers of whole time directors/two directors in charge of day to day operations.</i> • <i>Photograph, POI, POA, PAN of Authorised Signatories.</i> • <i>Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly.</i> • <i>Copy of the Memorandum and Articles of Association and certificate of incorporation.</i> • <i>Board Resolution for investment in securities market.</i> • <i>Declaration from SMO with details as Full name, Date & Place of birth, Citizenship, Country of Residence, Position in company.</i> • <i>Authorised signatories list with specimen signatures along with authorisation letter</i>
<i>Trust</i>	<ul style="list-style-type: none"> • <i>Copy of the balance sheets for the last 2 financial years (to be submitted every year).</i> • <i>Certificate of registration (for registered trust only).</i> • <i>Copy of Trust deed.</i> • <i>List of trustees certified by managing trustees/CA.</i> • <i>Photograph, POI, POA, PAN of all Trustees.</i>
<i>HUF</i>	<ul style="list-style-type: none"> • <i>PAN of HUF.</i> • <i>Deed of declaration of HUF</i> • <i>List of coparceners.</i> • <i>Bank pass-book/bank statement in the name of HUF.</i> • <i>Photograph, POI, POA, PAN of Karta.</i>
<i>Unincorporated association or a body of individuals</i>	<ul style="list-style-type: none"> • <i>PAN of HUF.</i> • <i>Deed of declaration of HUF</i> • <i>List of coparceners.</i> • <i>Bank pass-book/bank statement in the name of HUF.</i> • <i>Photograph, POI, POA, PAN of Karta.</i>
<i>Banks/ Institutional Investors</i>	<ul style="list-style-type: none"> • <i>Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years.</i> • <i>Authorised signatories list with specimen signatures along with authorisation letter</i> • <i>Declaration from SMO with details as Full name, Date & Place of birth, Citizenship, Country of Residence, Position in company.</i> • <i>List of all Directors with details as Full name, Date & Place of birth</i>
<i>Foreign Portfolio Investor(FPI)</i>	<ul style="list-style-type: none"> • <i>Copy of SEBI registration certificate.</i> • <i>Authorised signatories list with specimen signatures along with authorisation letter</i> • <i>Declaration from SMO with details as Full name, Date & Place of birth, Citizenship, Country of Residence, Position in company.</i> • <i>List of all Directors with details as Full name, Date & Place of birth</i>
<i>Army/ Government Bodies</i>	<ul style="list-style-type: none"> • <i>Self-certification on letterhead.</i> • <i>Authorised signatories list with specimen signatures along with authorisation letter</i>
<i>Registered Society</i>	<ul style="list-style-type: none"> • <i>Copy of Registration Certificate under Societies Registration Act.</i> • <i>List of Managing Committee members.</i> • <i>Committee resolution for persons authorised to act as authorised signatories with specimen signatures along with authorisation letter</i> • <i>True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.</i>



SPFL SECURITIES LIMITED

CENTRAL KYC REGISTRY | KNOW YOUR CUSTOMER (KYC) APPLICATION FORM | LEGAL ENTITY

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
(To be filled by financial institution)

Application Type* New Update

Fields marked with "*" are mandatory fields

KYC Number

(Mandatory for KYC update request)

1. ENTITY DETAILS*

Name*

- Entity Constitution Type*
- Partnership Firm
 - Public Sector Banks
 - HUF
 - Central/State Government Department of Agency
 - Private Limited Company
 - Section 8 Companies (Companies Act,2013)
 - Public Limited Company
 - Artificial Jurisdical Person
 - Society
 - International Organisation or Agnecy / Foreign Embassy or Consular Office etc.
 - Association of Persons (AOP) / Body of Individuals (BOI)
 - Trust
 - Foreign Portfolio Investors
 - Liquidator
 - Not categorized
 - Limited Liability Partnership
 - Others Please Specify
 - Artificial Liability Partnership

Date of Incorporation / Formation*

Date of Commencement of Business

Place of Incorporation / Formation*

Registration No. (e.g. CIN):

Country of Incorporation / Formation*

TIN or Equivalent Issuing Country

TIN / GST Registration Number

PAN*

Form 60 furnished

Applicable only for Commodity Segment: EFE FPO AIF

2. PROOF OF IDENTITY (POI)*

- Officially valid document(s) in respect of person authorised to transact
- Certificate of Incorporation / Formation Registration Certificate *Regn. Certificate No.*
- Memorandum and Articles of Association Partnership Deed Trust Deed
- Resolution of Board / Managing Committee Power of attorney granted to its manager, officers or employees to transact on its behalf

3. ADDRESS*

3.1 Registered Office Address / Place of Business*

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

Line 1*

Line 2

Line 3

Landmark

City / Town / Village* District*

PIN / Post Code* State* Country*

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

Line 1*

Line 2

Line 3

Landmark

City / Town / Village* District*

PIN / Post Code* State* Country*

4. CONTACT DETAILS (All communications will be sent to Mobile number/Email-ID provided may be used)

Tel. (Off) - FAX -

Mobile - Email ID

5. NUMBER OF RELATED PERSONS



6.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 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.

 (2)

Signature of Authorised Person

Date : _____

Place : _____

8.ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies Equivalent e-document

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

KYC VERIFICATION CARRIED OUT BY

Identity Verification Done Date DD - MM - YY YY

Emp. Name _____

Emp. Code _____

Emp. Designation _____

Emp. Branch _____

[Employee Signature]

INSTITUTION DETAILS

Name : SPFL SECURITIES LIMITED

Code 102206

[Institution Stamp]



For office use only
(To be filled by
financial institution)

Application Type* New Update

Fields marked with "*" are mandatory fields

KYC Number

(Mandatory for KYC update request)

1.DETAILS OF RELATED PERSONS (Please fill the form in English and in BLOCK letters)

SECOND SIGNATORY

Addition of Related Person Deletion of Related Person Update Related Person Details
KYC Number of Related Person (if available*) If KYC number is available, only 'Related Person Type' & 'Name' is mandatory

Related Person Type* Director Promoter Karta Trustee Partner Court Appointment Official
 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 fill the form in English and in BLOCK letters) (As per OVD document only)

Name* (Same as OVD proof) Prefix First Name Middle Name Last Name

Maiden Name (If any) First Name Middle Name Last Name

Father / Spouse Name First Name Middle Name Last Name

Mother Name First Name Middle Name Last Name

Date of Birth* DD MM YY YY Place of Birth , Country of Birth

Gender* M - Male F - Female T - Transgender

Marital Status* Married Unmarried Others

Citizenship IN-Indian Others Nationality IN-Indian Others

PAN Card* Form 60 furnished

1.2 PROOF OF IDENTITY AND ADDRESS*

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 F - Proof of Possession of Aadhaar
- B- Voter ID Card G - E-KYC Authentication
- C- Driving Licence H- Offline verification of Aadhaar
- D- NREGA Job Card
- E - National Population Register Letter

Address

Line 1*
Line 2
Line 3 City / Town / Village*
District* Pin / Post Code* State*
Country*

1.3 CURRENT ADDRESS DETAILS

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

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 F - Proof of Possession of Aadhaar
- B- Voter ID Card G - E-KYC Authentication
- C- Driving Licence H- Offline verification of Aadhaar
- D- NREGA Job Card I - Deemed Proof of Address
- E - National Population Register Letter J - Self Declaration

Address

Line 1*
Line 2
Line 3 City / Town / Village*
District* Pin / Post Code* State*
Country*





For office use only
(To be filled by
financial institution)

Application Type* New Update

Fields marked with "*" are mandatory fields

KYC Number

(Mandatory for KYC update request)

1.DETAILS OF RELATED PERSONS (Please fill the form in English and in BLOCK letters) SECOND HOLDER

Addition of Related Person Deletion of Related Person Update Related Person Details

KYC Number of Related Person (if available*) If KYC number is available, only 'Related Person Type' & 'Name' is mandatory

Related Person Type* Director Promoter Karta Trustee Partner Court Appointment Official
 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 fill the form in English and in BLOCK letters) (As per OVD document only)

Name* (Same as OVD proof) Prefix First Name Middle Name Last Name

Maiden Name (If any) First Name Middle Name Last Name

Father / Spouse Name First Name Middle Name Last Name

Mother Name First Name Middle Name Last Name

Date of Birth* DD MM YY YY Place of Birth , Country of Birth

Gender* M - Male F - Female T - Transgender

Marital Status* Married Unmarried Others

Citizenship IN-Indian Others Nationality IN-Indian Others

PAN Card* Form 60 furnished

1.2 PROOF OF IDENTITY AND ADDRESS*

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 F - Proof of Possession of Aadhaar

B- Voter ID Card G - E-KYC Authentication

C- Driving Licence H- Offline verification of Aadhaar

D- NREGA Job Card

E - National Population Register Letter

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State*

Country*

1.3 CURRENT ADDRESS DETAILS

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

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 F - Proof of Possession of Aadhaar

B- Voter ID Card G - E-KYC Authentication

C- Driving Licence H- Offline verification of Aadhaar

D- NREGA Job Card I - Deemed Proof of Address

E - National Population Register Letter J - Self Declaration

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State*

Country*



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

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

1.5 OTHER DETAILS

- A. If the following is additionally applicable to you. Please tick (✓) one or more as applicable:
- | | |
|---|--|
| <input type="checkbox"/> Politically Exposed Person (PEP) | <input type="checkbox"/> Related to a Politically Exposed Person (PEP) |
| <input type="checkbox"/> Civil Servant <input type="checkbox"/> Bureaucrat | <input type="checkbox"/> Current / Former MP, MLA or MLC |
| <input type="checkbox"/> Politician <input type="checkbox"/> Not a PEP / Related to PEP | <input type="checkbox"/> Current / Former Head of State |
- B. Job Category: Chairman Director CEO CFO COO Other Senior Managing official
 Others _____
- C. Whether UBO/ SMO of listed entity (Yes or No) _____. If yes then Name of Listed company _____

1.6 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.

PHOTO

 (1)

Signature of Applicant

Date : _____

Place : _____

1.7 ATTESTATION / FOR OFFICE USE ONLY

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

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

KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date <u> DD MM YYYY </u>	Name : SPFL SECURITIES LIMITED
Emp. Name _____	Code 102206
Emp. Code _____	[Institution Stamp]
Emp. Designation _____	
Emp. Branch _____	
[Employee Signature]	

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 (Please tick whichever is applicable)

- Body Corporate FI FII/FPI Foreign Portfolio Investor Mutual Fund Trust Bank CM Others _____
 HUF Partnership Firm Registered Trust Unregistered Trust AOP LLP

B. DETAILS OF ACCOUNT HOLDER IN CASE OF TRADING ACCOUNT (Please fill all the details in CAPITAL letters only)

Name of the Client | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

C. DETAILS OF ACCOUNT HOLDERS FOR DEPOSITORY ACCOUNT (In Case of Partnership / AOP / Trust, the account would be in the name of partner or trustee)

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

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

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

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

OTHER DETAILS

Trading Name : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Website : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Whether registered with SEBI/ RBI/ NHB/ IRDA/ PF RDA/Any Other Financial Authority _____ Registration no _____

Whether E&C trader (applicable only for Corporate/ Partnership/ LLP/AOP/ FI accounts)? Yes No

Nature of Business _____

Revenue / Turnover as per the latest audited financials (Rs in crores) _____

D. STANDING INSTRUCTIONS

Sr. No.	Authorisations	Plea	Relevant
1.	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
2.	Account to be operated through power of attorney (POA)	<input type="checkbox"/>	Yes <input type="checkbox"/> No
3.	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
4.	Consent to share the email ID with the RTA	<input type="checkbox"/>	Yes <input type="checkbox"/> No
5.	Consent to receive SMS Alerts from CDSL (T & C available on www.spfl.co.in)	<input type="checkbox"/>	Yes <input type="checkbox"/> No
6.	Consent to avail of the facility of internet trading / wireless technology	<input type="checkbox"/>	Yes <input type="checkbox"/> No
7.	Consent to avail of Exchange Margin Funding	<input type="checkbox"/>	Yes <input type="checkbox"/> No
8.	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
9.	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
10.	Consent to receive standard account opening documents <input type="checkbox"/> Electronic <input type="checkbox"/> Physical		
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.	Mode of receiving Contract Notes & Statement of Accounts <input type="checkbox"/> Electronic <input type="checkbox"/> Physical (For all online clients or if not ticked, the default option would be Electronic) (Applicable for Trading Account)		
13.	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

E. BANK ACCOUNT DETAILS

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

F. 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:

G. 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.

H. Mobile no. & Email ID Declaration of Entity:

I/We hereby declare that the Mobile number as per KRA/CKYC belongs to: <input type="checkbox"/> Director <input type="checkbox"/> Promoter <input type="checkbox"/> Authorised Signatory <input type="checkbox"/> Partner <input type="checkbox"/> Karta <input type="checkbox"/> Trustee <input type="checkbox"/> UBO <input type="checkbox"/> Others _____	I/We hereby declare that the Email ID as per KRA/CKYC belongs to: <input type="checkbox"/> Director <input type="checkbox"/> Promoter <input type="checkbox"/> Authorised Signatory <input type="checkbox"/> Partner <input type="checkbox"/> Karta <input type="checkbox"/> Trustee <input type="checkbox"/> UBO <input type="checkbox"/> Others _____
--	---

I. 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.

Details of any action/proceedings initiated /pending/taken by SEBI/Stock Exchange/any other authority against the Client or its partners/Promoters/Whole Time Director/Authorised Signatory in charge of dealing in securities during the last 3 years for violation of securities law/other economic offences (including action taken against relatives/associates) _____






J. DETAILS OF PARTNER / TRUSTEE / OTHER HOLDERS

	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 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Amount (Rs.) _____ As on date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Amount (Rs.) _____ As on date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Additional Details, if applicable. (Please tick one or more as 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
Mobile Number Declaration (*Family to strictly include spouse, dependent children and dependent parents only. Kindly tick relevant option)	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 (*Family to strictly include spouse, dependent children and dependent parents only. Kindly tick relevant option)	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 _____
Nature of Business	_____	_____	_____

DECLARATION

- 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 of any of the above information is found to be false or untrue or misleading or misrepresenting, I /we am/are aware that I/we may be held liable for it.
- I/we confirm having read, received, explained and understood the contents of policies and procedures, terms & conditions governing Stock Broker, terms & conditions applicable for Margin Trading, Risk Disclosure Documents & Do's & Don't's for trading on the Exchanges, Rights and Obligations applicable for Stock Brokers, Clients, Rights and Obligations applicable for Margin Trading Facility as well as Rights and Obligations applicable for the Beneficial Owner & Depository Participants & the tariff sheet, as available on the website on the company. I/We am/are further aware that a copy of Terms & Conditions governing Stock Broker, Risk Disclosure Document, Policies and Procedures, Do's & Don't's for trading on the Exchanges and Rights and Obligations applicable for Stock Brokers, Authorized Persons & Clients, Rights and Obligations of Stock Brokers & Clients for Margin Trading Facility as well as Rights and Obligations applicable for the Beneficial Owner & Depository Participants will be received by me/us in electronic form on the email ID provided by me / us in the KYC Document.
- 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/our trading and demat account, as are in force from time to time.
- 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 report, reportable details to CBDT or close or suspend my/our account.
- Declaration of Tax Conformity- I/We acknowledge that it is my responsibility to understand and comply with and am / are in full compliance with any tax obligations and requirements and the consequences thereof that apply to me/us under the laws and regulations of my/our country(ies) of residence or any other relevant jurisdiction.
I/We hereby declare that all assets, including cash and securities, deposited in my account(s) with the SPFL SECURITIES LIMITED and the income or proceeds thereof, are currently and will continue to be fully disclosed to the relevant tax and any other authorities in my/our country(ies) of residence and in any other jurisdiction as required by the applicable laws and regulations and also authorize SPFL SECURITIES LIMITED to disclose the same to any domestic /overseas regulators or tax authorities, to enable the authorities to establish my / our tax liability therein and / or to enable SPFL SECURITIES LIMITED to comply with the regulatory requirements it is subject to.
- I/We hereby declare that I/we had provided Aadhaar Card as proof of Identity and/or proof of address to SPFL SECURITIES LIMITED even-though there were other documents accepted by SPFL SECURITIES LIMITED and I/we authorize SPFL SECURITIES LIMITED to share the copy and/or details of the Aadhaar card (excluding Aadhaar Number) as per the Regulatory/Exchange/Depository requirement. (Applicable in case Aadhaar card is provided as proof of address and/or identity)
- I/We hereby confirm that SPFL SECURITIES LIMITED may update my/our name in all Exchanges as per the name available in Income Tax records.
- I/We, opening demat account with SPFL SECURITIES LIMITED, hereby declare that I/we will submit only those inter depository transfer instructions in respect of Government Securities (G-Sec) which are bonafide and arising out of genuine trade or transfer transaction.
- I/We hereby confirm that I/We am/are not subject to sanctions nor do I/We form a part of the sanctions lists enforced by the European Union ("EU"), France ("FR"), the United States ("U.S."), United Nations Security Council ("UNSC") or form part of the list of banned organizations, designated entities/individuals listed under the Unlawful Activities (Prevention) Act, 1967.

Authorised Signatories (Enclose a Board Resolution for Authorised Signatories)

	Name (s) of holder(s)/client	Specimen Signature of holder(s)/client
Sole/First Holder		
First Signatory		 (7)
Second Signatory		
Third Signatory		
Other Holder		
Second Holder		 (2)
Third Holder		 (2)

Mode of Operation For Authorised Signatories (in case of Multiple Signatories, all the holders must sign)

<input type="checkbox"/> Any one singly	<input type="checkbox"/> As per resolution
<input type="checkbox"/> Jointly by	<input type="checkbox"/> Others (please specify)

Date: _____

Place: _____

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	

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 you 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,

 (8)

Signature of Client

Date : _____

Place : _____

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



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.

(9)

Sole/First Holder Name & Signature

(3)

Second Holder Name & Signature

(3)

Third Holder Name & Signature

FORMAT OF THE BOARD RESOLUTION

(on letter head of company)

CERTIFIED TRUE COPY OF THE RESOLUTION PASSED BY THE BOARD OF DIRECTORS OF _____
 _____ AT THEIR MEETING HELD ON _____ AT THEIR REGISTERED
 OFFICE _____

1. Resolved that a Corporate Beneficiary/ Clearing Member Account be opened for depository purpose with SPFL SECURITIES LIMITED, Registered Office : A-1662, Street No.15, G.F. Govind Puri, Kalka Ji, New Delhi-110019 & Corporate Office : 15/63-L, Civil Lines, Kanpur-208001.
2. Further Resolved that Mr. _____, and Mr. _____ Authorised Signatory of the company whose specimen signatures are attested below be jointly/severally authorised to sign on behalf of the company, all documents and forms relating to such account (in relation to debit or credit or otherwise) in such forms as may be required by SPFL SECURITIES LIMITED and further any instructions, indemnities and counter indemnities which may be required by SPFL SECURITIES LIMITED from the company in connection with the above mentioned account.
3. That this resolution be communicated to SPFL SECURITIES LIMITED and remain in force until notice in writing be given to SPFL SECURITIES LIMITED.

For: _____

Specimen Signature of:
 Mr. _____

Mr. _____

Director: _____

Attested by
 Director

DECLARATION TO BE GIVEN BY HUF ON THE LETTER HEAD OF THE HUF

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,

We, all the coparceners (members) detailed below of the Hindu Undivided Family having PAN No.do here by authorize Karta of the family Mr....., to open /operate in the name of this HUF a dealing / trading account and inter-alia to open and / or operate accounts with a Depository Participant and to issue notices and instructions relating to transfer, pledging, dematerializing or Rematerializing, orders, execute deals through you for and on behalf of the above named HUF and we state that we are and shall always be jointly and severally responsible for the dealings/ orders /trades / transactions that are executed by the karta Mr..... and all his orders /deals shall be binding on the HUF and all its members jointly as well as severally.

In the eventuality of change of Karta or change in the constitution of HUF we shall inform you in writing and understand that we are required to collect from you an acknowledgement of having taken the same on record.

The Specimen signature of the Karta Mr. is given below:

Specimen Signature in full.....

Thanking you,
 Yours faithfully,

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

ADDENDUM TO THE CLIENT REGISTRATION FORM / KEY INFORMATION

In compliance with the provisions of Prevention of Money Laundering Act, 2002 and subsequent circulars issued by SEBI thereto, we hereby obliged to consider it as a part of client registration document: -

PREVENTION OF MONEY LAUNDERING

Prevention of Money Laundering Act, 2002 (herein refer to an "Act") came into affect July 1, 2005 vide notification No. GRE 436(E) dated July 1,2005 issued by Department of Revenue, Ministry of Finance, Govt. of India. Further SEBI vide Circular reference number ISD/CIR/RR/AML/1/06 dated January 18,2006 mandated that all the Stock Brokers should formulate and implement a proper policy framework as per the guidelines on anti money laundering measures and also to adopt a Know Your Client (KYC) policy. SEBI also issued another circular reference number ISD/CIR/RR/AML/2/06 dated March 23,2006 advising all the Stock Broker to take necessary steps to ensure compliance with the requirement of Sec12of the Act inter-alia, maintenance and preservation of records and reporting of information relating to cash and suspicious transactions to Financial Intelligence Unit-India (FIU-IND), New Delhi.

The constituents should ensure that the amount invested in the securities is through legitimate sources only and does not involve and is not designated for the purpose of contravention or evasion of the provision of the Income Tax Act, Prevention of Money Laundering Act, Prevention of corruption Act and/or any other law for the time being in force enacted by Govt. of India from time to time or any rules and regulations, notifications or directions issued there under.

To ensure appropriate identification of the constituents under its KYC policy and with view to monitor the transactions for the prevention of anti money laundering, the company has reserve the right to seek information, record constituents telephonic calls and/or obtained or retained documentation for establishing the identity of the constituents, proof of residence, source of funds, etc. It may re-verify identity and obtain any incomplete or additional information for this purpose.

The constituents or their attorney, if any, shall produce independent source documents, such as photographs, certified copies of ration card/passport/pan card/driving license or such other documents or produce such information as may be required from time to time for verification of the identity, residential address, financial information of the constituents by the company.

If the constituents refuses/fails to produce the required documents and information with in the period specified in the communication sent by company to the constituents, then the company after applying due diligence measures believes that the transaction is suspicious in nature within the purview of the Act and SEBI circulars issued from time to time or on account of deficiencies in the documentation shall have absolute discretion to report suspicious transaction to FIU-IND or to reject the application or to freeze the account of constituent. Thus the KYC documentation shall comply by all the constituents in its true spirit and word.

The Company, its Directors, its Employees and agents shall not be liable in any manner for any claim arising whatsoever on account of freezing of account or on rejection of application etc. due to non-compliance of the provisions of the Act, SEBI circulars and KYC policy and or where company believes that transaction is suspicious in nature within the purview of the Act or SEBI circulars and reporting the same to FIU-IND.

This document form an integral part of the client registration form as addendum or key information memorandum and will be subject to amendments from time to time.

Thanking you.

Yours faithfully,



Signature with date

Name :

Declaration to be signed by all the members of HUF [applicable in case of 'HUF' Client]

To,
SPFL SECURITIES LIMITED
Registered Office : A-1662, Street No.15,
 G.F. Govind Puri, Kalka Ji, New Delhi-110019
Corporate Office : 15/63-L, Civil Lines, Kanpur-208001

Name of Karta :

Date of Birth of Karta : DD / MM / YYYY

PAN No. of Karta :

--	--	--	--	--	--	--	--	--	--

Dear Sir,

We confirm that the undersigned are all members of(HUF), and we have no objection to the Karta, Mr.operating a trading a/c with M/s. SPFL SECURITIES LIMITED

Yours truly,

Name of Co-parcener/Karta	Date of Birth	Relationship with Karta	Signature
1.			
2.			
3.			
4.			
5.			

Declaration by Partners

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

1. I / We, have submitted an application for opening a single / joint account for opening a Beneficial Owner [BO] account in the category "individual" for holding and carrying out transactions in respect of securities belonging to our firm, since as per the clarification issued by the Department of Company Affairs vide its Circular No. 5/75 (8/18/75-CL-V) dated March 31, 1975, Partnership Firm is not capable of being a member within the meaning of Section 41 of The Companies Act, 1956.
2. I / we represent the firm.
3. In consideration of you having agreed to accept the Permanent Account Number [PAN] issued by the Income Tax Department [ITD] to the firm along with our individual identity documents, I / We acknowledge and undertake as under :-
 - a) The acceptance of the PAN number of our firm does not amount to you having taken notice of trust or recognise our firm.
 - b) I / We shall continue to be responsible for complying with the relevant provisions of The Companies Act, 1956 and the Rules made thereunder and other applicable Laws failing which I / we shall be responsible for the consequences thereof.

Yours faithfully,  (10)

 (4)

 (4)

(Name of the Partner)

(Name of the Partner)

(Name of the Partner)

Declaration by Partner(s) to recognize Demat A/c for trading purpose

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,

This is with reference to the trading account opened with you in the name of _____ a partnership firm bearing the code _____. I _____, partner of the above mentioned firm hereby declare and authorise you to recognize the beneficiary account No. _____ with depository _____ opened in my name, for the purposes of completing the share transfer obligations pursuant to the trading operations of the Partnership Firm. I agree and understand that this is to facilitate the operation of the above trading account with you, as a beneficiary account cannot be opened with a depository participant in the name of a partnership firm as per regulations and that transfers made by you to the beneficiary account as complete discharge of obligations by you in respect of trades executed in the above trading account of the firm.

Signature (Please sign with stamp of the Firm)

(Name of the Partner whose beneficiary is used)

We, (please write name of partners)

1. _____
2. _____
3. _____
4. _____

partners of the firm confirm that any securities due to the Firm's trading account with you, if transferred to the above mentioned Demat account, will constitute good delivery of your obligation. We further state that SPFL SECURITIES LIMITED will not be responsible, if the shares are transferred to the above-mentioned a/c.

If there is any change in the information given above, same shall be informed to SPFL SECURITIES LIMITED in writing. If any such information not communicated to SPFL SECURITIES LIMITED, than SPFL SECURITIES LIMITED will not be liable for losses suffered by the firm or any of the individual partners.

Signature X

Signature X

Signature X

Name _____

Name _____

Name _____

Declaration By HUF To Recognize Demat A/c For Trading Purpose.

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,

This is with reference to the trading account opened with you in the name of _____ and bearing the code _____, I hereby declare and authorise you to recognize the beneficiary account No. _____ with depository _____ opened in the name of the undersigned who is the Karta of the HUF. For the purposes of completing the share transfer obligations pursuant to the trading operations. I agree and understand that this is to facilitate the operation of the above trading account. the transfers made by you to the beneficiary account shall be complete discharge of obligations by you in respect of trades executed in the above trading account.

Signature (Please sign with stamp of the HUF)

Signature X _____

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	



**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

FATCA, CRS, ULTIMATE BENEFICIAL OWNERSHIP (UBO) AND ADDITIONAL KYC (Details and Self Certification form for Non-Individuals)

Please read all the instructions carefully before filling the form
 *Please fill in ENGLISH and in BLOCK LETTERS with black ink
 Please consult your professional tax advisor for further guidance on FATCA & CRS classification
 Fields marked with (*) are mandatory and if not filled, the form is liable for rejection

Request ID

I. *Entity Details: (please write complete name as per Certificate of Incorporation / Registration; leaving one box blank between 2 words. Please do not abbreviate the Name)

Client Code

PAN

Entity Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

II. * Additional KYC information:

1. Gross Annual Income Details please tick (✓)
 Below 1 Lac 1-5 Lac >5-10Lac >10-25Lac >25 Lacs-1Crore >1crore

2. Net-worth in ₹ _____ as on (date) DD / MM / YYYY (not older than 1 year)

3. Source of Wealth (please tick (✓) any one) :
 Business Income Gift Ancestral Property Rental Income Prize Money Royalty Others (please specify) _____ specify here

4. Occupation (please tick (✓) any one):
 Business Service Others (please specify) _____ specify here

5. Is the entity involved/providing any of the following services please tick (✓)
 -Foreign Exchange / Money Changer Services : YES NO
 -Money Lending / Pawning : YES NO
 -Gaming / Gambling/ Lottery Services(e.g. casinos, betting syndicates) : YES NO

6. Politically Exposed Person (PEP) Status* (please tick (✓) anyone : (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Wholetime Directors)
 I am a PEP I am related to PEP Not Applicable

*PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of Stat military officers, senior executives of state owned corporations, important political party officials, etc.

7. Type of address given at KRA (please tick (✓) any one) :
 Residential or Business Residential Business Registered Office

III. * FATCA & CRS declaration: (Please tick (✓) the appropriate tax resident declaration)

City of Incorporation _____ Date of Incorporation _____ Country of Incorporation _____

Entity Constitution Type please tick (✓) as appropriate
 Sole Proprietorship Partnership Firm HUF Pvt. Ltd. Company Public Ltd. Company Society AOP/BOI Liquidator Trust Limited Liability Partnership Artificial Juridical Person Others _____ please specify

Is 'Entity' a tax resident of any country other than India?
 YES NO

(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below:)

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

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

In case the Entity's Country of Incorporation/Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here _____ mention here (refer 3(viii) of Part C)

Account holder type for Us Reportable Person (Refer 3(ix) of Part C)

Account holder type for other Reportable Person (Refer 3(ix) of Part C)

Part A: (to be filled by Financial Institutions or Direct Reporting NFEs) ○ N.A. (Please tick (✓) if not applicable)

We are a,
 Participating FFI
 Reporting Model 1 FFI (IGA 1 environment)
 Reporting Model 2 FFI (IGA 2 environment)
 Direct reporting NFE (Refer 3(vii) of Part C) please tick (✓) as appropriate

GIIN

Note: If you do not have a GIIN but you are sponsored by an other entity, please provide your sponsor's GIIN above and indicate your sponsor's name below:
 Name of the Sponsoring entity: _____

GIIN not available
 Applied For Non participating FFI Non reporting FFI
 Not required to apply for - please specify 2 digits of sub-category (Refer 1A of Part C)

Part B: (Please tick (✓) and fill any one as appropriate, to be filled by NFEs other than Direct Reporting NFEs) ○ N.A.

Is the Entity a publicly traded company ? (that is, a company whose shares are regularly traded on an established securities market) (Refer 2A of Part C) (Please specify any one stock exchange where it is regularly traded)
 Name of the Stock Exchange _____

Is the Entity a related entity of a publicly traded company? (a company whose shares are regularly traded on an established securities market) (Refer 2B of Part C) (Please specify name of the listed company and one stock exchange on which the stock is regularly traded)
 Name of the listed company _____
 Nature of relation: Subsidiary of the listed company (OR) Controlled by a Listed Company
 Name of the Stock Exchange _____

Is the Entity an Active NFE? (Refer 2C of Part C) Specify the nature of business and provide UBO form
 Nature of Business: _____
 Please specify the sub-category of Active NFE (Mention Code - Refer 2C of Part C)

Is the Entity a Passive NFE? (Refer 3(ii) of Part C) Specify the nature of business and provide UBO form
 Nature of Business: _____



*Declaration for Ultimate Beneficial Ownership (UBO)

(Mandatory for all entities EXCEPT, Publicly Traded Company or a related entity of Publicly Traded Company)

Category (please tick applicable category):

<input type="checkbox"/> Unlisted Company	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Unincorporated Association/Body of Individuals	<input type="checkbox"/> Religious Trust
<input type="checkbox"/> Public Charitable Trust	<input type="checkbox"/> Private Trust / Trust created by a Will	<input type="checkbox"/> Others <small>please specify</small>		

Details of Ultimate Beneficial Owners:- (Please list below each controlling person, confirming ALL countries of Tax Residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person. (Please attach additional sheets if necessary)
Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)

Details	UBO1	UBO2	UBO3
PAN#			
Name of UBO			
Residential Status	<input type="checkbox"/> Res. Ind. <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others _____	<input type="checkbox"/> Res. Ind. <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others _____	<input type="checkbox"/> Res. Ind. <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others _____
UBO Code (Refer 3(iv) A of Part C)			
Customer ID <small>(If any with SPFL SECURITIES LIMITED)</small>			
Percentage of Holding (%) [§]			
Address	ZIP/PIN Code : _____ State : _____ Country : _____	ZIP/PIN Code : _____ State : _____ Country : _____	ZIP/PIN Code : _____ State : _____ Country : _____
Address Type	<input type="radio"/> Residence <input type="radio"/> Business <input type="radio"/> Registered Office	<input type="radio"/> Residence <input type="radio"/> Business <input type="radio"/> Registered Office	<input type="radio"/> Residence <input type="radio"/> Business <input type="radio"/> Registered Office
Telephone	ISD STD NUMBER	ISD STD NUMBER	ISD STD NUMBER
Mobile	ISD NUMBER	ISD NUMBER	ISD NUMBER
Are you a US person ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Country of Tax Residency*			
Tax ID %			
Tax ID Type (TIN or Other, please specify)			
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
City of Birth			
Country of Birth (Mandatory)			
Nationality			
Citizenship			
Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others
Father's Name			
Occupation	<input type="radio"/> Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Doctor Private Sector <input type="radio"/> Public Sector <input type="radio"/> Forex Dealer <input type="radio"/> Government <input type="radio"/> Others _____	<input type="radio"/> Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Doctor Private Sector <input type="radio"/> Public Sector <input type="radio"/> Forex Dealer <input type="radio"/> Government <input type="radio"/> Others _____	<input type="radio"/> Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Doctor Private Sector <input type="radio"/> Public Sector <input type="radio"/> Forex Dealer <input type="radio"/> Government <input type="radio"/> Others _____

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

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

%- In case Tax Identification Number is not available, kindly provide functional equivalent

§ - Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary

FATCA - CRS Terms and Conditions

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 of any of the above information is found to be false or untrue or misleading or misrepresenting, I /we am/are aware that I/we may be held liable for it.
2. 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/our account.
3. Under Penalty of perjury, I /We certify that:
 - a. The number shown on this form is the correct taxpayer identification number of the applicant, and
 - b. The applicant is (i)an applicant taxable as US person under the laws of the United States of America("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S.S, (II)an estate the income of which is subject to U.S. federal income tax regardless of the source thereof, or
 - c. The applicant is an applicant taxable as a tax resident under the laws of country outside India.
4. I/We hereby confirm that details as provided above can be shared by SPFL SECURITIES LIMITED with the concerned Asset Management Companies (AMCs) or such other product providers, to whom FATCA/CRS norms are applicable, in whose schemes/ products we may invest/transact in future through SPFL SECURITIES LIMITED.

Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal/stamp]

Name : _____	Name : _____	Name : _____
Designation : _____	Designation : _____	Designation : _____
Signature : _____	Signature : _____	Signature : _____

PART C: FATCA Instructions & Definitions

1. Financial Institution

The term FI means any financial institution that is a Depository Institution, Custodial Institution, Investment Entity or Specified Insurance company, as defined.

- Depository institution: is an entity that accepts deposits in the ordinary course of banking or similar business.
- Custodial institution is an entity that holds as a substantial portion of its business, holds financial assets for the account of others and where its income attributable to holding financial assets and related financial services equals or exceeds 20 percent of the entity's gross income during the shorter of-

- The three financial years preceding the year in which determination is made; or
- The period during which the entity has been in existence, whichever is less.

- Investment entity is any entity:

- ✓ That primarily conducts a business or operates for or on behalf of a customer for any of the following activities or operations for or on behalf of a customer
 - Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading; or
 - Individual and collective portfolio management; or
 - Investing, administering or managing funds, money or financial asset or money on behalf of other persons;

or

- ✓ The gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, if the entity is managed by another entity that is a depository institution, a custodial institution, a specified insurance company, or an investment entity described above.

An entity is treated as primarily conducting as a business one or more of the 3 activities described above, or an entity's gross income is primarily attributable to investing, reinvesting, or trading in financial assets of the entity's gross income attributable to the relevant activities equals or exceeds 50 percent of the entity's gross income during the shorter of :

- The three-year period ending on 31 March of the year preceding the year in which the determination is made; or
- The period during which the entity has been in existence.

The term "Investment Entity" does not include an entity that is an active non-financial entity as per codes 03, 04, 05 and 06 (refer point 2C.)

- Specified Insurance Company: Entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash Value Insurance Contract or an Annuity Contract.

- FI not required to apply for GIIN:

A. Reasons why FI not required to apply for GIIN:

Code	Sub-Category
01	Governmental Entity, International Organization or Central Bank
02	Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental Entity, International Organization or Central Bank
03	Non-public fund of the armed forces, an employees' state insurance fund, a gratuity fund or a provident fund
04	Entity is an Indian FI solely because it is an investment entity
05	Qualified credit card issuer
06	Investment Advisors, Investment Managers & Executing Brokers
07	Exempt collective investment vehicle
08	Trustee of an Indian Trust
09	FI with a local client base
10	Non-registering local banks
11	FFI with only Low-Value Accounts
12	Sponsored investment entity and controlled foreign corporation
13	Sponsored, Closely Held Investment Vehicle
14	Owner Documented FFI

2. Non-financial entity (NFE) - Foreign entity that is not a financial institution

Types of NFEs that are regarded as excluded NFE are:

A. Publicly traded company (listed company)

A company is publicly traded if its stock are regularly traded on one or more established securities markets

(Established securities market means an exchange that is officially recognized and supervised by a governmental authority in which the securities market is located and that has a meaningful annual value of shares traded on the exchange)

B. Related entity of a publicly traded company

The NFE is a related entity of an entity of which is regularly traded on an established securities market;

C. Active NFE : (is any one of the following):

Code	Sub-Category
01	Less than 50 percent of the NFE's gross income for the preceding financial year is passive income and less than 50 percent of the assets held by the NFE during the preceding financial year are assets that produce or are held for the production of passive income;
02	The NFE is a Governmental Entity, an International Organization, a Central Bank, or an entity wholly owned by one or more of the foregoing;
03	Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity shall not qualify for this status if the entity functions as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes;
04	The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE shall not qualify for this exception after the date that is 24 months after the date of the initial organization of the NFE;
05	The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganizing with the intent to continue or recommence operations in a business other than that of a Financial Institution;
06	The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution;
07	Any NFE that fulfills all of the following requirements: <ul style="list-style-type: none"> • It is established and operated in India exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in India and it is a professional organization, business league, chamber of commerce, labor organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare; • It is exempt from income tax in India; • It has no shareholders or members who have a proprietary or beneficial interest in its income or assets; The applicable laws of the NFE's country or territory of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and The applicable laws of the NFE's country or territory of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organization, or escheat to the government of the NFE's country or territory of residence or any political subdivision thereof. <p>Explanation:- For the purpose of this sub-clause, the following shall be treated as fulfilling the criteria provided in the said sub-clause, namely:-</p> <ol style="list-style-type: none"> an Investor Protection Fund referred to in clause (23EA); a Credit Guarantee Fund Trust for Small Industries referred to in clause 23EB; and an Investor Protection Fund referred to in clause (23EC), of section 10 of the Act;

3. Other Definitions (including UBO)

(i) Related entity

An entity is a 'related entity' of another entity if either entity controls the other entity, or the two entities are under common control. For this purpose, control includes direct or indirect ownership of more than 50% of the votes and value in an entity.

(ii) Passive NFE

The term passive NFE means

- (1) any non-financial entity which is not an active non-financial entity including a publicly traded corporation or related entity of a publicly traded company;
 - or
 - (2) an investment entity defined in clause (b) of these instructions
 - (3) a withholding foreign partnership or withholding foreign trust;
- (Note: Foreign persons having controlling interest in a passive NFE are liable to be reported for tax information compliance purposes)

(iii) Passive income

The term passive income includes income by way of :

- (1) Dividends,
- (2) Interest
- (3) Income equivalent to interest,
- (4) Rents and royalties, other than rents and royalties derived in the active conduct of a business conducted, at least in part, by employees of the NFE
- (5) Annuities
- (6) The excess of gains over losses from the sale or exchange of financial assets that gives rise to passive income
- (7) The excess of gains over losses from transactions (including futures, forwards, options and similar transactions) in any financial assets,
- (8) The excess of foreign currency gains over foreign currency losses
- (9) Net income from swaps
- (10) Amounts received under cash value insurance contracts

But passive income will not include, in case of a non-financial entity that regularly acts as a dealer in financial assets, any income from any transaction entered into in the ordinary course of such dealer's business as such a dealer.

(iv) UBO/Controlling persons

Controlling persons are natural persons who exercise control over an entity and includes a beneficial owner under sub-rule (3) of rule 9 of the Prevention of Money-Laundering (Maintenance of Records) Rules, 2005. In the case of a trust, the controlling person means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust. In the case of a legal arrangement other than a trust, controlling person means persons in equivalent or similar positions.

Pursuant to guidelines on identification of Beneficial Ownership issued vide SEBI circular no. CIR/MIRSD/2/2013 dated January 24, 2013, persons (other than Individuals) are required to provide details of Beneficial Owner(s) ('BO'). Accordingly, the Beneficial Owner means 'Natural Person', who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest of / entitlements to:

- (1) More than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
- (2) More than 15% of the capital or profits of the juridical person, where the juridical person is a partnership; or
- (3) More than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.

Where the client is a trust, the financial institution shall identify the beneficial owners of the client and take reasonable measures to verify the identity of such persons, through the identity of the settler of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

Where no natural person is identified the identity of the relevant natural person who holds the position of senior managing official.

(A) UBO Code/Type Code of the Controlling Person:

Code	Sub-Category
01	CP of legal person-ownership
02	CP of legal person-other means
03	CP of legal person-senior managing official
04	CP of legal arrangement-trust-settlor
05	CP of legal arrangement-trust-trustee
06	CP of legal arrangement-trust-protector
07	CP of legal arrangement-trust-beneficiary
08	CP of legal arrangement-trust-other
09	CP of legal arrangement-Other-settlor equivalent
10	CP of legal arrangement-Other-trustee equivalent
11	CP of legal arrangement-Other-protector equivalent
12	CP of legal arrangement-Other-beneficiary equivalent
13	CP of legal arrangement-Other-other equivalent
14	Unknown

(v) Specified U.S. person – A U.S. person other than the following:

- (1) a corporation the stock of which is regularly traded on one or more established securities markets;
- (2) any corporation that is a member of the same expanded affiliated group, as defined in section 1471(e)(2) of the U.S. Internal Revenue Code, as a corporation described in clause (i);
- (3) the United States or any wholly owned agency or instrumentality thereof;
- (4) any State of the United States, any U.S. Territory, any political subdivision of any of the foregoing, or any wholly owned agency or instrumentality of any one or more of the foregoing;
- (5) any organization exempt from taxation under section 501(a) of the U.S. Internal Revenue Code or an individual retirement plan as defined in section 7701(a)(37) of the U.S. Internal Revenue Code;
- (6) any bank as defined in section 581 of the U.S. Internal Revenue Code;
- (7) any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code;
- (8) any regulated investment company as defined in section 851 of the U.S. Internal Revenue Code or any entity registered with the U.S. Securities and Exchange Commission under the Investment Company Act of 1940 (15 U.S.C. 80a-64);
- (9) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
- (10) any trust that is exempt from tax under section 664(c) of the U.S. Internal Revenue Code or that is described in section 4947(a)(1) of the U.S. Internal Revenue Code;
- (11) a dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any State;
- (12) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code; or
- (13) any tax-exempt trust under a plan that is described in section 403(b) or section 457(g) of the U.S. Internal Revenue Code.

(vi) Owner documented FFI

FFI meets the following requirements:

- (a) The FFI is an FFI solely because it is an investment entity;
- (b) The FFI is not owned by or related to any FFI that is a depository institution, custodial institution, or specified insurance company;
- (c) The FFI does not maintain a financial account for any non-participating FFI;
- (d) The FFI provides the designated withholding agent with all of the documentation and agrees to notify the withholding agent if there is a change in circumstances; and
- (e) The designated withholding agent agrees to report to the IRS (or, in the case of a reporting Model 1 IGA, to the relevant foreign government or agency thereof) all of the information described in or (as appropriate) with respect to any specified U.S. persons and (2). Notwithstanding the previous sentence, the designated withholding agent is not required to report information with respect to an indirect owner of the FFI that holds its interest through a participating FFI, a deemed-compliant FFI (other than an owner-documented FFI), an entity that is a U.S. person, an exempt beneficial owner, or an excepted NFE.

(vii) Direct reporting NFE

A direct reporting NFFE means a NFFE that elects to report information about its direct or indirect substantial U.S. owners to the IRS.

(viii) Exemption code for U.S. persons

Code	Sub-Category
A	An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
B	The United States or any of its agencies or instrumentalities
C	A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities
D	A corporation the stock of which is regularly traded on one or more established securities markets, as described in Reg. section 1.1472-1(c)(1)(i)
E	A corporation that is a member of the same expanded affiliated group as a corporation described in Reg. section 1.1472-1(c)(1)(i)
F	A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
G	A real estate investment trust
H	A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
I	A common trust fund as defined in section 584(a)
J	A bank as defined in section 581
K	A broker
L	A trust exempt from tax under section 664 or described in section 4947(a)(1)
M	A tax exempt trust under a section 403(b) plan or section 457(g) plan

4. Additional KYC Details













1 The entity is required to provide all the information sought under the Additional KYC details mandatorily.

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	 (11) 1st Holder	 (5) 2nd Holder	 (5) 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.	 (12) 1st Holder	 (6) 2nd Holder	 (6) 3rd Holder
Purpose 3	Mutual Fund transactions being executed on Stock Exchange order entry platforms	 (13) 1st Holder	 (7) 2nd Holder	 (7) 3rd Holder
Purpose 4	Tendering shares in open offers through Stock Exchange platforms	 (14) 1st Holder	 (8) 2nd Holder	 (8) 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	 (15)	 (9)	 (9)

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  (16) _____

* 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  (17) _____

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 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:  (18) _____

Date: _____

NO OBJECTION FROM CO-PARCENERS OF HUF ON EXECUTION OF DDPI BY KARTA

We wish to open Beneficiary Owner Account with your Depository Participant in the name of first signatory to this letter in the capacity as 'Karta' of HUF. We beg to say that the first signatory of this letter i.e. is the 'Karta' of the said Hindu Undivided Family. We the other co-parceners including adult/minor (through natural guardians) of the said family give our consent and are hereby authorize the Karta of HUF to give Demat Debit and Pledge Instruction (DDPI) and appoint any Clearing Member (CM) to execute any delivery instructions specifically for auto pay-in towards stock market obligations for and on behalf of said HUF.

We set our hands at.....on this.....day of.....20.....

Name of 'Karta'

Signature & Stamp of 'Karta'

.....

.....

S. No.	Name of Adult Co-parceners(s)	Relationship with Karta	Signature(s)
1.			
2.			
3.			
4.			
5.			

S. No.	Name of Minor Co-parceners(s)	Relationship with Karta	Signature(s)
1.			
2.			
3.			
4.			
5.			

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

SPFL SECURITIES LTD. (AP)	
FEEDER BY	
FEEDER SIGN.	
DATE & TIME	

SPFL SECURITIES LTD.	
RECEIVED DATE AT H.O.	
REG. SRL. NO.	
SIGNATURE	

SPFL SECURITIES LTD.	
CHECKED BY	
CHECKER SIGN.	
DATE & TIME	

SPFL SECURITIES LTD.	
AUDITED BY	
AUDITOR SIGN.	
DATE & TIME	

SPFL SECURITIES LTD.	
UPLOADED SIGN. DATE & TIME	
KRA	
CKYC	
CDSL	
NSDL	
CAPEX	
NSE	
BSE	
F&O	
CURRENCY	

SPFL SECURITIES LTD.	
SERIAL NO.	
FOLDER NO.	
FILED SIGN.	

SPFL SECURITIES LTD.	
VERIFIED BY	
SIGN.	
DATE & TIME	

File Ref. No. :	Form No. <input type="text"/>	Unique Client Code <input type="text"/>
	Bag No. <input type="text"/>	Branch Code <input type="text"/>
Client Name	<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



ONE-STOP SHOP FOR ALL YOUR FINANCIAL NEEDS

- Equities
- Mutual Funds
- Depository Services
- Derivatives
- IPO
- Currency Derivatives

Visit us at: www.spfl.co.in | e-mail: info@spfl.co.in

Your trusted Wealth Manager

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

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