

Client Registration

Non-Individual KYC Application Form

VERIQUS PARTNERS PRIVATE LIMITED

CIN: U66190MH2024PTC431418

SEBI Reg. No. : INZ000329631; DP Reg. No. : IN-DP-829-2026; ARN No. : 322042

Regd. Address: 132, A Wing, Mittal Tower, Nariman Point, Mumbai – 400021.

Correspondence Address: 8, Ground Floor, Nirlon House, Dr. Annie Besant Road, Worli, Mumbai - 400030.



Know Your Client (KYC)

Application Form (For Non- Individuals Only)

Please fill the form in ENGLISH and in BLOCK letters Fields marked * are mandatory Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also



Application Number: _____

Application Type*: New KYC Modification KYC

1. Entity Details (please refer guidelines)

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Date of Incorporation* _____ Place of Incorporation* _____

Date of Commencement* _____ Registration Number* _____

Entity Type* Private Ltd. Co. Public Ltd. Co. Body Corporate Partnership
 Trust/Charity/NGO HUF FPI Category I FPI Category II
 AOP Bank Government Body Defence Establishment
 Body of Individuals Society LLP
 Non-Government Organization
 Others _____

2. Proof of Identity* (please refer the guidelines)

Officially Valid Document(s) in respect of person authorized to transact

Certificate of Incorporation/Formation _____ Registration Certificate _____

Memorandum of Articles and Association Partnership Deed Trust Deed

Board Resolution Power of attorney granted to its manager, office, employees to transact on its behalf Activity Proof -1* (For Sole Proprietorship Only) Activity Proof -2* (For Sole Proprietorship Only)

3. Address Details* (please refer the guidelines)

A. Registered Address*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District+ _____ Pin Code* _____

State* _____ Country* _____

Correspondence/Local Address in India (if different from above)*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District+ _____ Pin Code* _____

Line 3 _____

City/Town/Village* _____ District+ _____ Pin Code* _____

State* _____ Country* _____

Proof of Address*

- Certificate of Incorporation/Formation Registration Certificate Other document _____
- Latest Telephone Bill# (Landline only) Latest Electricity Bill# Latest Bank Account _____
- Registered Lease/ Sale Agreement of Office Premises **Validity/Expiry Date of POA** (Expiry Date) _____
- Any other proof of address document (as listed overleaf) _____

4. Contact Details

Email ID _____ Mobile No. _____

Email ID _____ Mobile No. _____

Tel (Off) _____ Fax _____

5. Annexures Submitted

Number of

6. Remarks / Additional Information

7. Applicant Declaration

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

I/We hereby consent to receiving information from CVL KRA, CKYC through SMS/Email on the above registered number/Email address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

Client Signature		Client Wet Signature	
Date		Place	

8. For Office Use Only

KYC carried out by*	Intermediary Details*
KYC Date _____ Emp. Name _____ Emp. Code _____ Emp. Designation _____	<input type="checkbox"/> Self certified document copies received (Originals <input type="checkbox"/> Verified) True Copies of documents received (Attested) AMC / Intermediary Name OR Code:
Employee Signature and Stamp	Employee Signature and Stamp

Details of Promoters/Partners/Karta/Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant _____ PAN of the Applicant _____

Sr. No.	PAN	Name	DIN (For Directors)/ Aadhaar Number (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.	Photograph

Name & Signature of the Authorised Signatory(ies) Date [d | d |] / [m | m |] / [y | y | y | y |]



Instructions/Guidelines for filling Individual KYC Application Form

A. General Instructions:

1. Self-attestation of documents is mandatory.
2. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant 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 below list 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 addresses 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/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in 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., Head of State or of Government, senior politician, senior government/judiciary/military officer, senior executive of state owned corporation, important political party official, etc.

B. Proof of Identity (POI):

1. PAN card with photograph
2. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License / Letter issued by NPR / NREGA job card
3. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
4. Mention identification / reference number if 'Z – Others (any document notified by the central government)' is ticked.
5. Others – Identity card with applicant's photograph issued by any of the following: Central/ State Government 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):

1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
2. Others includes – Utility bill which is not more than 3 months old of any service provider (electricity, landline telephone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India
3. Identity card with applicant's photograph and address issued by any of the following: Central/ State Government 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.
4. Self declaration of High courts/Supreme court judges, giving the new address in respect of their own accounts.
5. Proof of address in name of spouse may be accepted.
6. Registered lease or Sale agreement/ Flat maintenance bill / Insurance copy / Ration card / Latest Property tax
7. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License / Letter issued by NPR / NREGA job card

D. Exemptions/Clarifications to PAN (*Sufficient documentary evidence in support of such claims to be collected)

1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
3. Investors residing in the state of Sikkim.
4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
5. In case of institutional clients, namely FIs, MFs, VCFs, FVCIs, Scheduled commercial bank, Multilateral and Bilateral development financial institutions, State Industrial development corporations, insurance companies registered with IRDA and public financial institutions as defined under section 4A of the Company Act 1956, custodians shall verify the PAN card details with the original PANs and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

1. Authorized officials of Asset Management Companies (AMCs).
2. Authorized officials of Registrar & Transfer Agent (RTA) acting on behalf of the AMC.
3. KYC compliant mutual fund distributors affiliated to Association of Mutual Funds (AMFI) and have undergone the process of 'Know Your Distributor (KYD)'.
4. Notary Public, Gazette Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/ Consulate General in the country where the client resides are permitted to attest the documents.

F. Online Mode Processing of KYC:

1. ONLINE KYC
 - Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
 - The documents should be digitally signed using DSC.
 - Intermediary attestation on documents (OSV) is exempted.

Type of Entity	Additional Documents Required over and above PAN, POI and POA
Corporate	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last two financial years (to be submitted every year). • Copy of latest share-holding pattern including the 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 submitter every year). • Photograph, POI, POA, PAN and DIN number of the whole time Director/ 2 directors in charge of day to day operations. • Photograph, POI, POA, PAN of individual promoters holding control i.e. 10% Or more either directly or indirectly. • Copy of Memorandum and Articles of Association and Certificate of Incorporation. • Copy of Board Resolution for Investment in security markets. • Authorized signatories list with specimen signatures. • Shareholding pattern.
Partnership Firm	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last two financial years (to be submitted every year). • Certificate of Registration (for registered partnership firms only). • Copy of Partnership Deed. • Authorized signatories list with specimen signatures. • Photograph, POI, POA, PAN of Partners holding control i.e. 15% Or more • Shareholding pattern.
Trust	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last to financial years (to be submitted every year). • Certificate of Registration (for registered Trusts only). • Copy of Trust Deed. • List of Trustees certified by Managing Trustees/ CA • Photograph, POI, POA, PAN of Trustees.
HUF	<ul style="list-style-type: none"> • PAN of HUF. • Deed of Declaration of HUF or List of Co-Parceners. • Bank Passbook / Bank statement in the name of HUF. • Photograph, POI, POA, PAN of KARTA.
Banks/Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years • Authorized signatories list with specimen signatures.
Unincorporated Association or a Body of Individuals	<ul style="list-style-type: none"> • Proof of existence or Constitution document. • Resolution of Managing Body and power of Attorney granted to transact business on its behalf.
Army/Government Bodies	<ul style="list-style-type: none"> • Copy of Constitution/Registration or Annual report/Balance Sheet for the last 2 financial years. • Authorized signatories list with specimen signatures.
Army/Government Bodies	<ul style="list-style-type: none"> • Self certification on letterhead. • Authorized signatories list with specimen signatures.
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Society Registration Act. • List of managing committee members. • Committee Resolution for persons authorized to act as authorised signatories with specimen sig-natures. • True copy of society rules and by-laws certified by Chairman/Secretary.
FPI Category I	<ul style="list-style-type: none"> • FPI Certificate • Constitution Documents • Copy of Board Resolution (optional) • Shareholding pattern and Ultimate Beneficiary Owners List (UBO) • Authorized signatories list with specimen signatures.
FPI Category II	<ul style="list-style-type: none"> • FPI Certificate • Constitution Documents • Copy of Board Resolution • Shareholding pattern and Ultimate Beneficiary Owners List (UBO) with UBO proof of identity • Authorized signatories list with specimen signatures.

CENTRAL KYC REGISTRY | Instructions/Check list / Guidelines for filling Legal Entity / Other than Individuals KYC Application Form

A. Clarification/Guidelines for filing Entity Details section

1. Entity Constitution Type

A-Sole Proprietorship	H-Trust I-Liquidator	O-Artificial Jurisdical Person
B-Partnership Firm	I-Liquidator	P-International Organisation or Agency/Foreign Embassy or Consular Office etc.
C-HUF	J-Limited Liability Partnership	Q-Not Categorized
D- Private Limited Company	K-Artificial Liability Partnership	R-Others
E-Public Limited Company	L-Public Sector Banks	S-Foreign Portfolio Investors
F-Society	M-Central/State Government Department or Agency	
G-Association of Persons (AOP) /Body of Individuals (BOI)	S-Foreign Portfolio Investors	
	N-Section 8 Companies (Companies Act, 2013)	

B Clarification/Guidelines for filling 'Proof of Identity[Pol]' section

- 1 Activity Proof-1 and Activity Proof-2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
- 2 Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
- 3 Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
- 4 'Equivalent e-document' means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 5 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
6. KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.

C Clarification/Guidelines for filling 'Proof of Address [POA]' section

1. State/U.T Code and Pin/Post Code will not be mandatory for Overseas addresses.
2. Certified copy of document or equivalent e-document to be submitted.

D Clarification/Guidelines for filling 'Contact Details' section

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

E Clarification/Guidelines for filling 'Related Person Details' section

1. Personal Details

- The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected

2. Proof of Address [POA]

- The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected
- POA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force. State/U.T Code and Pin/Post Code will not be mandatory for Overseas addresses.
- In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
- REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.

- 3 If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.

- 4 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.

- F Provision for capturing signature of multiple authorised persons is to be made by the RE.

List of two digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State/U.T	Code	State/U.T	Code	State/U.T	Code
Andaman & Nicobar	AN	Haryana	HR	Nagaland	NG
Andhra Pradesh	AP	Himachal Pradesh	HP	Orissa	OR
Arunachal Pradesh	AP	Jammu & Kashmir	JK	Pondicherry	PY
Assam	AS	Jharkhand	JH	Punjab	PB
Bihar	BR	Karnataka	KA	Rajasthan	RJ
Chandigarh	CH	Kerala	KL	Sikkim	SK
Chhattisgarh	CG	Lakshadweep	LD	Tamil Nadu	TN
Dadra and Nagar Haveli	DN	Madhya Pradesh	MP	Telangana	TL
Daman & Diu	DD	Maharashtra	MH	Tripura	TR
Delhi	DL	Manipur	MN	Uttar Pradesh	UP
Goa	GA	Meghalaya	ML	Uttarkhand	UA
Gujarat	GJ	Mizoram	MZ	West Bengal	WB
				Other	XX

List of ISO 3166 two digit Country Code

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Åland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GO	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Island	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Island	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Moyotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SI
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NZ	Taiwan province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire Code d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion Reunion	RE	Virgin Island, U.S.	VI
Croatia	HR	Korea, Republic	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao Curacao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy Saint Barthelemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kittsand Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French Part)	MF		

Client Registration

Non-Individual

TRADING / DEMAT & DISTRIBUTION

VERIQUS PARTNERS PRIVATE LIMITED

CIN: U66190MH2024PTC431418

SEBI Reg. No. : INZ000329631; DP Reg. No. : IN-DP-829-2026; ARN No. : 322042

Regd. Address: 132, A Wing, Mittal Tower, Nariman Point, Mumbai – 400021.

Correspondence Address: 8, Ground Floor, Nirlon House, Dr. Annie Besant Road, Worli, Mumbai - 400030.



INDEX

Sr No.	Name of the document	Brief Significance of the Document
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES		
1	Account Opening Form	A. KYC form – Document captures the basic information about the constituent and instructions/check list.
		B. Document captures the additional information about the constituent relevant to trading account and instructions/checklist.
2	Rights and Obligations – Stock Broker	Document stating the Rights & Obligations of Stock Broker / trading member, Sub-Broker and client for trading on exchanges (including additional rights & obligations in case of internet / wireless technology based trading)
3	Rights & Obligations – Demat	Rights & Obligations of Beneficial Owner & Depository Participant as prescribed by SEBI & Depositories
4	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities market.
5	Guidance Note	Document detailing do's and don'ts for trading on exchange, for the education of the investors.
6	Policies and Procedures	Document describing significant policies and procedures of the stock broker.
7	Tariff	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s).
8	FATCA	FATCA Annexure for Individual Accounts
9	Trading Preference	Mandatory details for client preference for trading on Exchange/Segment
10	MITC	Most Important terms and condition related to trading account
11	Demat Account Opening Form	Document captures the additional information about the constituent relevant to demat account and instructions/checklist
MANDATORY DISTRIBUTION RISK PROFILE		
VOLUNTARY DOCUMENTS AS PROVIDED BY STOCK BROKER/DEPOSITORY PARTICIPANT /DISTRIBUTOR		
1	Family declaration & Authorization	Authorization for receiving Communication on Mobile No. and email address

Separate Handbook

2	Declaration & Acknowledgment	Running account, ECN, Senior Management details and Derivative authorization
3	Power of Attorney/DDPI	The Power of Attorney is for the purposes of operating the bank and DP account and for facilitating settlement of trades.
4	Voluntary Authorizations	MFSS/BSE Star consent and Family access to online

Name of stock broker/trading member/clearing member	Veriquis Partners Private Limited
CIN	U66190MH2024PTC431418
SEBI Registration No. and date	INZ000329631 and 11th September 2025
SEBI Depository Participant No	IN-DP-829-2026
Segment	BSE – Cash; NSE – Cash and F&O
Registered Office Address	131/132, Floor 13, Plot 210 A Wing, Mittal Tower, Nariman Point, Mumbai – 400021, Maharashtra, India.
Correspondence Office Address	8, Ground Floor, Nirlon House, Dr Annie Besant Road, opposite Sasmira Road, Hanuman Nagar, Worli, Mumbai – 400030, Maharashtra, India
Compliance Officer	Ms. Jahanvi Trivedi; compliance.vppl@veriquis.com; 022-35713767
CEO/ Designated Director	Mr. Kaushik Shanghvi contact@veriquis.com; 022- 35713767

Investment in securities market are subject to market risks. Read all the related documents carefully before investing. Registration granted by SEBI and certification from NISM is no way guarantee performance of the intermediary or provide any assurance of returns to investors. For any grievance / dispute please contact Veriquis Partners Private Limited at the above address or Email: investor.grievance@veriquis.com and Phone No. 022- 35713767.

In case not satisfied with the response, please contact BSE at is@bseindia.com and Phone no. 91-22-22728016 and NSE at ignse@nse.co.in and Phone no. 18002660058 and NSDL at relations@nsdl.co.in and Phone No. 022-24994200.

"You can also lodge your grievances with SEBI at <https://scores.gov.in>. For any queries, feedback or assistance, please contact SEBI office on Toll Free Helpline at 1800 22 7575 / 1800 266 7575".

Additional KYC Details

I wish to avail

Distribution

Broking

Demat

Name

CKYC No.

Gross Annual Income

Below Rs.1,00,000

Rs.1,00,001 to Rs.5,00,000

Rs.5,00,001 to Rs.10,00,000

Rs.10,00,001 to Rs.25,00,000

Rs.25,00,001 to Rs.1,00,00,000

More than Rs.1,00,00,000

Net Worth

Net Worth

Entity Constitution Type

HUF

Partnership Firm

LLP

Society

Pvt Ltd Co

Unregistered Trust

Public Ltd Co

Registered Trust

AOP

BOI

Others (please specify)

Nature of Business

Bank/Demat details

Bank Details (Distribution, Broking, Demat)	Bank name			
	Branch Address			
	Account no.			
	IFSC			
	MICR			
	Bank Type	<input type="checkbox"/> Current	<input type="checkbox"/> Savings	<input type="checkbox"/> Others) _____
Depository Account Details	Depository Participant Name			
	Depository Name (NSDL/CDSL)			
	Beneficiary Name			
	DP ID			
	Beneficiary ID			

Registered Address Proof Confirmation

We, _____, hereby declare the following:

Registered Office address

Principal Place of business

FATCA/CRS/UBO Declaration

Information for reporting requirement under section 285BA of the Income-tax Act, 1961

Section 1 - Entity Identification

Name of the Entity : _____

Nature of business : _____

(refer Table 8 and mention Corresponding Code)

Country of Business : _____

(Please state names of countries from where entity is deriving/generating significant revenue/income. For e.g. If an entity is an exporter, country of business will be where the entity is generating maximum revenue from exports to such countries.)

Country of Incorporation : _____

Section 2 – Declaration of Tax residency

(If tax residency is only India, then please skip this section)

Please indicate the Entity's country of tax residence (if resident in more than one country please detail all countries and associated tax identification number and TIN issuing country).

Country/ies of Tax Residency	Tax Identification number (TIN)/ functional equivalent number	TIN/functional equivalent number Issuing Country	Document Type# attached(Tax Residence Certificate and/or TIN Card or others)	Valid till (dd/mm/yyyy)

#Please provide Documentary evidence for foreign country of tax residence and TIN

If Tax residency is USA, then is it a Specified US Person? (Please refer Table 2 for definition of "Specified US Person")	<input type="checkbox"/> Yes <input type="checkbox"/> No	If No, provide exclusion code from Table 2	
If Other than India and USA, then is it an Other Reportable Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If No, provide exclusion code from Table 3	

Section 3 – Classification of Entity

a) Is the Entity a Financial Institution? Yes No If No, then please skip this section. ("Financial institution" means a custodial institution, a depository institution, an investment entity, or a specified insurance company. Please refer Table 1 for terms used herein)

Reporting Financial Institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Provide GIIN	
Non-reporting financial Institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, provide category from Table 4	

Sponsored Investment Entity / Trustee Documented Trust?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Name of the Sponsoring Entity/Trustee: GIIN of the Sponsoring Entity/Trustee	
Non- Participating Financial Institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Owner documented Financial Institution?		If yes, each controlling person should fill details in Annexure A (Refer Table 7)	

b) Is the Entity a Non- Financial Entity (NFE):

1. Is it an Active NFE ? Yes No If No, then please skip this section.

Category of Active NFE (Please provide category from Table 5)	
If listed company, name of the stock exchange on which listed:	
If related entity of listed company, name of company and name of the stock exchange on which listed:	

2. Is it a Passive NFE ? Yes No If No, then please skip this section.

Category of Passive NFE (Please provide category from Table 5)	
--	--

If yes, each controlling person should fill details in Annexure A (Refer Table 7)

3. Is it a Direct Reporting NFE? Yes No If No, then please skip this section.

GIIN	
------	--

Declaration and Undertakings

I / We certify that:

- The information provided in the Form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income tax Rules, 1962.
- The information provided by me/us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best of our knowledge and belief, true, correct and complete and that I/we have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- I/We permit/authorise Veriquis to collect, store, communicate and process information relating to the Account and all transactions therein, by Veriquis and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- I/We undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by us or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence.

- e) I/We also agree that our failure to disclose any material fact known to us, now or in future, may invalidate our application and Veriquis would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India for the purpose or take any other action as may be deemed appropriate by Veriquis if the deficiency is not remedied by us within the stipulated period.
- f) I/We hereby accept and acknowledge that Veriquis shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me/us to Veriquis.
- g) It shall be my/our responsibilities to educate myself/ourself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules thereunder.
- h) I/We also agree to furnish such information and/or documents as Veriquis may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- i) I/We shall indemnify Veriquis for any loss that may arise to Veriquis on account of providing incorrect or incomplete information.
- j) I/We certify that I/we have the capacity to sign for the Entity as per CBDT rules/SEBI/RBI guidelines.

<p>Authorised Signature</p>	
<p>Name</p>	<p>Date</p>

Annexure A*(Please attach separate sheets for each Controlling Person/Related Person)*

Details of the Controlling Person:

Name			
CKYC number of related person and New/ Update / Delete			
Father's/Spouse Name			
Mother's Name			
Date of Birth			
Gender	<input type="checkbox"/> M - Male <input type="checkbox"/> F - Female <input type="checkbox"/> T -Transgender		
Occupation Type	<input type="checkbox"/> S- service (<input type="checkbox"/> Private sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector)		
	<input type="checkbox"/> O-others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student) <input type="checkbox"/> B – Business <input type="checkbox"/> X- Not categorized		
PAN			
Place/City of Birth		Country of Birth	
Nationality	<input type="checkbox"/> IN – Indian <input type="checkbox"/> Others		
DIN number			

*Are you a U.S. Green Card Holder (Yes/No) _____

Address

Address Type : Residential/Business Residential Business Registered office Unspecified

Line 1 : _____

Line 2 : _____

Line 3 : _____

City/Town/Village: _____ State/UT : _____ Pin code : _____ Country : _____

Proof of Identity/Address _____

(Certified copy of any one of the following needs to be submitted)

 A-Passport _____ Passport Expiry Date: _____ B-Voter ID Card _____ C-PAN Card _____ D-Driving License _____ Driving Licence Expiry Date: _____ E-UID (Aadhaar) _____ F-NREGA Job Card _____ Z-Other _____ Identification Number _____

Contact Details

Tel(off) : _____ Tel(Res) _____ Mobile: _____ Fax: _____

Email ID : _____

Controlling Person Type (please refer Table 7):

In case of legal person	<input type="checkbox"/> Ownership	<input type="checkbox"/> Other means	<input type="checkbox"/> Senior Managing Official		
In case of legal Arrangement – Trust	<input type="checkbox"/> Settlor	<input type="checkbox"/> Trustee	<input type="checkbox"/> Protector	<input type="checkbox"/> Beneficiary	<input type="checkbox"/> Others
In case of legal Arrangement – Others	<input type="checkbox"/> Settlor equivalent	<input type="checkbox"/> Trustee equivalent	<input type="checkbox"/> Protector equivalent	<input type="checkbox"/> Beneficiary equivalent	<input type="checkbox"/> Others equivalent
Unknown	<input type="checkbox"/> Unknown				

Please indicate the Country of tax residence (if resident in more than one country provide details of all countries, associated tax identification number and TIN issuing country).

Country/countries of tax residency	Tax Identification number (TIN)/ Functional Equivalent Number	TIN /Functional Equivalent Number Issuing Country	Documentary Evidence enclosed for country of tax residence and TIN	Valid till (dd/mm/yyyy)

Declaration and Undertakings / We certify that:

- a) The information provided in the Form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income tax Rules, 1962.
- b) The information provided by me/us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best of our knowledge and belief, true, correct and complete and that I/we have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- c) I/We permit/authorise Veriquis to collect, store, communicate and process information relating to the Account and all transactions therein, by Veriquis and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- d) I/We undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by us or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence.
- e) I/We also agree that our failure to disclose any material fact known to us, now or in future, may invalidate our application and Veriquis would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India for the purpose or take any other action as may be deemed appropriate by Veriquis if the deficiency is not remedied by us within the stipulated period.
- f) I/We hereby accept and acknowledge that Veriquis shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me / us to Veriquis.

- g) It shall be my / our responsibilities to educate myself / ourself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules thereunder.
- h) I/We also agree to furnish such information and/or documents as Veriquis may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- i) I/We shall indemnify Veriquis for any loss that may arise to Veriquis on account of providing incorrect or incomplete information.
- j) I/We certify that I/we have the capacity to sign for the Entity as per CBDT rules/SEBI guidelines.

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

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

Authorised Signatory	
Name	
Date	

Annexure providing information on the terms used in form pertaining to reporting requirements under section 285BA of the Income-tax Act, 1961

Table 1 - Terms used in the self-certification

Reporting Financial Institution	A custodial institution, a depository institution, an investment entity, or a specified insurance company which is registered with US IRS and obtained a Global Intermediary Identification Number (GIIN).
Custodial Institution	Any entity that holds, as a substantial portion of its business, financial assets for the account of others
Depository Institution	Any entity that accepts deposits in the ordinary course of a banking or similar business
Investment Entity	any entity that:
	(A) Primarily conducts as a business one or more of the following activities or operations for or on behalf of a customer, namely:- <ul style="list-style-type: none"> (i) 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 (ii) Individual and collective portfolio management; or (iii) Otherwise investing, administering, or managing financial assets or money on behalf of other persons;
	(B) 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 financial institution.

	(B) 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 financial institution.
	Any 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
Owner Documented Financial Institution	It is a Financial Institution which does not report to the US IRS. Owner documented FI are generally small investment entities
Direct Reporting Non-Financial Entity	It is a Passive NFE but will not share the details of the controlling persons with the financial institution it maintains accounts with but will report directly to US IRS and so its GIIN should be taken
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 fifty per cent. of the votes and value in an entity

Table 2

"Specified U.S. person" means a U.S. Person, other than the persons referred to in sub-clauses (i) to (xiii) of clause (ff) of Article 1 of the FATCA agreement;

"U.S. person" means,-

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

Sub-clauses (i) to (xiii) of clause (ff) of Article 1 of the India –US FATCA agreement are stated below:

- (i) a corporation the stock of which is regularly traded on one or more established securities markets;
- (ii) 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);
- (iii) the United States or any wholly owned agency or instrumentality thereof;
- (iv) 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;
- (v) 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;
- (vi) any bank as defined in section 581 of the U.S. Internal Revenue Code;
- (vii) any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code;
- (viii) 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);
- (ix) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
- (x) 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;
- (xi) 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;
- (xii) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code; or
- (xiii) 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.

Exclusions from being treated as Specified US Persons:

Sr.No.	Type of entity
1	a corporation the stock of which is regularly traded on one or more established securities markets;
2	a member of the same expanded affiliated group of the listed company,
3	the United States or any wholly owned agency or instrumentality thereof
4	US State or Territory, any political subdivision, or any wholly owned agency or instrumentality
5	501(a) Entity or 7701(a)(37) individual retirement plan
6	bank as defined in section 581 of the U.S. Internal Revenue Code;
7	real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code
8	regulated investment company or entity under the Investment Company Act of 1940
9	any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
10	any tax exempt trust
11	a registered dealer in securities, commodities, or derivative financial instruments
12	a broker as defined in section 6045(c) of the U.S. Internal Revenue Code;
13	any tax-exempt trust under a plan that is described in section 403(b) or section 457(g)

Table 3**Exclusions from being treated as Other Reportable Accounts**

Sr.No.	Type of entity
1	a corporation, the stock of which is regularly traded on one or more established securities markets
2	any corporation that is a related entity of a corporation mentioned in item1
3	a Governmental entity
4	an International organisation
5	a Central bank
6	6a financial institution

Table 4**Non-reporting Financial Institution**

Sr.No.	Type of entity
1	a Governmental entity, International Organisation or Central Bank, other than with respect to a payment that is derived from an obligation held in connection with a commercial financial activity of a type engaged in by a specified insurance company, custodial institution, or depositors institution.
2	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;
3	a non-public fund of the armed forces, Employees' State Insurance Fund, a gratuity fund or a provident fund;
4	An Indian investment entity held only by (1) to (3) above
5	a qualified credit card issuer;
6	Specified Investment advisor or investment manager or executing broker
7	Specified exempt collective investment vehicle
8	a financial institution with a local client base
9	a local bank*
10	a financial institution with only low-value accounts

11	sponsored investment entity and controlled foreign corporation
12	Trustee documented trust
13	sponsored closely held investment vehicle, in case of any U.S. reportable account

*Regional Rural Banks constituted under the Regional Rural Bank Act 1976 (21 of 1976), Urban Cooperative Banks constituted under respective State Cooperative Societies Acts or Multi State Cooperative Societies Act, State Cooperative Banks or District Central Cooperative Banks constituted under respective State Cooperative Societies Act and Local Area Banks licensed under the Banking Regulations Act, 1949 (10 of 1949) and regulated and registered as public limited companies under the Companies Act, 1956 (1 of 1956) or Companies Act, 2013 (18 of 2013), that satisfy the requirement under sub-clause (iv) of explanation (O) to Rule 114F(5).shall be treated as local bank.

Table 5
Active NFE

Sr.No.	Category of Active NFE (Indicative, please see the rules for the comprehensive list)
1	Less than 50 per cent of the entity's gross income for the preceding financial year is passive income and less than 50 per cent of the assets held by the entity during the preceding financial year are assets that produce or are held for the production of passive income; or
2	The stock of the entity is regularly traded on an established securities market; or; the non-financial entity is a related entity of an entity the stock of which is regularly traded on an established securities market;
3	the entity is a Governmental Entity, an International Organization, a Central Bank , or an entity wholly owned by one or more of the foregoing;
4	Holding or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a financial institution
5	New non- operating entity (upto 24 months from the date of initial organisation) with the intent to operate a business other than that of a financial institution,
6	Non –financial entity in liquidation or is reorganizing;
7	the Captive financing and hedging company for related entities that are not financial institutions,
8	Prescribed organisation in india for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or professional organization, business league, chamber of commerce, labour organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare satisfying prescribed conditions.
9	an Investor Protection Fund referred to in clause (23EA) of section 10;
10	a Credit Guarantee Fund Trust for Small Industries referred to in clause (23EB) of section1
11	an Investor Protection Fund referred to in clause (23EC), of section 10 of the Act

Table 6
Passive NFE

Sr.No.	Category of Passive NFE
1	Any non-financial entity which is not an active non-financial entity
2	An investment entity described in sub-clause (B) of clause (c) of the Explanation to clause (3)
3	A withholding foreign partnership or withholding foreign trust

Table 7**Controlling Person Type:**

Controlling Persons as per SEBI Circular No.CIR/MIRSD/2/2013 issued on the 24th January, 2013.

"A. For clients other than individuals or trusts:

4. Where the client is a person other than an individual or trust, viz., company, partnership or unincorporated association/body of individuals, the intermediary shall identify the beneficial owners of the client and take reasonable measures to verify the identity of such persons, through the following information:
- a. The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest.

Explanation: Controlling ownership interest means ownership of/entitlement to:

- i. more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
- ii. more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership; or
- iii. 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.
- b. In cases where there exists doubt under clause 4 (a) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means.

Explanation: Control through other means can be exercised through voting rights, agreement, arrangements or in any other manner.

- c. Where no natural person is identified under clauses 4 (a) or 4 (b) above, the identity of the relevant natural person who holds the position of senior managing official.

B. For client which is a trust:

5. Where the client is a trust, the intermediary 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.

C. Exemption in case of listed companies:

6. Where the client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies.

D. Applicability for foreign investors:

7. Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client."

Table 8**Business codes as per income-tax return form ITR 6**

Sr.No.	Sector	Sub-sector	Code
1	Manufacturing Industry	Agro-based industries	0101
		Automobile and Auto parts	0102
		Cement	0103
		Diamond cutting	0104

		Drugs and Pharmaceuticals	0105
		Electronics including Computer Hardware	0106
		Engineering goods	0107
		Fertilizers, Chemicals, Paints	0108
		Flour & Rice Mills	1019
		Food Processing units	0110
		Marble & Granite	0111
		Paper	0112
		Petroleum and Petrochemicals	0113
		Power and energy	0114
		Printing & Publishing	0115
		Rubber	0116
		Steel	0117
		Sugar	0118
		Tea, Coffee	0119
		Textiles, handloom, Power looms	0120
		Tobacco	0121
		Tyre	0122
		Vanaspati & Edible Oils	0123
		Others	0124
2	Trading	Chain Stores	0201
		Retailers	0202
		Wholesalers	0203
		Others	0204
3	Commission Agents	General Commission Agents	0301
4	Builders	Builders	0401
		Estate Agents	0402
		Property Developers	0403
		Others	0404
5	Contractors	Civil Contractors	0501
		Excise Contractors	0502
		Forest Contractors	0503
		Mining Contractors	0504
		Others	0505
6	Professionals	Chartered Accountants, Companies Secretaries, etc	0601
		Fashion designers	0602
		Legal professionals	0603

		Medical professionals	0604
		Nursing Homes	0605
		Specialty hospitals	0606
		Others	0607
7	Service Sector	Advertisement agencies	0701
		Beauty Parlours	0702
		Consultancy services	0703
		Courier Agencies	0704
		Computer training/educational and coaching institutes	0705
		Forex Dealers	0706
		Hospitality services	0707
		Hotels	0708
		I.T. enabled services, BPO service providers	0709
		Security agencies	0710
		Software development agencies	0711
		Transporters	0712
		Travel agents, tour operators	0713
		Others	0714
8	Financial Service Sector	Banking Companies	0801
		Chit Funds	0802
		Financial Institutions	0803
		Financial service providers	0804
		Leasing Companies	0805
		Money Lenders	0806
		Non-Banking Finance Companies	0807
		Share Brokers, Sub-brokers, etc.	0808
		Others	0809
9	Entertainment Industry	Cable T.V. productions	0901
		Film distribution	0902
		Film laboratories	0903
		Motion Picture Producers	0904
		Television Channels	0905
		Others	0906

Mobile/Email Declaration and Authorization to place Instruction/ Operate/Receive/ Information from Veriquis on my/behalf

With reference to my account with Veriquis, I/we in addition to me/us, hereby authorize the following person(s) as per the below table who's specimen signature(s) is/are appended here under. For the purpose as mentioned in the below table for my/our above mentioned account with Veriquis.

Name	Mobile		Family Declaration	Remarks
	Email			
Holder	Mobile			<input type="checkbox"/> Day end transaction confirmation
	Email id			<input type="checkbox"/> Transaction Authorisation & Corpus confirmation <input type="checkbox"/> Statements
	Mobile			For Mutual Fund
	Email id			<input type="checkbox"/> Same as above
Authorised Person 1 -	Mobile			<input type="checkbox"/> Transaction Authorisation & Corpus confirmation
	Email Id			<input type="checkbox"/> Statements
Authorised Person 2 -	Mobile			<input type="checkbox"/> Transaction Authorisation & Corpus confirmation
	Email Id			<input type="checkbox"/> Statements
Authorised Person 3 -	Mobile			<input type="checkbox"/> Transaction Authorisation & Corpus confirmation
	Email Id			<input type="checkbox"/> Statements

Important Information

The above authorized person(s) are eligible to perform all such actions as may be deemed prudent, necessary and expedient for giving effect to the above mandate from time to time. The above authority shall remain in force until such time as a fresh instruction in writing is furnished to Veriquis for canceling or amending the same. For availing the above facility following are the authorised persons.

- a. In case of HUF, Karta or any of the Co-parceners
- b. In case of Partnership firm, any of the partners
- c. In case of a Trust, any of the trustees or beneficiaries as per resolution passed by the Trust
- d. In case of Corporates, the Authorised person operating the trading account as per the Board resolution passed by the Corporate. (Applicable for broking / demat accounts). The contact details mentioned above will be updated in broking and demat.

Definition of Family (as per AMFI) – Family includes self, spouse, dependent children, dependent parents, dependent sibling, guardian, PMS, custodian and PoA. (Applicable for Mutual Fund investments / other investments) Additionally, I/We hereby declare that the mobile numbers or E-mail addresses provided by me/us do not pertain to any participant / brokers / portfolio managers / etc. or their employees or any other person/s.

FEE/CHARGES							
GST Details							
GST Registration No.							
ISD GSTIN No.							
Brokerage Charges							
Equity	Delivery		Intraday	Buy		Sell	
Futures			Intraday	Buy		Sell	
Options	_____ bps on the premium value (Maximum 2.5%) or Rs _____ per lot (Maximum Rs 100) whichever is higher						
Depository Charges							
A/c Maintenance Charges*	Yearly Rs. _____ + Applicable Charges						
Credit/Debit Charges	NIL						
<p><i>*The charges will be pro-rated monthly from the month in which the account is opened till the end of the financial year. For subsequent financial years, the same is payable at the beginning of the financial year **AMC and other charges will be debited to your ledger on yearly and monthly basis respectively.</i></p>							
Other Charges							
Pledge creation						NIL	
Pledge closure						NIL	
Pledge confirmation						NIL	
Pledge closure confirmation						NIL	
Pledge Invocation						NIL	
DEMAT - Per certificate						NIL	
REMAT - Per certificate OR Per 100 Units/shares (Whichever is higher)						NIL	
Conversion of MF units/Dematernalisation Per SOA						NIL	
Reconversion of MF units in to SOA or Redemption/Rematerialisation Per SOA						NIL	
Re-issuance of (Additional) new DIS						NIL	
Rejection/Failure per entry						NIL	
Postal Charges per request shall be charged separately						NIL	
<ul style="list-style-type: none"> • Delayed Payment Charges - Any amount which are overdue from the client towards trading either in cash or derivative segments or on account of any other reason, the Client will be charged delayed payment charges at the rate of 1.5% per month or such other rate as may be determined by the Stock Broker. • The above charges are exclusive of Applicable Taxes, Securities Transaction Tax, other charges and stamp duty. The same shall be charged to the Client's account on actual basis. • Charges/service standards are subject to revision at sole discretion of Veriquis Partners Private Limited and as informed by communication available on website or sent by ordinary post/ E- mail. Statutory and other levies being charges related. • Statutory and other levies being charges related to the execution and/ or settlement of transactions shall be separately chargeable as in force from time to time. • Charges quoted above are for the services listed. Any service not quoted above will be charged separately. • In case of expiry of future contracts and exercise and assignment of option, Derivatives Settlement Charges may be levied. • In case of buy / sell of same security during the day, the brokerage will be levied on higher side of the transaction amount/ price for both intra- day and delivery transactions. • Brokerage is also applicable on Expiry / Exercise / Assignment of Options Contract. 							
<p>I/ We have read & understood and confirm that details provided by me/us in Additional KYC Information, Mobile/Email Declaration are true and correct. I/we hereby sign all of them as mentioned below.</p>							
Name & Signature							

MANDATORY TRADING PREFERENCE**TRADING PREFERENCE**

Please sign in the relevant boxes where you wish to trade.

Exchanges	NSE, BSE	NSE	NSE, BSE
All Segments	Cash	F&O	Mutual Fund
XX	XX	XX	XX

"In future, if you wish to trade on any new segment or opt out of an existing segment/s, please submit a duly signed authorization / letter to us."

PAST ACTIONS

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

Number of years of Investment/Trading Experience

DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS

If client is dealing through the sub-broker, provide the following details:

Sub-broker's Names		SEBI Registration number	
Registered office address	Phone Fax	Website	
Whether dealing with any other stock broker/sub-broker (if case dealing with multiple stock brokers /sub-brokers, provide details of all)			
Name of stock broker		Name of Sub-broker	
Client code		Exchange	
Details of disputes/dues pending from/to such stock broker/sub-broker			

INTRODUCER DETAILS

Name of Introducer			
Status of the Introducer – Sub-broker/ Remisier/ Authorized Person/ Existing client/ Others			
Address of the Introducer			
Phone No		Signature	

Details of Promoters/Partners/Karta/whole Time Directors

Name	1)	2)	3)
Politically Exposed 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
If Yes, please describe the Position			
Related to Politically Exposed 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
If Yes, please describe the Position			
Name	4)	5)	6)
Politically Exposed 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
If Yes, please describe the Position			
Related to Politically Exposed 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
If Yes, please describe the Position			

Details of Authorised Persons to Deal in Securities on Behalf of the Company/ Firm/others

Name	1)	2)	3)
Designation			
Pan Number			
Politically Exposed 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
If Yes, please describe the Position			
Related to Politically Exposed 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
If Yes, please describe the Position			
Photograph			
Signature	xx	xx	xx
Name	4)	5)	6)
Designation			
Pan Number			
Politically Exposed 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
If Yes, please describe the Position			
Related to Politically Exposed 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
If Yes, please describe the Position			
Photograph			
Signature	xx	xx	xx

AUTHORIZATION

A. Running Account Authorization - Cash Segment

 YES No

For the purpose of operational convenience, I/we authorize Veriquis to maintain a running account (instead of settlement – to – settlement payout of funds or delivery of securities to us) in respect of the above referred account. Under this arrangement, I authorize Veriquis to keep our securities/funds, received in the payout or given upfront, in your pool or beneficiary demat/bank account. I further authorize Veriquis to utilize such funds/securities, retained by Veriquis, under the above arrangement, to meet our existing and future pay- in obligations with you. I/we shall not claim any interest on the funds and securities kept in my account with Veriquis under the above arrangement. I/We agree and authorize Veriquis to settle funds and securities as specified by us below, subject to availability of free and/ or unutilized funds/securities. However, in case of outstanding obligations/dues/payment, pursuant to my transactions, as on the date of settlement, Veriquis shall retain requisite securities / funds towards such outstanding obligations.

My / Our preferences for settlement of funds and securities is:- **Quarterly** **Monthly**

I/We understand that the said authorization to maintain a running account may be revoked at any time by me/us, in writing, and Veriquis shall act upon such revocation upon receipt of original revocation request at the registered office of Veriquis subject to any outstanding obligations/dues/payments due from me to Veriquis. I/we agree to bring any dispute arising from the statement of account or settlement so made to the notice of Veriquis preferably within 30 working days from the date of receipt of funds / securities or statements as the case may be.

B. Running Account Authorization - Derivatives Segment

 YES No

For the purpose of operational convenience, I/we authorize Veriquis to maintain a running account instead of settlement – to – settlement payout of funds to us. All funds kept to our credit by Veriquis may be treated as upfront margins and/ or security deposit, at the discretion of Veriquis, for allowing exposure to me /us. Under this arrangement made at our specific request, I/we shall not claim any interest on the funds kept in running account with Veriquis.

I/we hereby authorize Veriquis to keep and utilize the payout / margin money deposited by me/us including credits arising from Mark to Market Margin, option premium etc. and on expiry/close-out my/our open positions in derivative contracts, in our account for meeting all our future obligations and for providing limits for trading purpose on the basis of this deposit. I/we hereby authorize Veriquis to deposit the above collateral with the exchange / clearing corporation/ clearing house towards margin unless specified otherwise. These funds will be released to us as and when requested by us in writing or otherwise, subject to availability of free and unutilized balance after taking consideration all open positions and dues relating to our delivery / open positions.

I/We agree and authorize Veriquis to settle funds and securities (as per the process prescribed under the regulations) as specified by us below. In case of outstanding obligations in the F&O segment on the settlement date, Veriquis shall retain requisite securities (as per the process prescribed under the regulations) / funds towards such outstanding obligations and may also retain the funds expected to be required to meet margin obligations for next five trading days or as notified by regulatory authority from time to time.

My / Our preferences for settlement of funds and securities is:- **Quarterly** **Monthly**

I/We understand that the said authorization to maintain a running account may be revoked at any time and Veriquis shall act upon such revocation upon receipt of original revocation request at the registered office of Veriquis. I/we agree to bring any dispute arising from the statement of account or settlement so made to the notice of Veriquis preferably 30 working days from the date of receipt of funds / securities or statements as the case may be.

C. Receipt of Contract Notes and other documents in Electronic Mode

 YES No

I/We hereby consent to receive from Veriquis Partners Private Limited the digital contract notes, bills, ledgers, transaction statements, other broking related statements, amendments and such other correspondence documents, records by whatever name called in electronic form duly authenticated by means of a digital signature as specified in the Information Technology Act 2000 and the rules made thereunder to my said mentioned email id. **Email id:** _____

In case any email (containing regulatory document) sent by Veriquis to my said email address bounces back, the same shall amount to physical delivery. Veriquis will dispatch the physical regulatory documents (in lieu of the bounced mail) from the time they receive the bounced email. However, the non-receipt of the bounced mail notification by Veriquis shall amount to delivery.

I/We further hereby agree that the Veriquis Partners Private Limited shall fulfill the legal obligation, if the above documents are sent electronically to the said e-mail id and I/We am/are aware that I/we will not receive the statements / documents in paper form. In this regard, I/we further confirm and agree that:

- (i) The above is my/ our personal E-mail id. I/ We shall take all necessary steps to ensure confidentiality and the secrecy of the login and password of the abovementioned e-mail account. Veriquis shall not be liable to or responsible for any breach of secrecy. I/We am/are aware that the statements/ documents may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised. I/We will be solely responsible for the security of the information provided on my/ our aforesaid e-mail id.
- (ii) E-mails sent to any of the above mentioned e-mail account shall be deemed to be duly delivered to me/us. However, emails bounced back on account of errors/systems issue attributable to any act of Veriquis will not be considered as delivered.
- (iii) Veriquis shall not take cognizance of out of -office/ out of station auto replies and I/We shall be deemed to have received such electronic mails.
- (iv) Such Statements shall be deemed to have been delivered on the day when the e-mail is sent by Veriquis.
- (v) Veriquis shall not be liable or responsible for any Statement received from frauds or impostors or any consequences there of.
- (vi) Veriquis shall bear no liability for any technical or network-related issues at my/our end arising from the receipt of any statement issued by Veriquis.
- (vii) I/We shall inform Veriquis by way of a letter in writing duly signed by me or communicate through registered email id if there is any change in the given Email.
- (viii) I/We undertake to check the Statement and bring the discrepancies to your notice within the time period as specified under the relevant agreements entered into with Veriquis. My/Our non-verification or not accessing the Statement on regular basis shall not be a reason for disputing the same at any time.
- (ix) I/We reinstall inform in writing in prescribed format to Veriquis to discontinue the said facilities. I/We and Veriquis shall have the right to terminate such service provided a written notice is given at least 10 days in advance to the other party.

I/We shall immediately inform Veriquis about change in email address, if any. I/We further agree that Veriquis will not be responsible for non receipt of documents sent via electronic delivery due to change in/incorrect email address/correspondence address as mentioned or any other reason which inter alia include technical reasons or malfunction of my/our computer system/server/internet connection etc. Further I/We agree and undertake to indemnify Veriquis and its affiliates, that they will not be held liable/ responsible for any losses, claims damages, cost and liabilities etc. caused to me/us due to misuse of this information or pursuant to any litigation cases, complaints, actions, etc that may arise in future on account of my/ our above authorization request.

D. Declaration of Senior Management Positions

Name of persons holding Senior Management Positions

Sr No.	Name	Address	PAN	Designation

E. Derivatives Related Authorization YES No

- **Client Agreement and Acknowledgement**

I acknowledge that,

- a) I have read and understood the Risk Disclosure details displayed on your website;
- b) I understand and accept its contents, including the risks included therein; and
- c) I agree to notify you immediately of any change in my/our financial circumstances, experience needs, risk tolerance or investment objectives, or of any event that would render any of the information relating to me/us

- **Transfer of credits in the Derivatives/F&O segment**

I/we authorize Veriquis to utilize my/our credits arising from Mark to Market Margin, Option Premium, etc. on my/ our open positions and on expiry/close-out on my/our positions in derivative contracts on the stock exchanges towards margin requirement for entering into fresh derivative contracts unless specified otherwise.

- **Adjustment of cash margins in the Derivatives/F&O segment**

I/we authorize Veriquis to utilize my/our credits arising from Mark to Market Margin, Option Premium, etc. on my/ our open positions and on expiry/close-out on my/our positions in derivative contracts on the stock exchanges towards margin requirement for entering into fresh derivative contracts unless specified otherwise.

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 any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
- I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
- I/We hereby confirm that I/we am/are Fit and Proper in terms of Regulation 19(1) and Regulation 20 of Securities Contracts (Regulation) (Stock Exchanges and Clearing Corporations) Regulations, 2012 (SECC Regulations) & criteria defined in Schedule II of the SEBI (Intermediaries) Regulations, 2008.
- I/We confirm that whenever there is any change in my/our KYC information, I/we shall immediately inform Veriquis.
- **I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s), Risk Management policy, Do's and Don'ts, Risk Disclosure Document and Authorizations. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on your designated website.**

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

Signature of the Authorised Signatory
Date

Seal/Stamp of the stock broker

Notes related to Broking

1. Additional documents in case of trading in derivatives segments

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

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

2. Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.
3. Demat master or recent holding statement issued by DP bearing name of the client.

MOST IMPORTANT TERMS AND CONDITIONS (MITC)

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, networth, 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	
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Demat Mandatory details												
Veriquis Partners Private Limited 131/132, Floor 13, Plot 210 A Wing, Mittal Tower, Nariman Point. Mumbai -400021 DP ID: IN304908						Client ID (To be filled by Participant)						
We request you to open a depository account in our name as per the following details: (Please fill all the details in CAPITAL LETTERS only)						Date D D M M Y Y Y Y						
A) Details of Account holder(s):												
		Name					PAN					
Sole/ First Holder												
Second Holder												
Third Holder												
B) Type of account												
<input type="checkbox"/> Body Corporate <input type="checkbox"/> FI <input type="checkbox"/> FII <input type="checkbox"/> Qualified Foreign Investor <input type="checkbox"/> Mutual Fund <input type="checkbox"/> Trust <input type="checkbox"/> Bank <input type="checkbox"/> CM <input type="checkbox"/> HUF <input type="checkbox"/> Other (Please specify)												
C) For HUF, Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., although the account is opened in the name of the partner(s), trustee(es) etc., the name & PAN of the HUF, Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., should be mentioned below:												
a) Name				b) PAN								
D) Income Details (please specify)												
Income Range per annum				and					Network			
<input type="checkbox"/> Below ₹ 20 Lac									Amount (₹) _____			
<input type="checkbox"/> ₹ 20-50 Lac									As on			
<input type="checkbox"/> ₹ 50 Lac-1 crore									(Date) D D M M Y Y Y Y			
<input type="checkbox"/> Above ₹ 1 crore				(Networth should not be older than 1 year)								
E) In case of FIIs/Others (as may be applicable)												
RBI Approval Reference Number												
RBI Approval date						D D M M Y Y Y Y						
SEBI Registration Number (for FIIs)												
F) Please tick, if applicable, for any of your authorized signatories/ Promoters/ Partners/ Karta/ Trustees/ wholetime directors:												
						<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)						
G) Clearing Member Details (to be filled up by Clearing Members only)												
1	Name of Stock Exchange											
2	Name of Clearing Corporation/ Clearing House											
3	Clearing Member ID											
4	SEBI Registration Number											
5	Trade Name											
6	CM-BP-ID (to be filled up by Participant)											

H) Standing Instructions					
1	We authorise you to receive credits automatically into our account.				<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Account to be operated through Power of Attorney (PoA)				<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Account to be operated through Demat Debit and Pledge Instruction (DDPI)				<input type="checkbox"/> Yes <input type="checkbox"/> No
4	SMS Alert facility				
	Sr. No.	Holder	Yes	No	
	1	Sole/First Holder	<input type="checkbox"/>	<input type="checkbox"/>	
	2	Second Holder	<input type="checkbox"/>	<input type="checkbox"/>	
	3	Third Holder	<input type="checkbox"/>	<input type="checkbox"/>	
5	Mode of receiving Statement of Account [Tick any one]		<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form [Read Note 3 and ensure that email ID is provided in KYC Application Form].		
For Joint accounts, communication to be sent to <i>(In case if 'first holder' is selected, the communication will be sent as per the preference mentioned. In case 'All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned and communication to other holders will be in electronic mode. The default option will be communication to 'first holder', if no option selected)</i>					<input type="checkbox"/> First Holder <input type="checkbox"/> All Joint Holders
I wish to receive Rights and Obligations of beneficial owner and depository participant as prescribed by SEBI and depositories					<input type="checkbox"/> Physical <input type="checkbox"/> Electronic
Mention one Option for Issue of Delivery Instruction Slip (DIS) Booklet					
<input type="checkbox"/> I/We wish to receive the DIS booklet with account opening. <input type="checkbox"/> I/We do not wish to receive the DIS booklet with account opening. The DIS booklet should be issued to me/us immediately on my/our request at any later date.					
I) List of family members (Separate Annexure maybe used in case number of members is higher)					
Sr. No.	Name of Coparcener/ Member	Gender	Date of Birth	Relation with Karta	Whether Coparcener/ Member (please specify)
Declaration					
The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by us and we have understood the same and we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. We hereby declare that the details furnished above are true and correct to the best of our knowledge and belief and we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, we are aware that we may be held liable for it. I/we acknowledge the receipt of copy of the document, "Rights and obligations of the beneficial owner and Depository Participant".					

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

Sole/First Holder	Name	Signature(s)
First Signatory/ Karta of HUF		X
Second Signatory		X
Third Signatory		X
Other Holders		
Second Holder		X
Third Holder		X

Mode of Operation for Sole/First Holder (In case of joint holdings, all the holders must sign. In case of HUF this is not applicable)

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

Notes

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

Acknowledgement**Veriquis Partners Private Limited**

Address - 8, Ground Floor, Nirlon House, Dr Annie Besant Road, Worli, Mumbai – 400030, Maharashtra, India
DP ID – IN304908

Received the application from M/s _____ as the first holder alongwith _____ and _____ as the second and third holders respectively for opening of a depository account. Please quote the DP ID & Client ID allotted to you in all your future correspondence.

For Veriquis Partners Private Limited**Date:**

Demat Debit Pledge Instruction (DDPI)

Client ID:

Sr No.	Purpose	Signature of Client
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.	
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.	
3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms.	
4.	Tendering shares in open offers through Stock Exchange platforms	

Distribution Related Risk Profile

1) What is your investment objective?	<input type="checkbox"/> A. Capital Preservation	<input type="checkbox"/> B. Regular Income	<input type="checkbox"/> C. Growth and Wealth Creation
2) What is your investment time horizon?	<input type="checkbox"/> A. Less than 1 year	<input type="checkbox"/> B. 1 year to 2 year	<input type="checkbox"/> C. More than 3 years
3) Investment experience and expertise	<input type="checkbox"/> A. Some	<input type="checkbox"/> B. Moderate	<input type="checkbox"/> C. Extensive
4) What is your risk tolerance?	<input type="checkbox"/> A. I cannot consider any Loss	<input type="checkbox"/> B. I can consider loss upto 10%	<input type="checkbox"/> C. I can consider loss more than 10%
5) In which of the following have you made the highest investment till date?	<input type="checkbox"/> A. Debt Mutual Funds	<input type="checkbox"/> B. Balanced Mutual Funds	<input type="checkbox"/> C. Equity Mutual Funds

Client Categorization based on above questionnaire

<input type="checkbox"/> Conservative (score <= 60)	No of A		X 10 points	
<input type="checkbox"/> Moderate (score 61- 60)	No of B		X 20 points	
<input type="checkbox"/> Aggressive (score 100+)	No of C		X 30 points	
			Total Score	

I / We hereby agree and confirm that I/we have read, reviewed and understood above risk assessment and agree with my categorization.

I am not comfortable with the outcome of above risk assessment and I would like to change my risk profile to

Investment risk profile

- Conservative - Preservation of Capital is the single most important concern. Adjusted for inflation, investment returns may be very low, or some years, negative, in exchange for high liquidity and reduced risk of principal loss.
- Moderate - Accept possible loss as a natural function of investment risk incurred in the pursuit of higher total return. The degree of risk is normally reduced through diversification, asset allocation and periodic revisions to rebalance any over/underweight situations that develop.
- Aggressive - Willing to sustain more risk of potential losses on individual transaction in expectation that overall portfolio results will produce above-average returns. Concentrated positions and frequent portfolio changes typify this type of investor. More speculative investment choices also require careful and continuous oversight. Investors in this category may experience a wide variance in results from one year to the next in their pursuit of longer-term goals.

Authorizations

A. MFSS/BSE Star Facility for MF transactions through exchange platform

- I/We am/are interested in availing the trading facility of the Exchange for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the BSE STAR MF and MFSS on the Exchange.
- For the purpose of availing this BSE STAR MF & MFSS facility, I/We state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of BSE STAR MF & MFSS and I/We further confirm that the details contained in same remain unchanged as on date.
- I/We am/are willing to abide by the terms and conditions as mentioned in the circular 20091202-3 dated December 2, 2009 by BSE and circular No. NSE/cmtr/13533 dated November 24, 2009 by NSE and such other Notices/Circulars as may be specified by the BSE/NSE/Clearing Corporation from time to time in this regards.
- I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India and Association of Mutual Funds of India (AMFI).
- I/We shall read and understand the contents of the Scheme Information Document and Key Information Memorandum, addenda issued regarding each Mutual Fund Schemes with respect to which I/We choose to subscribe/redeem. I/We further agree to abide by the terms and conditions, rules and regulations of the Mutual Fund Schemes.
- I/We therefore request you to register me/us as your client for participating in BSE STAR MF and MFSS.

B. Family access for Online Portfolio

 YES No

I/We authorize you to give online view access to Mr/Ms/M/s. _____ having account code _____ for my/our accounts as we belong to the same family or group.

Privacy Notice and Consent

In accordance with the requirements of the Information Technology (Reasonable security practices and procedures and sensitive personal data or information) Rules 2011 ("Information Security Rules 2011"), this document includes information about:

What personal information we collect; Purposes for which we use personal information; Sharing personal information.

The term "you" refers to the client with which we propose to enter a relationship or with which we have a current or former relationship, and "we" or "us" refers to Veriquis Partners Private Limited (Veriquis) and as applicable its affiliates and related group companies.

We may provide other material regarding the collection, use, processing and sharing of personal information in account documents. If there is any conflict between this document and the account documents, the terms of the specific account documents will prevail.

1. What personal information we collect

We collect, use and process various types of personal information about you and your accounts to the extent appropriate for your relationship with us. The personal information that we collect about you may include, but is not limited to, name, address, email address, telephone number, date of birth, personal identifiers such as passport number, Permanent account Number, driver licence, other personally identifiable information, and sensitive personal data or information as defined in the Information Security Rules 2011. If you provide us with information about third parties (including your relatives, beneficiaries and guardians or your authorised representatives, employees, officers, directors, shareholders, authorised signatories and other related individuals), you agree to inform such third parties and obtain their consent to the processing of that information in accordance with this document and any other applicable laws and regulations.

2. Purposes for which we use personal information

We use and process personal information for a range of purposes, which may include but is not limited to: to provide you with products and services; to facilitate transactions; to provide you with advice and guidance; to respond to client requests; to detect, prevent and investigate fraud; to provide security for our customers, employees and the general public; to verify your identity (or the identity of your representative or agent); to perform risk management;

to comply with applicable laws, rules and regulations, including anti-terrorism, anti-money laundering and tax reporting rules and regulations to comply with legal process, to respond to requests from public, regulatory or government authorities (including authorities outside your country of residency), and to allow us to pursue remedies and limit damages; to perform internal business processes such as data analysis, audits, developing and improving new products and services; as part of the sale, merger or similar change of the business of Veriquis or its affiliates and related group companies.

3. Sharing personal information

Personal information may be shared for all of the purposes described in this document. We may share personal information with our affiliates. Our affiliates and related group companies are committed to protecting personal information and to using it only for legitimate purposes.

We may share personal information with service providers that work for us in India or in any of the countries in which we operate. We supervise our service providers and require them to appropriately protect personal information. Service providers may include:

customer service, payment or transaction processing; companies; printing companies; order fulfillment or professional services organisations (such as legal, audit, accounting services, technology, and data processing companies); technology hosting (such as webhosting, cloud computing, infrastructure provision, application service providers, data centre services and technology service providers)

We may also share personal information with other third parties subject to applicable SEBI regulations, IT laws, and data protection laws in force in India. Third parties may include public, regulatory and government authorities, intermediaries, other nonaffiliated third parties, self-regulatory organisations, or judicial or law enforcement authorities. Additionally, where you have or propose to have a relationship with a third party (contractual or otherwise) in connection with a product or service, we may share information with such third party as authorized by you, and the handling of information by that party will be subject to your agreement(s) with that party. Transfers of personal information to other countries Your personal information may be transferred around the world to countries in which we do business, including to our affiliates and related group companies, service providers or third parties, which may be located in jurisdictions that may not have the same data protection laws as those in your home country. In such circumstances we are responsible for making sure that your information continues to be protected.

4. Other

When you communicate with Veriquis, your telephone conversations and electronic communications, including emails, text messages and instant messages, may be monitored or recorded to the extent permitted by applicable law.

CONSENT

You have the right to not provide (or to withdraw by written notice at any time) your consent to the collection, use, processing and sharing of your personal information. If you choose to not provide (or to withdraw) your consent, we may not be able to provide you with certain products and services. We may make changes to this document at any time and will inform you of changes or take other steps as required by applicable law. If you have any questions regarding the collection, use, processing and sharing of your personal information (including specific details about entities with which we share personal information), please contact the Grievance Officer for Veriquis at: 8, Ground Floor, Nirlon House, Dr Annie Besant Rd, opposite Sasmira Road, Hanuman Nagar, Worli, Mumbai – 400030, Maharashtra, India.

By signing this document, you acknowledge and consent to the collection, use, processing and sharing of your personal information in accordance with the above, as provided in account documents, as permitted by local law, or as otherwise agreed between us.

Declaration

- I/We confirm that details provided by me/us are true and correct. Veriquis Partners Pvt Ltd has disclosed to me/us all the commission (In the form of trail commission or otherwise), payable to them for the different competing Schemes of various Mutual Funds amongst which the scheme is being recommended to me/us.
- Based on my/our written or electronic mode (including email communication or physically signed instruction), I/We authorize Veriquis Partners Pvt Ltd to fetch and utilize my/our KYC information from KRA/CKYC including documentary proofs for the purpose of validation and to comply with the legal and regulatory requirements from time to time.
- I/we, agree to abide by terms, conditions, rules, regulations & other statutory requirements of SEBI, Prevention of Money Laundering Act 2002 & such other regulations as may be applicable from time to time. I/we, declare that the amount being invested is through legitimate sources only & is not designed for the purposes of contravention or evasion of any act, regulation, rule, notification, directions or any other applicable laws enacted by the Government of India or any statutory authority.
- By signing this document, I/we acknowledge and consent to the collection, use, processing and sharing of my/our personal information in accordance with the above, as provided in account documents, as permitted by local law, or as otherwise agreed between me/us and Veriquis.
- I/We confirm that whenever there is any change in my/our KYC information, I/we shall immediately inform Veriquis.
- I/We hereby consent to Veriquis Partners Private Limited for downloading my/our KYC information and documents from Central KYC Registry.
- I/We acknowledge that Veriquis will send Regulatory and other communications to the e-mail address of the first holder as updated in the account.

I/ We have read & understood and confirm that details provided by me/us in Risk Profile, Authorizations are true and correct. I/we hereby read and understood the privacy consent, Terms & Conditions and sign all of them as mentioned below.

Name & Signature

Date

Place