

Application No.	<b>PG</b>
UCC	
DP Client No.	
Reference No.	
Partner	
Partner Center	
Partnership Firm Name	



TRADING & DEMAT ACCOUNT OPENING  
FORM AND DEMAT DEBIT AND PLEDGE INSTRUCTION

PARTNERSHIP FIRM



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## DETAILS OF THE DEPOSITORY PARTICIPANT AND STOCK BROKER

### NJ INDIA INVEST PRIVATE LIMITED

Registered & Correspondence Office Address : Block No.901 & 902, 6th Floor, B Tower, Udhna Udyognagar Sangh  
Commercial Complex, Central Road No.10, Udhna, Surat - 394 210, Gujarat Phone: 0261 402 5500  
SEBI Reg No - BSE, NSE & ICEX: INZ000213137, SEBI Reg No - CDSL & NSDL: IN-DP-14-2015  
Email id: dpservices@njgroup.in Website: www.njgroup.in

Compliance officer name : Mrs. Varsha P. Doctor Phone no. : 0261-6155000 E-mail id. : complianceofficer@njgroup.in	CEO name : Mr. Misbah Y. Baxamusa Phone no. : 0261- 4025901 E-mail id. : ceo@njgroup.in
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For any grievance/dispute please contact NJ IndiaInvest Private Limited at Block No.901 & 902, 6th Floor, B Tower, Udhna Udyognagar Sangh Commercial Complex, Central Road No.10, Udhna, Surat - 394 210, Gujarat or email id - dpservices@njgroup.in and Phone no.: 0261-4025500.

In case not satisfied with the response, please contact the concerned exchange(s)

CDSL at complaints@cdslindia.com and Phone no. 022-22723333

NSDL at relations@nsdl.co.in and Phone no. 022-24994200

BSE at is@bseindia.com and Phone no. : 022- 22728097

NSE at ignse@nse.co.in and Phone no.: 022-26598190



## ADDITIONAL DETAILS FOR OPENING DEMAT ACCOUNT

Application No.

**PG**

### NJ India Invest Private Limited

Registered & Correspondence Office Address : Block No.901 & 902, 6th Floor, B Tower, Udhna Udyognagar Sangh  
Commercial Complex, Central Road No.10, Udhna, Surat - 394 210, Gujarat Phone: 0261 402 5500

This information is the sole property of the trading member/DP/brokerage house and would not be disclosed to anyone unless required by law or except with the express permission of clients.

(To be filled by DP)

Date:

DP Internal Reference No. \_\_\_\_\_

DP ID \_\_\_\_\_

Client ID \_\_\_\_\_

(To be filled by the applicant in BLOCK LETTERS & with BLACK BALL POINT PEN in English )

I/We request you to open a Demat Account in my/our name as per the following details:

**Type of Entity** ☐ Partnership Firm

**Type of Account (Please tick whichever is applicable)**

Status	Sub-Status	
Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual-Director
	<input type="checkbox"/> Individual Director's Relative	<input type="checkbox"/> Individual AOP
	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Minor
	<input type="checkbox"/> Individual Margin Trading A/C (MANTRA)	<input type="checkbox"/> Others(specify) _____

### Constituent Details

Name of the Firm \_\_\_\_\_

PAN of Firm: \_\_\_\_\_ Registration Authority: \_\_\_\_\_

Place of Registration \_\_\_\_\_ Date of Registration:

### Details of Partners

**First Partner:** ☐ Mr. ☐ Ms.

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

First Name

Middle Name

Last Name

Designation: \_\_\_\_\_

PAN \_\_\_\_\_ Unique Identification No.(UID) \_\_\_\_\_

**Second Partner:** ☐ Mr. ☐ Ms.

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

First Name

Middle Name

Last Name

Designation: \_\_\_\_\_

PAN \_\_\_\_\_ Unique Identification No.(UID) \_\_\_\_\_

**Third Partner:** ☐ Mr. ☐ Ms.

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

First Name

Middle Name

Last Name

Designation: \_\_\_\_\_

PAN \_\_\_\_\_ Unique Identification No.(UID) \_\_\_\_\_

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

\*In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.



## ADDITIONAL DETAILS FOR OPENING DEMAT ACCOUNT

### Additional Details

I/We instruct the DP to receive each and every credit in my/our account [Automatic Credit] (If not marked, the default option would be 'Yes')	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly																				
I/We request you to send Electronic Transaction - cum - Holding Statement at the Email ID _____	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
I/ We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
I / We would like to receive the Annual Report (Tick the applicable box. If not marked the default option would be in Physical)	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Physical & Electronic																				
I/We wish to receive dividend/ interest directly into my bank account as given below through ECS. (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time ]	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Account to be operated through Demat Debit and Pledge Instruction (DDPI)	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
SMS Alert Facility (CDSL) Mobile No. <b>+91</b> _____ <small>(Refer terms &amp; conditions in the booklet provided)</small> [(Mandatory , if you are giving Demat Debit and Pledge Instruction (DDPI))(if DDPI is not granted & you do not wish to avail of this facility, cancel this option).	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
SMS Alert Facility(NSDL): [Mandatory if you are giving Demat Debit and Pledge Instruction (DDPI).																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Sr. No.</th> <th style="width: 20%;">Holder</th> <th style="width: 10%;">Yes</th> <th style="width: 10%;">No</th> <th style="width: 50%;">Mobile No.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td>Sole/First Holder</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td><b>+91</b> _____</td> </tr> <tr> <td style="text-align: center;">2</td> <td>Second Holder</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td><b>+91</b> _____</td> </tr> <tr> <td style="text-align: center;">3</td> <td>Third Holder</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td><b>+91</b> _____</td> </tr> </tbody> </table>		Sr. No.	Holder	Yes	No	Mobile No.	1	Sole/First Holder	<input type="checkbox"/>	<input type="checkbox"/>	<b>+91</b> _____	2	Second Holder	<input type="checkbox"/>	<input type="checkbox"/>	<b>+91</b> _____	3	Third Holder	<input type="checkbox"/>	<input type="checkbox"/>	<b>+91</b> _____
Sr. No.	Holder	Yes	No	Mobile No.																	
1	Sole/First Holder	<input type="checkbox"/>	<input type="checkbox"/>	<b>+91</b> _____																	
2	Second Holder	<input type="checkbox"/>	<input type="checkbox"/>	<b>+91</b> _____																	
3	Third Holder	<input type="checkbox"/>	<input type="checkbox"/>	<b>+91</b> _____																	
Transactions Using Secured Texting Facility (TRUST). <small>(Refer terms &amp; conditions in the booklet provided)</small> I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I have read and understood the Terms and Conditions prescribed by CDSL for the same. I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST.  Stock Exchange Name/ID _____ Clearing Member Name _____ Clearing Member ID (Optional) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
<b>easi</b> If yes, please contact your DP for details [Facility through CDSL's website: <a href="http://www.cdslindia.com">www.cdslindia.com</a> wherein a BO can view his ISIN balances, transactions and value of the portfolio online.]	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
<b>IdeAS</b> If yes, please contact your DP for details [Facility through NSDL's website: <a href="https://eservices.nsdl.com/">https://eservices.nsdl.com/</a> wherein a BO can view his ISIN balances and value of their demat account online.]	<input type="checkbox"/> Yes <input type="checkbox"/> No																				

## ADDITIONAL DETAILS FOR OPENING TRADING ACCOUNT

I/We request you to open a Trading Account in my/our name as per the following details:

### Depository Account Details

Beneficiary Name \_\_\_\_\_  
DP Name N J I n d i a I n v e s t P r i v a t e L i m i t e d  
DP Address B l o c k N o 9 0 1 & 9 0 2 6 t h F l o o r B T o w e r U d h n a  
U d y o g n a g a r S a n g h C o m m e r c i a l C o m p l e x  
C e n t r a l R o a d N o 1 0 U d h n a S u r a t - 3 9 4 2 1 0  
DP ID \_\_\_\_\_ Client ID \_\_\_\_\_ Depository Name \_\_\_\_\_

### Trading Preferences

Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you

Exchanges	NSE, BSE		
All Segments	Mutual Fund	Cash	Debt

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

### Past Actions

Please give the details of any action taken by SEBI/Stock Exchange/ any other authority for violation of Securities Laws/ other economic offences specifically indicating any action taken during the previous 3 years.

### Dealings through Sub-brokers and other Stock Brokers

Whether dealing through the sub-broker, provide the following details:

Sub-broker's Name: \_\_\_\_\_  
SEBI Registration number: \_\_\_\_\_  
Registered office address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Website: \_\_\_\_\_

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

If Yes, Stock Broker's Name: \_\_\_\_\_  
Client Code: \_\_\_\_\_ Name of the Exchange: \_\_\_\_\_  
Details of disputes/dues pending from/to such stock broker/sub- broker: \_\_\_\_\_



## ADDITIONAL DETAILS FOR OPENING TRADING ACCOUNT

### Additional Details

I wish to receive ☐ Physical Contract note ☐ Electronic Contract Note (ECN) (please specify):

Specify your Email id, if applicable: \_\_\_\_\_

Whether you wish to avail the facility of ☐ Internet trading ☐ Wireless technology (please specify):

### Investment/ Trading Experience

☐ No Prior Experience

Years in Equity

Years in Derivatives

Years in Other Investment Products

### Details of Authorised Persons

**First Authorised Person:** ☐ Mr. ☐ Ms.

Name: \_\_\_\_\_  
First Name Middle Name Last Name

Designation: \_\_\_\_\_

PAN \_\_\_\_\_ Unique Identification No.(UID) \_\_\_\_\_

### Residential Address

City: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_ Pin/Zip Code: \_\_\_\_\_

Mobile No. \_\_\_\_\_ Phone (Resi.): \_\_\_\_\_

Phone (Off): \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Second Authorised Person:** ☐ Mr. ☐ Ms.

Name: \_\_\_\_\_  
First Name Middle Name Last Name

Designation: \_\_\_\_\_

PAN \_\_\_\_\_ Unique Identification No.(UID) \_\_\_\_\_

### Residential Address

City: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_ Pin/Zip Code: \_\_\_\_\_

Mobile No. \_\_\_\_\_ Phone (Resi.): \_\_\_\_\_

Phone (Off): \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Third Authorised Person:** ☐ Mr. ☐ Ms.

Name: \_\_\_\_\_  
First Name Middle Name Last Name

Designation: \_\_\_\_\_

PAN \_\_\_\_\_ Unique Identification No.(UID) \_\_\_\_\_





## ADDITIONAL DETAILS FOR OPENING TRADING ACCOUNT

### Residential Address

City: \_\_\_\_\_ State: \_\_\_\_\_  
Country: \_\_\_\_\_ Pin/Zip Code: \_\_\_\_\_  
Mobile No. \_\_\_\_\_ Phone (Resi.): \_\_\_\_\_  
Phone (Off): \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

### Introducer's Details

#### Introducer 1 (For Mutual Fund)

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

Status: ☐ Sub-broker ☐ Remisier ☐ Authorized Person ☐ Existing Client  
☐ Others, please specify \_\_\_\_\_

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

Contact Number: \_\_\_\_\_

Introducer's Code: \_\_\_\_\_

Introducer's PAN: \_\_\_\_\_

Introducer  
Signature

x

#### Introducer 2 (For Capital Market)

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

Status: ☐ Sub-broker ☐ Remisier ☐ Authorized Person ☐ Existing Client  
☐ Others, please specify \_\_\_\_\_

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

Contact Number: \_\_\_\_\_

Introducer's Code: \_\_\_\_\_

Introducer's PAN: \_\_\_\_\_

Introducer  
Signature

x

### FOR OFFICE USE ONLY

I/We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document(s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on Company's website, if any, for the information of the clients.

**Member's  
Authorized**

x

**Signatory**

Signed by: \_\_\_\_\_

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Seal/Stamp of  
stock broker**





## ADDITIONAL DETAILS FOR OPENING TRADING ACCOUNT

### Multiple Bank Accounts

To \_\_\_\_\_ UCC: \_\_\_\_\_  
NJ India Invest Private Limited  
Block No.901 & 902, 6th Floor, 'B' Tower, Udhna Udyog Nagar Sangh Commercial Complex, Central Road No. 10, Udhna,  
Surat - 394210, Gujarat.

I request you to make the following additions to my Trading account in your records.

For each bank account, investors should produce originals for verification or submit originals of the documents mentioned below.

### Bank Details

1. Name of the Bank _____	
Account No _____	IFSC Code: _____
Bank Address _____	
_____	City: _____
State: _____	Pin/Zip Code: _____
Country: _____	
MICR Code _____	Account Type: <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Other _____
Document attached (Any one): <input type="checkbox"/> Cancelled Cheque with name pre-printed <input type="checkbox"/> Bank statement	
<input type="checkbox"/> Pass book <input type="checkbox"/> Bank Letter	

2. Name of the Bank _____	
Account No _____	IFSC Code: _____
Bank Address _____	
_____	City: _____
State: _____	Pin/Zip Code: _____
Country: _____	
MICR Code _____	Account Type: <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Other _____
Document attached (Any one): <input type="checkbox"/> Cancelled Cheque with name pre-printed <input type="checkbox"/> Bank statement	
<input type="checkbox"/> Pass book <input type="checkbox"/> Bank Letter	

Bank Proof (Any one Proof Required from the following list (Self attested)):

- 1) Copy of cancelled cheque Leaf with name of the accountholder preprinted on it
- 2) Bank passbook having name and address of the account holder and latest transaction pages being not more than 2 months old.
- 3) Bank Statement having name and address of the accountholder being not more than 2 months old
- 4) Letter from the bank certifying the account number and period from which the account is in operation. The bank branch and designation and name of the bank official should be clear. Also enclosed copy of cheque.

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

x \_\_\_\_\_ 04/17

Sole/First Authorised Signatory





## COMMON DETAILS FOR OPENING TRADING & DEMAT ACCOUNT

### Bank Details (For Demat purpose and will be used as default bank)

Name of the Bank \_\_\_\_\_  
Branch \_\_\_\_\_ IFSC Code: \_\_\_\_\_  
Bank Address \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Country: \_\_\_\_\_ Pin/Zip Code: \_\_\_\_\_  
Account No \_\_\_\_\_  
Bank Code \_\_\_\_\_ Account Type: ☐ Savings ☐ Current ☐ Other \_\_\_\_\_  
(9 digit MICR Code)

1. Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)
  2. Photocopy of the Bank Statement having name and address of the BO.
  3. Photocopy of the Passbook having name and address of the BO, (or)
  4. Letter from the Bank.
- (In case of options ii, iii, and iv above, MICR code of the branch should be present/ mentioned on the document and should be self-certified by the BO.)

### Other Details

Gross Annual Income Details of Firm	Income Range per annum: <input type="checkbox"/> Up to ₹1,00,000 <input type="checkbox"/> ₹1,00,000 to ₹5,00,000 <input type="checkbox"/> ₹ 5,00,000 to ₹10,00,000 <input type="checkbox"/> ₹10,00,000 to ₹ 25,00,000 <input type="checkbox"/> ₹ 25,00,000 to ₹1,00,00,000 <input type="checkbox"/> More than ₹1,00,00,000
	Net worth as on (Date) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ₹ _____ [Net worth should not be older than 1 year]
Please tick If any of the Partner is either <input type="checkbox"/> Politically Exposed Person (PEP) or <input type="checkbox"/> Related to Politically Exposed Person (RPEP)	
Any other information	

## COMMON DETAILS FOR OPENING TRADING & DEMAT ACCOUNT

### Details of Politically Exposed Persons (PEP)/ Related to Politically Exposed Person (RPEP)

Name of holder \_\_\_\_\_

PAN \_\_\_\_\_

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Sr. No	Name of the Partners	Relation with the holder	Please tick the relevant option.
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP

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

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

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

x 05/17

Sole/First Authorised Signatory

x 01/5

Second Authorised Signatory

x 01/5

Third Authorised Signatory

### To be filled by Branch

Employee Name \_\_\_\_\_

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Branch \_\_\_\_\_

Signature of  
the Employee

x

### For Processing Office Only

Audited by \_\_\_\_\_ UCC \_\_\_\_\_

Storage File No. \_\_\_\_\_

☐ (Originals verified) True copies of documents received

☐ (Attested) True copies of documents received

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Member's  
Authorized  
Signatory**

x

**Seal/Stamp of  
stock broker**

.....(Please Tear Here).....

### ACKNOWLEDGEMENT RECEIPT

Application No.

**PG**

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

We hereby acknowledge the receipt of the Trading and Demat Account Opening Form.

Name of First Authorised Signatory	
Name of Second Authorised Signatory	
Name of Third Authorised Signatory	

For, **NJ India Invest Private Limited** \_\_\_\_\_



## MANDATORY & NON-MANDATORY DOCUMENT AND DECLARATION FOR OPENING TRADING AND DEMAT ACCOUNT

From

Entity Name \_\_\_\_\_

DP ID \_\_\_\_\_

Client ID \_\_\_\_\_

To  
NJ INDIAINVEST PRIVATE LIMITED,  
Block No.901 & 902, 6th Floor, 'B' Tower, Udhna Udyog Nagar Sangh Commercial Complex,  
Central Road No. 10, Udhna, Surat - 394210, Gujarat.

**Dear Sir,**

- I/We hereby opt to receive the below listed documents in ☐ Physical Form ☐ Electronic Form
- I/We am/are desirous of opening the trading and demat account with NJ India Invest Private Limited in the process of executing client registration documents relating to the opening of trading and demat account.
- I/We have furnished all the details required in the Account opening form as per SEBI/Exchange/Depository requirements. I/We confirm having read/been explained & understood the contents of the Mandatory and Non- Mandatory documents which are provided to me/us. I/We agree that the Mandatory and Non-Mandatory document contains following:

a)	Instructions for Demat Account	(Page No. 1)
b)	Instructions for Trading Account	(Page No. 2)
c)	Details & Checklist for Trading and Demat Account	(Page No. 3)
d)	Rights and Obligations of the parties (including additional rights and obligations in case of internet and wireless technology based trading) prescribed by SEBI and Stock exchanges.	(Page No. 7)
e)	Internet & Wireless Technology based Trading facility provided by Stock Brokers to Clients	(Page No. 11)
f)	Uniform Risk Disclosure Documents (RDD) prescribed by SEBI and Stock exchanges detailing risk associated with dealing in the securities market	(Page No. 12)
g)	Proprietary Trade Declaration	(Page No. 16)
h)	Guidance note detailing Do's and Don'ts for trading on Stock exchanges, for the education of the investors	(Page No. 17)
i)	Policies and Procedures - Document describing significant policies and procedures of the Stock Broker	(Page No. 19)
j)	Information on Anti Money Laundering for educating Clients	(Page No. 21)
k)	Voluntary Clauses – Enabling clauses to provide services customized to suit Client's needs and improve service delivery	(Page No. 23)
l)	Terms and Conditions for receiving SMS Alert from CDSL	(Page No. 28)
m)	Terms and Conditions for receiving SMS Alert from NSDL	(Page No. 31)
n)	Terms and Conditions for availing Transaction using Secured Texting (TRUST) service offered by CDSL	(Page No. 34)
o)	Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories	(Page No. 36)
p)	i. Investor Charter - Stock Broker ii. Investor Charter - NSDL iii. Investor Charter - CDSL	(Page No. 39)
q)	Mandatory and Non-Mandatory Document Booklet and Declaration	(Page No. 49)

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**MANDATORY & NON-MANDATORY DOCUMENT AND  
DECLARATION FOR OPENING TRADING AND DEMAT ACCOUNT**

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4. I/We understand and agree that any amendment/modifications as required by the exchanges/Depository and/or regulators will be applicable to me/us at all point of time and I/We understand that these changes will be intimated to me/us.
5. I/We understand that the Mandatory and Non-Mandatory document is in accordance of the exchanges and/or SEBI/Depository requirements applicable for opening Trading and Demat Account.
6. 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 agree and undertake to inform you of any change(s) 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.
7. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and tariff sheet.
8. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for information on the stock broker's designated website, if any.
9. I/We have received and read the copy of Rights and Obligations of the Beneficial Owner and Depository Participant and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time.
10. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations.

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

Date: DDMMYYYY

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

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

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

x	06/17
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x	02/05
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x	02/05
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Sole/First Authorised Signatory

Second Authorised Signatory

Third Authorised Signatory

(In case of more authorised signatories, please add annexure) (Signatures should be preferably in black ink).



## TARIFF SHEET

### Mutual Fund

Transaction type / Scheme type	Purchase/ Switch	Redemption	SIP
Equity/Balance	0	0	0
Debt	0	0	0
Cash	0	0	0
Others	0	0	0

#### Note:

1. The above rates would be charged/collected from the client at the time of transaction.
2. Brokerage rate mentioned would be considered in percentage terms.
3. The rates would be inclusive of GST
4. NJ India Invest Private Limited reserves the right to deduct the brokerage from future transactions, in case of any pending dues.
5. Brokerage structure for "Others" include all schemes not covered under Equity, Debt & Cash.

Name of the Firm: \_\_\_\_\_  
\_\_\_\_\_

Authorised  
Signatory

x \_\_\_\_\_ 07/17

Introducer's Name: \_\_\_\_\_  
\_\_\_\_\_

Introducer  
Signature

x \_\_\_\_\_

Introducer's Code: \_\_\_\_\_

## TARIFF SHEET

### Capital Market

Market Segment	Brokerage Rate Structure
Cash / Debit	<input type="checkbox"/> 0.50% or Rs 20/- on executed order whichever is lower <b>OR</b> <input type="checkbox"/> _____% (MIN. 0.10% - MAX. 2.5%)

Note:

1. In case of customized rate, Max Rate applicable is 2.5% and Minimum Rate applicable is 0.10%
2. GST on Brokerage will be charged as applicable.
3. Securities Transaction Tax (STT) applicable as per delivery & non delivery on turnover.
4. Stamp Duty Applicable State wise as per delivery and non-delivery will be levied on turnover.
5. SEBI Turnover Tax may be applicable in future.
6. Exchange Transaction Charges will be applicable in future as defined by respective exchange.

Name of the Firm: \_\_\_\_\_

Authorised  
Signatory

x 08/17

Authorised Person's  
Name: \_\_\_\_\_

Authorised Person  
Signature

x

Authorised Person's  
Code: \_\_\_\_\_

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## ANNEXURE A

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### BSE STAR MF (Letter to be provided by the investor to the MFI)

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

To

NJ India Invest Private Limited

Sir,

Sub: BSE STAR MF

I/We, \_\_\_\_\_

am/are registered as your client with Client Code No. \_\_\_\_\_ for the purpose of trading in the Capital Market segment of Bombay Stock Exchange Ltd. (Exchange).

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.

For the purpose of availing this 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 and I/we further confirm that the details contained in same remain unchanged as on date.

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

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

I/We shall read and understand the contents of the 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.

**Thanking you,  
Yours faithfully,**

x	09/17
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Sole/First Authorised Signatory



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## ANNEXURE A

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### Details of terms & conditions for the investor / client for using BSE STAR MF platform

#### 1. Pre-requisites for becoming an investor / a client for the BSE STAR MF platform

1.1 The client, who is desirous of investing in units of mutual fund schemes through the BSE STAR MF.

1.2 The client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the broker who is a Mutual fund Intermediary (MFI) of the BSE STAR MF platform.

1.3 The client has satisfied itself of the capacity of the MFI to deal in Mutual Fund units and wishes to execute its instruction through the MFI and the client shall from time to time continue to satisfy itself of such capability of the MFI before executing transaction through the MFI.

1.4 The client has approached the MFI with the application for availing the BSE STAR MF platform.

1.5 The client has submitted relevant KYC (Know Your Client) details to the MFIs

#### 2. Terms and Conditions

2.1 The client shall be bound by circulars issued by BSE's rules, regulations and notices/circulars issued there under by SEBI and relevant notifications of government authorities as may be in force from time to time.

2.2 The client shall notify the MFI in writing if there is any change in the information in the 'client registration form' provided by the client to the MFI at the time of registering as a client for participating in the BSE STAR MF platform or at any time thereafter.

2.3 The client shall submit to the MFI a completed application form in the manner prescribed format for the purpose of placing a subscription order with the MFI.

2.4 The client has read and understood the risks involved in investing in Mutual Fund Schemes.

2.5 The client shall be wholly responsible for all his investment decisions and instruction.

2.6 The client shall ensure continuous compliance with the requirements of the BSE, SEBI and AMFI.

2.7 The client shall pay to the MFI fees and statutory levies as are prevailing from time to time and as they apply to the client's account, transactions and to the services that MFI renders to the client.

2.8 The client will furnish information to the MFI in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.

2.9 In the event of non-performance of the obligation by the MFI, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of BSE or its Clearing Corporation - Indian Clearing Corporation Ltd. (ICCL).

2.10 In case of any dispute between the MFIs and the investors arising out of the BSE STAR MF platform, BSE and / or ICCL agrees to extend the necessary support for the speedy redressal of the disputes.

**Thanking you,  
Yours faithfully,**

x	10/17
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Sole/First Authorised Signatory



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## ANNEXURE B

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### MUTUAL FUND SERVICE SYSTEM FACILITY (Letter to be provided by the investor to the participant)

Date: 

D	D	M	M	Y	Y	Y	Y
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To

NJ India Invest Private Limited

Sir,

Sub: Mutual Fund Service System (MFSS) facility

I/We, \_\_\_\_\_

are desirous of being registered as your client for the purpose of participating in the MFSS.

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

I/We am/are willing to abide by the operating guidelines and terms and conditions as may be specified by the Exchange from time to time in this regard including the terms and conditions specified by the Exchange with respect to MFSS since 2009. I/We shall also comply with all the Know Your Client (KYC) and Anti Money Laundering (AML) requirements, as may be specified by the Exchange.

I/We shall also ensure 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 the MFSS.

**Thanking you,  
Yours faithfully,**

x	11/17
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Sole/First Authorised Signatory



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## ANNEXURE B

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### Details of terms & conditions for the investor / client for using new MFSS facility

#### 1. Pre-requisites for becoming investor / client for the new MFSS facility

1.1.The client, who is desirous of investing in units of mutual fund schemes through the new MFSS.

1.2.The client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the participant of the new MFSS.

1.3.The client has satisfied itself of the capacity of the participant to deal in Mutual Fund units and wishes to execute its instruction through the participant and the client shall from time to time continue to satisfy itself of such capability of the participant before executing transaction through the participant.

1.4.The client has approached the participant with the application for availing the new MFSS facility.

1.5.The client has submitted relevant KYC (Know Your Client) details to the participants

#### 2. Terms and Conditions

2.1.The client shall be bound by circulars issued by NSEIL from time to time including the circulars issued by NSEIL 2009 onwards and circulars issued thereafter and circulars issued there under by SEBI, and relevant notifications of government authorities as may be in force from time to time.

2.2.The client shall notify the participant in writing if there is any change in the information in the 'client registration form' provided by the client to the participant at the time registering as a client for participating in the new MFSS or at any time thereafter.

2.3.The client shall submit to the participant a completed application form in the manner prescribed format for the purpose of placing an order with the participant.

2.4.The client has read and understood the risks involved in investing in Mutual Fund Schemes.

2.5.The client shall be wholly responsible for all his investment decisions and instruction.

2.6.The client shall ensure continuous compliance with the requirements of NSEIL, SEBI and AMFI.

2.7.The client shall pay to the participant, fees and statutory levies as are prevailing from time to time and as they apply to the client's account, transactions and to the services that participant renders to the client.

2.8.The client will furnish information to the participant in writing , if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation, which may have material bearing on his capacity has been filed against him.

2.9.In the event of non-performance of the obligation by the participant, the client is not entitled to claim any compensation either from the investor protection fund or from any fund of NSEIL or NSCCL.

2.10. In case of any dispute between the participants and the investors arising out of the MFSS facility, NSEIL and / or NSCCL agrees to extend the necessary support for the speedy redressal of the disputes.

**Thanking you,  
Yours faithfully,**

x	12/17
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Sole/First Authorised Signatory



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## APPENDIX-I

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### ICEX-MF (Letter to be provided by the Investor to the MFI)

Date:     D    D    M    M    Y    Y    Y    Y    

To

NJ India Invest Private Limited

Sir,

Sub: ICEX MF

I/We, \_\_\_\_\_

am/are registered as your client with Client Code No. \_\_\_\_\_. I/We am/are interested in availing the facility of the Exchange for the purpose of transacting in the units of Mutual Funds Schemes permitted to be dealt with on the ICEX-MF.

For the purpose of availing this facility, I/we state that Know Your Client details, as already submitted by me/us for my/our registration as a client may be considered for the purpose of ICEX-MF and I/we further confirm that the details contained in same remain unchanged as on date.

I/We undertake to abide by the terms and conditions as mentioned in the Circular dated 24th Dec, 2019 and as may be specified by the Exchange from time to time in this regard.

I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India and Association of Mutual Funds of India (AMFI) or by any other regulatory authority as may be applicable to transaction in Mutual Fund units.

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

I/We also undertake to abide by Bye-Laws/Rules/Regulations of ICEX as applicable to registered clients under the member of ICEX.

I/we therefore request you to register me/us as your client and allow me/us for participating in ICEX MF.

**Thanking you,**

**Yours faithfully,**

x	13/17
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Sole/First Authorised Signatory



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# VOLUNTARY DECLARATION

## AUTHORIZATION FOR MAINTENANCE OF RUNNING ACCOUNT (NSE/BSE)

Date: 

D	D	M	M	Y	Y	Y	Y
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I/We have been/shall be dealing through you as my/our broker on the Capital Market. As my/our broker i.e. agent I/we direct and authorize you to carry out trading/dealings on my/our behalf as per instructions given below.

I am/we are aware that you and I/we have the option to deliver securities/make payments of funds to each other for settlement of dealings as per the schedule in force, at the relevant time pursuant to directives/regulations/circulars, issued by exchange/regulatory authorities. However, I/we find it difficult to carry out repeated pay-in of funds and securities. Further, I/we also desire to use my/our securities and monies as margin/collateral without which we cannot deal/trade.

Therefore, I/we hereby direct and authorize you to maintain running account(s) for me/us and from time to time debit these securities and funds from running accounts and make pay-in of securities and funds to exchanges/clearing corporations/other receiving party(ies) to settle my/our trades/ dealings. Similarly, where I/we have to receive securities/funds in settlement of trades/dealings, please keep the securities and monies with you and make credit entries for the same in running accounts of securities and fund maintained by you. Further, subject to your discretion and valuation please treat my/our securities and funds lying to my/our credit in running accounts as margin/collateral for my/our dealings/trading.

In the event I/we have outstanding obligations on the settlement date, you may retain the requisite securities/ funds towards such obligations and may also retain the funds expected to be required to meet

margin obligations for next 5 trading days, calculated in the manner specified by the exchanges. While settling the account, please send a 'statement of accounts' containing an extract from ledger for funds and an extract from the register of securities displaying all receipts/deliveries of funds/securities. Please explain in statement(s) being sent, the retention of funds/ securities and the details of the pledge, if any. I agree that if I/we fail to bring any dispute arising from the statement of accounts or settlement so made to your notice within 7 working days from the date of receipt of funds/ securities or statement, as the case may be in writing by delivery at your registered office then in that event the statement of accounts or settlement so made shall attain finality and I/we shall have no right to dispute any/either of these ever.

Please do not carry out above stated settlement of running account in the event I/we avail margin trading facility. Further, do not carry out settlement of running account referred to above for funds given by me/us towards collaterals/ margin in the form of bank guarantee (BG)/ Fixed Deposit receipts (FDR).

Please further note that I am/We are entitled to revoke this authorization at any time. I/we shall be liable for all losses, damages and actions, which may arise as a consequence of your adhering to and carrying out my/our directions given above and further agree that you shall not be liable for any claim for loss or profit, or for any consequential, incidental, special or exemplary damages, caused by retention of securities/ monies under this agreement.

My/Our preference for actual settlement of funds and securities is at least:

- ☐ Once in a calendar quarter  
☐ Once in a calendar month

**Thanking you,  
Yours Faithfully,**

x 14/17

Sole/First Authorised Signatory

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

**Unique Client Code (UCC):** \_\_\_\_\_



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## OPTION FORM FOR ISSUE OF DIS BOOKLET

DP ID: \_\_\_\_\_ Client ID \_\_\_\_\_ Date: DDMMYYYY

Sole/First Holder	
Second Holder	
Third Holder	

To,  
**NJ India Invest Private Limited**  
**Block No. 901 & 902, 6th Floor, B Tower, Udhna Udyog Nagar Sangh Commercial Complex,**  
**Central Road No.10, Udhna, Surat - 394210, Gujarat.**

Dear Sir / Madam,

I / We hereby state that: [Select one of the options given below]

☐ **OPTION 1:**

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening of my / our CDSL account though I / we have issued a Demat Debit and Pledge Instruction (DDPI) / registered for eDIS / executed PMS agreement in favour of / with \_\_\_\_\_ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for settling stock exchange trades [settlement related transactions] effected through such Demat Debit and Pledge Instruction (DDPI) holder - Clearing Member / by PMS manager / for executing delivery instructions through eDIS.

**Yours faithfully**

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

OR

☐ **OPTION 2:**

I / We do not require the Delivery Instruction Slip (DIS) booklet for the time being, since I / We have issued a DDPI/registered for eDIS / executed PMS agreement in favour of / with \_\_\_\_\_ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for settling stock exchange trades [settlement related transactions] effected through such Demat Debit and Pledge Instruction - Clearing Member / by PMS manager / for executing delivery instructions through eDIS. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

**Yours faithfully**

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

.....(Please Tear Here).....

### Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

DP ID: \_\_\_\_\_ Client ID \_\_\_\_\_

Name of First/Sole Holder	
Name of Second Holder	
Name of Third Holder	



Depository Participant Seal and Signature



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## SMS ALERT & TRUST FACILITY(CDSL)

Registration Form for availing SMS Alert and /or TRUST facility and for registering Clearing Members on whose behalf the securities can be transferred from the account of BO on the basis of SMS under TRUST facility

To,  
**NJ India Invest Private Limited**  
**Block No. 901 & 902, 6th Floor, B Tower, Udhna Udyog Nagar Sangh Commercial Complex,**  
**Central Road No.10, Udhna, Surat - 394 210, Gujarat.**

Dear Sir/Madam,

I/We wish to avail the following facility/ies provided by the depository on my/our mobile number as provided below subject to the terms and conditions as specified by CDSL

☐ SMART-SMS alert facility

☐ TRUST- TRansaction using Secured Texting facility

*(please note that SMS alert facility is mandatory if TRUST facility is opted for)*

BOID: 1 2 0 6 4 2 0 0

Sole/First Authorised Signatory Name: \_\_\_\_\_

Second Authorised Signatory Name: \_\_\_\_\_

Third Authorised Signatory Name: \_\_\_\_\_

I/We wish to register the following clearing members / IDs under my/our above mentioned BO ID registered for TRUST

Sr. No.	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)

Mobile Number on which messages are to be sent: +91 \_\_\_\_\_

*(Please write only the mobile number without prefixing country code or zero).*

*(Existing users registered for SMS alerts:- Please note that if the mobile number for TRUST is different than the registered mobile number for SMS alert, the new mobile number will be updated for SMS alert also.)*

The mobile number is registered in the name of \_\_\_\_\_

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

*(Please write only ONE valid email ID on which communication; if any, is to be sent)*

I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purpose of availing the said facility.

I/we acknowledge that transactions entered by the above clearing members will be executed on the basis of SMS sent through our registered mobile number under TRUST and I/we shall be wholly responsible for execution / non-execution of the said transactions based on receipt/non-receipt of such SMS.

I/We have read and understood the terms and conditions prescribed by CDSL for the said facility/ies and agree to abide by them and any amendments thereto made by the depository from time to time. I/ we further undertake to pay fee/ charges as may be levied by the depository from time to time.

x 15/17

Sole/First Authorised Signatory

x 03/05

Second Authorised Signatory

x 03/05

Third Authorised Signatory

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

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



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## E-STATEMENT & SMS ALERT FACILITY FORM - NSDL

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To,  
**NJ India Invest Private Limited**  
**Block No. 901 & 902, 6th Floor, B Tower, Udhna Udyog Nagar Sangh Commercial Complex,**  
**Central Road No.10, Udhna, Surat - 394210, Gujarat.**

Dear Sir/Madam,

I/We wish to avail the below mentioned facility(ies) for my/our Demat Account with NJ India Invest Private Limited (NJII) and I/We acknowledge and grant my/our consent to NJII for providing the said services as per the given Terms & Conditions:

☐ **Statement on E-mail**

I/We confirm having opted to receive the statement(s) pertaining to the below mentioned BO account in electronic mode in lieu of the physical copy of the statement(s).

I/We also reserve my/our right to receive the physical copy of the statement(s) despite receiving the same in electronic mode, if such a demand is made in writing to NJII.

I/We confirm that any change in the E-mail address or any other instructions with regard to dispatch/service of my/our e-statements on me/us shall not be binding upon NJII unless NJII is intimated in writing by me/us by acknowledged delivery. NJII shall not take cognizance of out-of-office/out-of-station auto replies and I/We shall be deemed to have received such statements.

I/We will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the E-mail account.

I/We am/are aware that the statement(s) may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised.

I/We have understood that NJII & myself/ourselves holds the authority to terminate Statement on mail facility provided a written notice is given in advance to the other party.

I/We affirm that NJII shall not be responsible for the non-receipt of the Statement due to any change in my/our E-mail address and if the same is not intimated by me/us to NJII and that NJII shall not take cognizance of out-of-office/out-of-station auto replies and I/We shall be deemed to have received such Statements.

I/We undertake that it shall be my/our responsibility to verify all the details of my Statement(s). Incase there is any discrepancy in the Statement(s); I/we shall inform NJII of the same by writing to dpservices@njgroup.in or to Customer Care at the above mentioned address. In case I/we do not inform and get the discrepancies corrected the same shall be deemed to have been accepted and will be binding upon me/us. However NJII in its absolute discretion, reserves the right to determine the validity of any objection to the transaction, even though the objection is received after the expiry of stipulated time.

☐ **Statement on Web**

I/We confirm having opted to receive the statement(s) pertaining to the below mentioned BO account in electronic mode in lieu of the physical copy of the statement(s).

I/We understood that Statement on Web facility would only be provided to me only when I have Online Trading Account with NJII.

I/We also reserve my/our right to receive the physical copy of the statement(s) despite receiving the same in electronic mode, if such a demand is made in writing on NJII.

I/We am/are aware that I/we will not receive the statement(s) in paper form and I/we would be required to login to NJII's Online account to view my statements.

I/We am/are aware that the statement(s) may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised.

I/We have understood that NJII & myself/ourselves holds the authority to terminate Statement on web facility provided a written notice is given in advance to the other party.



## E-STATEMENT & SMS ALERT FACILITY FORM - NSDL

I/We undertake that it shall be my/our responsibility to verify all the details of my Statement(s). In case there is any discrepancy in the Statement(s), I/we shall inform NJI of the same by writing to [dpsservices@njgroup.in](mailto:dpsservices@njgroup.in) or to Customer Care at the above mentioned address. In case I/we do not inform and get the discrepancies corrected the same shall be deemed to have been accepted and will be binding upon me/us. However NJI in its absolute discretion, reserves the right to determine the validity of any objection to the transaction, even though the objection is received after the expiry of stipulated time.

### ☐ SMS Alert Facility

I/We understand that the SMS Alerts would be sent for all types of debits and credit's into the below mentioned Demat Account Number.

I/We provide the following information for the purpose of REGISTRATION/MODIFICATION (Please cancel out whichever is not applicable, as per the option(s) selected above).

DP ID IN304262

Client ID \_\_\_\_\_

(Please write your 8 digit Client ID)

Mobile Number on which messages are to be sent: **+91** \_\_\_\_\_

(Please write only the mobile number without prefixing country code or zero).

The mobile number is registered in the name of \_\_\_\_\_

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

(Please write only ONE valid email ID on which E-Statement/Communications; if any, is to be sent)

The Depository Participant shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the Depository Participant providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the Depository Participant and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a Depository Participant may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO. The Depository Participant may amend the Terms and Conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

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

x	16/17
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Sole/First Authorised Signatory

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

x	04/05
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Second Authorised Signatory

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

x	04/05
---	-------

Third Authorised Signatory

Date: DDMMYYYY

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

### Signature Verification Details (to Be Filled By The Dp-official Only)

Name		Signature	
Location		Emp. Code	



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## SCHEDULE OF CHARGES

CDSL DP ID : 12064200 / NSDL DP ID: IN304262

**NJ India Invest Private Limited**

Regd. Office : Block No. 901 & 902, 6th Floor, B Tower, Udhna Udyognagar Sangh Commercial Complex,  
Central Road No.10, Udhna, Surat - 394210, Gujarat.

Particulars	Charges
Annual Maintenance Charges (Normal Client)	<b>Non-Individual:</b> ₹1000/-
Demat charges	₹20/-per certificate + ₹50/-for courier handling per ISIN
Remat Charges	₹150/- per certificate + courier handling
Margin Pledge / unpledge	₹10/- Per ISIN
Erroneous Transfer reversal per transaction	₹100/- Per ISIN
Stamp Duty	At Actual Charges by Depositories
Market /Off Market (Only Debit Transaction)	₹25/- per ISIN
Pledge(Creation/Closure/Invocation)	₹40/- per ISIN
DIS Reissue	₹100/- Per DIS Book (10 Slips)
Physical CMR(Client Master Report)	₹50/ Per CMR
Cheque Bounce Charges	₹350/-
NDU Charges	₹50/- per request or 0.02% on transaction value whichever is higher ,Payable by the borrower for NDU requests accepted by the lender
CAS Charges (CDSL)	Email CAS @₹0.50/- & Physical CAS @ ₹6/- per BOID.
CAS Charges (NSDL)	Email CAS @₹0.75/- & Physical CAS @ ₹8/- per BOID.
Interest on Delayed Payment	@15% P.A
Modification Request	₹50/- Per Request
Periodic / Adhoc Statement Request	Email: Free & Physical: ₹50 per SOT/SOH

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## SCHEDULE OF CHARGES

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### CONDITIONS :

1. Annual maintenance charges have to be paid at the end of 1 year from the date of account opening.
2. In case the client opts closure of the demat account within 1 year from the date of account opening, then Annual Maintenance Charges shall be charged proportionately as per SEBI circular.
3. All the charges mentioned above are inclusive of CDSL/NSDL charges.
4. GST as applicable would be levied.
5. The above charges are subject to change with 30 days prior notice. However, in case of revision of charges by CDSL/NSDL. A shorter notice may be given.
6. Charges once paid will not be refunded.
7. All instructions for transfer must be received at least one day before the execution/pay-in date.
8. Same day execution/late instructions will be accepted on "A best efforts basis" at the sole risk and responsibility of the depository account holder(s).
9. All pledging services (creation, closure and invocation) shall be separately charged at the time of each transaction.
10. Value of securities will be in accordance with the rates provided by CDSL/NSDL.
11. Charges quoted above are for the services listed. Any service not quoted above will be charged separately.

We have read and understood the charges and conditions as above and agree to abide by the same

BOID: \_\_\_\_\_

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

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

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

x	17/17
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Sole/First Authorised Signatory

x	05/05
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Second Authorised Signatory

x	05/05
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Third Authorised Signatory

# AUTHORIZATION LETTER FOR OPENING TRADING ACCOUNT

(Format of Declaration to be given by Partnership Firm on Letterhead)

Date:

To,  
NJ India Invest Private Limited  
Block No. 901 & 902, 6th Floor, B Tower, Udhna Udyog Nagar Sangh Commercial Complex,  
Central Road No.10, Udhna, Surat - 394 210, Gujarat.

Dear Sir,

In reference to our present/ proposed dealings with you as your constituent, we declare and authorize you as under:

We hereby authorize Mr./Ms. \_\_\_\_\_ or Mr./Ms. \_\_\_\_\_ or Mr./Ms. \_\_\_\_\_, Partners of the Firm singly to execute/ sign and submit various papers and documents and to sell, purchase, transfer, endorse and negotiate and do all other things that may be necessary to engage in business with NJ India Invest Private Limited, on behalf of the Firm.

Mr./Ms. \_\_\_\_\_ or Mr./Ms. \_\_\_\_\_ or Mr./Ms. \_\_\_\_\_, are authorized to sell, purchase, transfer, endorse, negotiate and/ or otherwise deal with/ through NJ India Invest Private Limited, on behalf of the Firm.

Mr./Ms. \_\_\_\_\_ or Mr./Ms. \_\_\_\_\_ or Mr./Ms. \_\_\_\_\_, are hereby authorized to sign, execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may be deemed necessary or expedient to give effect to this resolution.

However we agree that all the Partners have implied authority to act on behalf of the Firm and actions of any other Partner will be binding on the Firm.

Thanking you,

Name of all Partners	Signature

Note: Signatures of all the Partners of the Partnership Firm are required

## AUTHORIZATION LETTER FOR MAPPING DEMAT ACCOUNT

(To be obtained on letterhead of the Partnership Firm)

Date: 

D	D	M	M	Y	Y	Y	Y
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To,  
NJ India Invest Private Limited  
Block No. 901 & 902, 6th Floor, B Tower, Udhna Udyog Nagar Sangh Commercial Complex,  
Central Road No.10, Udhna, Surat - 394 210, Gujarat.

I / We, have submitted an application for opening a joint account for opening a Beneficial Owner [BO] account in the category "individual" for holding & carrying out transactions in respect of securities belonging to our Firm.

I / we represent the Firm.

In consideration of you having agreed to accept the Permanent Account Number \_\_\_\_\_ issued by the Income Tax Department [ITD] to the Firm along with our individual identity documents, I / We acknowledge and undertake as under:

- The acceptance of the PAN number of our Firm does not amount to you having taken notice of trust or recognize our Firm.
- I/We shall continue to be responsible for complying with the relevant provisions of The Indian Partnership Act, 1932 and the Rules made there under and other applicable Laws failing which I / we shall be responsible for the on sequences thereof.
- The Partners have no objection to open the Demat Account in the name(s) of the following Partners:

Sr. No.	Name of Partner	Specimen Signature
1		
2		
3		

Thanking you,

Name of all Partners	Signature

Note: Signatures of all the Partners of the Partnership Firm are required

# DECLARATION FORM OF NON-PROFIT ORGANIZATION (NPO)

(Mandatory for Trusts/Society)

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

PAN: \_\_\_\_\_

☐ I/We hereby confirm that above stated entity / organization is falling under “**Non-profit organization**” [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).

☐ Enclosed relevant documentary proof evidencing the above definition.

We further confirm that we have registered with DARPAN Portal of NITI Aayog as NPO and registration details are as follows:

Registration Number of DARPAN portal	
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If not, please register immediately and confirm with the above information. In absence of receipt of the Darpan portal registration details, MF/AMC/RTA will be required to register your entity on the said portal and/or report to the relevant authorities as applicable.

☐ I/We hereby confirm that the above stated entity / organization is **NOT** falling under Non-profit organization as defined above or in PMLA Act/Rules thereof.

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be liable for it for any fines or consequences as required under the respective statutory requirements and authorize you to deduct such fines/charges under intimation to me/us or collect such fines/charges in any other manner as might be applicable. I/We hereby authorize NJ INDIA INVEST PRIVATE LIMITED to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries or any other statutory authorities to facilitate single submission / update & for regulatory purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities.

Signature with relevant seal:

Authorized Signatory

Authorized Signatory

Authorized Signatory

Date: DD MM YYYY

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



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*(Please consult your professional tax advisor for further guidance on your tax residency, FATCA / CRS Guidance)*

PAN*	<input type="text"/>	Name	<input type="text"/>
Type of address given at KYC KRA	<input type="text"/>	<input type="text"/>	<input type="text"/>
City of incorporation	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of incorporation	<input type="text"/>	<input type="text"/>	<input type="text"/>
Net Worth in INR. In ₹ Lakhs	<input type="text"/>	Net Worth as on	<input type="text"/>

(Date should not be older than one year)

Is the entity involved in / providing any of these services:	Foreign Exchange / Money Changer Services	YES	Gaming / Gambling / Lottery Services [e.g. casinos, betting syndicates]	YES	Money Laundering / Pawning	YES	Any other information [if applicable]
		NO		NO		NO	

Entity Constitution Type	<input type="checkbox"/> Partnership Firm <input type="checkbox"/> HUF <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Public Limited Company <input type="checkbox"/> Society <input type="checkbox"/> AOP/BOI					
Please tick as appropriate	<input type="checkbox"/> Trust <input type="checkbox"/> Liquidator <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Artificial Juridical Person <input type="checkbox"/> Others specify					

1. Is "Entity" a tax resident of any country other than India ☐ Yes ☐ No

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

Country	Tax Identification Number <sup>%</sup>	Identification Type (TIN or Other <sup>%</sup> , please specify)

<sup>%</sup>In case Tax Identification Number is not available, kindly provide its functional equivalent or Company Identification Number or Global Entity Identification Number.

[illegible]

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

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

1.	We are a, Financial institution <sup>6</sup> <input type="checkbox"/> or Direct reporting NFFE <sup>7</sup> <input type="checkbox"/> <i>(please tick as appropriate)</i>	<b>GIIN</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p><b>Note:</b> If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below</p> Name of sponsoring entity <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	<b>GIIN not available</b> <i>(please tick as applicable)</i> <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <sup>10</sup> <input type="text"/> <input type="text"/> <input type="checkbox"/> Not obtained – Non-participating FI	

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

1.	Is the Entity a publicly traded company <sup>1</sup> (that is, a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange _____
2.	Is the Entity a related entity <sup>2</sup> of a publicly traded company (a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company _____ Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company Name of stock exchange _____
3.	Is the Entity an active <sup>3</sup> NFE	Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, please fill UBO declaration in the next section.) Nature of Business _____ Please specify the sub-category of <input type="text"/> <input type="text"/> (Mention code – refer 2c of Part D)
4.	Is the Entity a passive <sup>4</sup> NFE	Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, please fill UBO declaration in the next section.) Nature of Business _____

<sup>1</sup>Refer 2a of Part D | <sup>2</sup>Refer 2b of Part D | <sup>3</sup>Refer 2c of Part D | <sup>6</sup>Refer 1 of Part D | <sup>7</sup>Refer 3(vii) of Part D | <sup>10</sup>Refer 1A of Part D

## UBO Declaration

**Category** (Please tick applicable category): ☐ Unlisted Company ☐ Partnership Firm ☐ Limited Liability Partnership Company  
☐ Unincorporated association / body of individuals ☐ Public Charitable Trust ☐ Religious Trust ☐ Private Trust ☐ HUF  
☐ Listed Company (Need not provide UBO details sought under) ☐ Others (please specify \_\_\_\_\_)

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

Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E

Name - Beneficial owner / Controlling person	#Tax ID Type - TIN or Other, please specify	Address - Include State, Country, PIN / ZIP Code & Contact Details
#Country - Tax Residency*	Beneficial Interest - in percentage	
#Tax ID No. - Or functional equivalent for each country*	#Type Code <sup>11</sup> - of Controlling person	
1. Name	Tax ID Type	Address
Country	Beneficial Interest	
Tax ID No.	Type Code	ZIP <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> State: Country:
2. Name	Tax ID Type	Address
Country	Beneficial Interest	
Tax ID No.	Type Code	ZIP <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> State: Country:
3. Name	Tax ID Type	Address
Country	Beneficial Interest	
Tax ID No.	Type Code	ZIP <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> State: Country:

If passive NFE, please provide below additional details.

(Please attach additional sheets if necessary)

PAN	Occupation Type - Service, Business, Others	DOB - Date of Birth
City of Birth	Nationality	Gender - Male, Female, Other
Country of Birth	Father's Name - Mandatory if PAN is not available	
1. PAN	Occupation Type	DOB DD/MM/YYYY
City of Birth	Nationality	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/>
Country of Birth	Father's Name	Others <input type="text"/>
2. PAN	Occupation Type	DOB DD/MM/YYYY
City of Birth	Nationality	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/>
Country of Birth	Father's Name	Others <input type="text"/>
3. PAN	Occupation Type	DOB DD/MM/YYYY
City of Birth	Nationality	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/>
Country of Birth	Father's Name	Others <input type="text"/>

# Additional details to be filled by controlling persons with tax residency / permanent residency / citizenship / Green Card in any country other than India:

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

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

<sup>4</sup>Refer 3(iii) of Part D | <sup>5</sup>Refer 3(vi) of Part D | <sup>11</sup>Refer 3(iv) (A) of Part D

## FATCA Terms and Conditions

Towards compliance with tax information sharing laws, such as FATCA, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Towards compliance with such laws, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010. Please note that you may receive more than one request for information if you have multiple relationships with ABC. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

### Certification

I have understood the information requirements of this Form (read along with the Instructions & Definitions) and hereby confirm that the information provided by us on this Form is true, correct, and complete. I also confirm that I have read and understood the FATCA Terms and Conditions above and hereby accept the same.

Name	<input type="text"/>
Designation	<input type="text"/>
Signature >>	<div><div></div><div>Place _____</div><div>Date __/__/____</div></div>



## PART D FATCA Instructions & Definitions

**1 Financial Institution (FI)** - The term FI means any financial institution that is a Depository Institution, Custodial Institution, Investment Entity or Specified Insurance company, as defined.

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

(1) The three financial years preceding the year in which determination is made; or

(2) The period during which the entity has been in existence, whichever is less.

o Investment entity is any entity:

- o that primarily conducts a business or operates for or on behalf of a customer for any of the following 3 activities-
  - Trading in money market instruments, foreign exchange, foreign currency, etc.
  - Individual or collective portfolio management
  - Investing, administering or managing funds, money or financial asset on behalf of other persons;

or

- o The gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, if the entity is managed by another entity that is a depository institution, a custodial institution, a specified insurance company, or an investment entity described above.
- o (An entity is treated as primarily conducting as a business one or more of the 3 activities described above, or an entity's gross income is primarily attributable to investing, reinvesting, or trading in financial assets of the entity's gross income attributable to the relevant activities equals or exceeds 50 percent of the entity's gross income during the shorter of:
  - (i) the three-year period ending on 31 March of the year preceding the year in which the determination is made; or
  - (ii) the period during which the entity has been in existence.

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

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

o FI not required to apply for GIIN:	
A. Reasons why FI not required to apply for GIIN:	
Code	Sub-category
01	Governmental Entity, International Organization or Central Bank
02	Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental Entity, International Organization or Central Bank
03	Non-public fund of the armed forces, an employees' state insurance fund, a gratuity fund or a provident fund
04	Entity is an Indian FI solely because it is an investment entity
05	Qualified credit card issuer
06	Investment Advisors and Investment Managers
07	Exempt collective investment vehicle
08	Trustee of an Indian Trust
09	FI with a local client base
10	Non-registering local banks
11	FFI with only Low-Value Accounts
12	Sponsored investment entity and controlled foreign corporation
13	Sponsored, Closely Held Investment Vehicle
14	Owner Documented FFI

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

Types of NFEs that are regarded as excluded NFE are:

a. Publicly traded company (listed company) A company is publicly traded if its stock are regularly traded on one or more established securities markets (Established securities market means an exchange that is officially recognized and supervised by a governmental authority in which the securities market is located and that has a meaningful annual value of shares traded on the exchange)
b. Related entity of a publicly traded company The NFE is a related entity of an entity which is regularly traded on an established securities market;

C. Active NFE : (is any one of the following):	
Code	Sub-category
01	Less than 50 percent of the NFE's gross income for the preceding financial year or other appropriate reporting period is <i>passive income</i> and less than 50 percent of the assets held by the NFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of <i>passive income</i> ;
02	The NFE is a Governmental Entity, an International Organization, a Central Bank , or an entity wholly owned by one or more of the foregoing;
03	Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity shall not qualify for NFE status if the entity functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes;
04	The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE shall not qualify for this exception after the date that is 24 months after the date of the initial organization of the NFE;
05	The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganizing with the intent to continue or recommence operations in a business other than that of a Financial Institution;
06	The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution;
07	Any NFE is a 'non for profit' organization which meets all of the following requirements: It is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organization, business league, chamber of commerce, labor organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare; It is exempt from income tax in India; It has no shareholders or members who have a proprietary or beneficial interest in its income or assets; The applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and The applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organization, or escheat to the government of the NFE's jurisdiction of residence or any political subdivision thereof.

### 3. Other definitions

<p>(i) <i>Related entity</i></p> <p>An entity is a related entity of another entity if either entity controls the other entity or the two entities are under common control. For this purpose, control includes direct or indirect ownership of more than 50% of the vote or value in an entity.</p>
<p>(ii) <i>Passive NFE</i></p> <p>The term passive NFE means any NFE that is</p> <ul style="list-style-type: none"> <li>(a) not an Active NFE or publicly traded entity or a entity related to a publicly traded entity</li> <li>(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 depository institution, a custodial institution, a specified insurance company, or an investment entity</li> <li>(c) a withholding foreign partnership or withholding foreign trust as defined under the relevant U.S. Treasury Regulations.</li> </ul> <p>(Note: Foreign persons having controlling interest in a passive NFE are liable to be reported for tax information compliance purposes)</p>
<p>(iii) <i>Passive income</i></p> <p>The term passive income means the portion of gross income that consists of-</p> <ul style="list-style-type: none"> <li>(a) Dividends, including substitute dividend amounts;</li> <li>(b) Interest</li> <li>(c) Income equivalent to interest, including substitute interest and amounts received from or with respect to a pool of insurance contracts if the amounts received depend in whole or part upon the performance of the pool;</li> <li>(d) Rents and royalties, other than rents and royalties derived in the active conduct of a trade or business conducted, at least in part, by employees of the NFE</li> <li>(e) Annuities</li> <li>(f) The excess of gains over losses from the sale or exchange of financial assets that gives rise to passive income</li> <li>(g) The excess of gains over losses from transactions (including futures, forwards, and similar transactions) in any financial assets,</li> <li>(h) The excess of foreign currency gains over foreign currency losses</li> <li>(i) Net income from swaps</li> <li>(j) Amounts received under cash value insurance contracts</li> </ul> <p>But not passive income will not include in case of a non-financial entity that acts as a dealer in financial assets, any income from any transaction entered into in the ordinary course of such dealer's business as a dealer.</p>
<p>(iv) <i>Controlling persons</i></p> <p>Controlling persons are natural persons who exercise control over an entity and includes a beneficial owner under the PMLARules. In the case of a trust, such term means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust. In the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions.</p> <p>Pursuant to guidelines on identification of Beneficial Ownership issued vide SEBIcircular no. CIR/MIRSD/2/2013dated January 24, 2013, persons (other than Individuals) are required to provide details of Beneficial Owner(s) ('BO'). Accordingly, the Beneficial Owner means 'Natural Person', who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest of / entitlements to:</p>

- 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.

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

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

<i>(A) Controlling Person Type:</i>	
<i>Code</i>	<i>Sub-category</i>
01	CP of legal person-ownership
02	CP of legal person-other means
03	CP of legal person-senior managing official
04	CP of legal arrangement-trust-settlor
05	CP of legal arrangement--trust-trustee
06	CP of legal arrangement--trust-protector
07	CP of legal arrangement--trust-beneficiary
08	CP of legal arrangement--trust-other
09	CP of legal arrangement—Other-settlor equivalent
10	CP of legal arrangement—Other-trustee equivalent
11	CP of legal arrangement—Other-protector equivalent
12	CP of legal arrangement—Other-beneficiary equivalent
13	CP of legal arrangement—Other-other equivalent

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

- (a) a corporation the stock of which is regularly traded on one or more established securities markets;
- (b) 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);
- (c) the United States or any wholly owned agency or instrumentality thereof;
- (d) 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;
- (e) 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;
- (f) any bank as defined in section 581 of the U.S. Internal Revenue Code;
- (g) any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code;
- (h) 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);
- (i) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
- (j) 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;
- (k) 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;
- (l) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code; or
- (m) any tax-exempt trust under a plan that is described in section 403(b) or section 457(g) of the U.S. Internal Revenue Code.

*(vi) Owner documented FFI*

An FFI meets the following requirements:

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

*(vii) Direct reporting NFE*

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

(viii) *Exemption code for U.S. persons*

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

# Declaration Form of Ultimate Beneficial Ownership [UBO] /Controlling Persons/ Senior Management Official (SMO)

## I: Investor details:

Investor Name \_\_\_\_\_

PAN \_\_\_\_\_

\*If PAN is not available, specify Folio No.(s)

## II: Category

☐ Our company is a Listed Company on a recognized stock exchange in India / Subsidiary of or Controlled by a Listed Company [If this category is selected, no need to provide UBO details].

Name of the Stock Exchange where it is listed#. \_\_\_\_\_

Security ISIN# \_\_\_\_\_

Name of the Listed Company (applicable if the investor is subsidiary/associate): \_\_\_\_\_

*#mandatory in case of Listed company or subsidiary of the Listed Company*

☐ Unlisted Company      ☐ Partnership Firm / LLP      ☐ Unincorporated association/Body of individuals

☐ Public Charitable Trust      ☐ Private Trust      ☐ Religious Trust      ☐ Trust created by a Will.

☐ Others [please specify]: \_\_\_\_\_

## UBO / Controlling Person(s)/ Senior Managing Official (SMO) details.

Does your company/entity have any individual person(s) who holds direct / indirect controlling ownership exceeding the prescribed threshold limit? ☐ Yes ☐ No

If 'YES' - We hereby declare that the following individual person holds directly / indirectly controlling ownership in our entity above the prescribed threshold limit. Details of such individual(s) are given below.

If 'NO' - declare that no individual person (directly / indirectly) holds controlling ownership in our entity above the prescribed threshold limit. Details of the individual who holds the position of Senior Managing Official (SMO) are provided below.

	<input type="checkbox"/> UBO <input type="checkbox"/> SMO	<input type="checkbox"/> UBO <input type="checkbox"/> SMO	<input type="checkbox"/> UBO <input type="checkbox"/> SMO
Name			
PAN <small>For Foreign National, TIN along with the proof to be provided]</small>			
% of beneficial interest	<input type="checkbox"/> ≥ 10% controlling interest <input type="checkbox"/> > 15% controlling interest <input type="checkbox"/> NA (for SMO)	<input type="checkbox"/> ≥ 10% controlling interest <input type="checkbox"/> > 15% controlling interest <input type="checkbox"/> NA (for SMO)	<input type="checkbox"/> ≥ 10% controlling interest <input type="checkbox"/> > 15% controlling interest <input type="checkbox"/> NA (for SMO)
Country of Tax Residency			

## Declaration Form of Ultimate Beneficial Ownership [UBO] /Controlling Persons/ Senior Management Official (SMO)

Taxpayer Identification Number / Equivalent ID Number			
Identity Type			
Place of Birth			
Country of Birth			
Nationality			
Date of Birth	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
Politically Exposed Person (PEP)	<input type="checkbox"/> Yes – PEP. <input type="checkbox"/> Yes – Related to PEP. <input type="checkbox"/> N – Not a PEP.	<input type="checkbox"/> Yes – PEP. <input type="checkbox"/> Yes – Related to PEP. <input type="checkbox"/> N – Not a PEP.	<input type="checkbox"/> Yes – PEP. <input type="checkbox"/> Yes – Related to PEP. <input type="checkbox"/> N – Not a PEP.
Address			
City			
Pincode			
State			
Country			
Address Type Residence	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office
Email			
Mobile			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
Father's Name			
Occupation	<input type="checkbox"/> Public Service <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Public Service <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Public Service <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____
SMO Designation			

## Declaration Form of Ultimate Beneficial Ownership [UBO] /Controlling Persons/ Senior Management Official (SMO)

KYC Complied? **	<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.	<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.	<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.
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#Mandatory column.

\*\*In case of Foreign Nationals, who are not KYC complied, they need to attach the ID proof in English along with the Nationality proof, Address proof again in English. If the documentary proof is in Foreign Language, it should be translated in English and should be attested by Indian Embassy of that country.

Note:

1. If the given columns are not sufficient, required information in the given format should be enclosed as additional sheet(s) duly signed by Authorized Signatory.
2. Attached documents should be self certified by the UBO and certified by the Applicant / Investor's Authorised Signatory.
3. Submit documentary proof like Shareholding pattern as proof of holding.
4. The registered intermediary may call for additional information/documentation wherever required or if the given information is not clear / incomplete / correct and you may provide the same as and when solicited
5. Investors are requested to use same pen(ink) for form filling and signatures across the documents.

### Declaration

1. I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false, untrue, misleading, or misrepresenting, I/We are aware that I/We may be liable for it including any penalty levied by the statutory/legal/regulatory authority.
2. I/We hereby confirm the above beneficial interest is considered after perusing all applicable shareholding patterns and that the SEBI registered intermediaries can rely on the same. I/We hereby authorize you as a registered intermediary to disclose, share, rely, remit in any form, mode or manner, all/ any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same.
3. Further, I/we authorize to share the given information to other SEBI Registered Intermediaries /or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes.
4. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your end or by domestic or overseas regulators/ tax authorities. information as may be required at your end or by domestic or overseas regulators/ tax authorities.

**Authorized Signatories signature** [with relevant entity seal]

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Date: DD MM YY YY

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





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## IMPORTANT INSTRUCTIONS ON CONTROLLING PERSONS/ULTIMATE BENEFICIAL OWNER

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As per PMLA guidelines and relevant SEBI circulars issued from time to time, non-individuals and trusts are required to provide details of controlling persons [CP] / ultimate beneficial owner [UBO] and submit appropriate proof of identity of such CPs/ UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted and includes a person who exercises ultimate effective control over a legal person or arrangement.

### A. For Investors other than individuals or trusts:

- (i) 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. Controlling ownership interest means ownership of/entitlement to:
  - a) more than 10% of shares or capital or profits of the juridical person, where the juridical person is a **Company**.
  - b) more than 10% of the capital or profits of the juridical person, where the juridical person is a **Partnership Firm** or who exercises control\* through other means.  
\*Control shall include the right to control the management or the policy decision.
  - c) 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**.
- (ii) In cases where there exists doubt under clause (i) 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 like voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official (SMO).

### B. For Investor which is a trust:

The identity of the beneficial owner(s) shall include identification of the author of the trust, the trustee, the beneficiaries with 10% 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 / foreign investors

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, there is no need for identification and verification of the identity of any shareholder or beneficial owner of such companies and hence exempted from UBO declaration provided other requisite information is provided. 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 and other circulars issued from time to time, for the purpose of identification of beneficial ownership of the client.

### D. KYC requirements

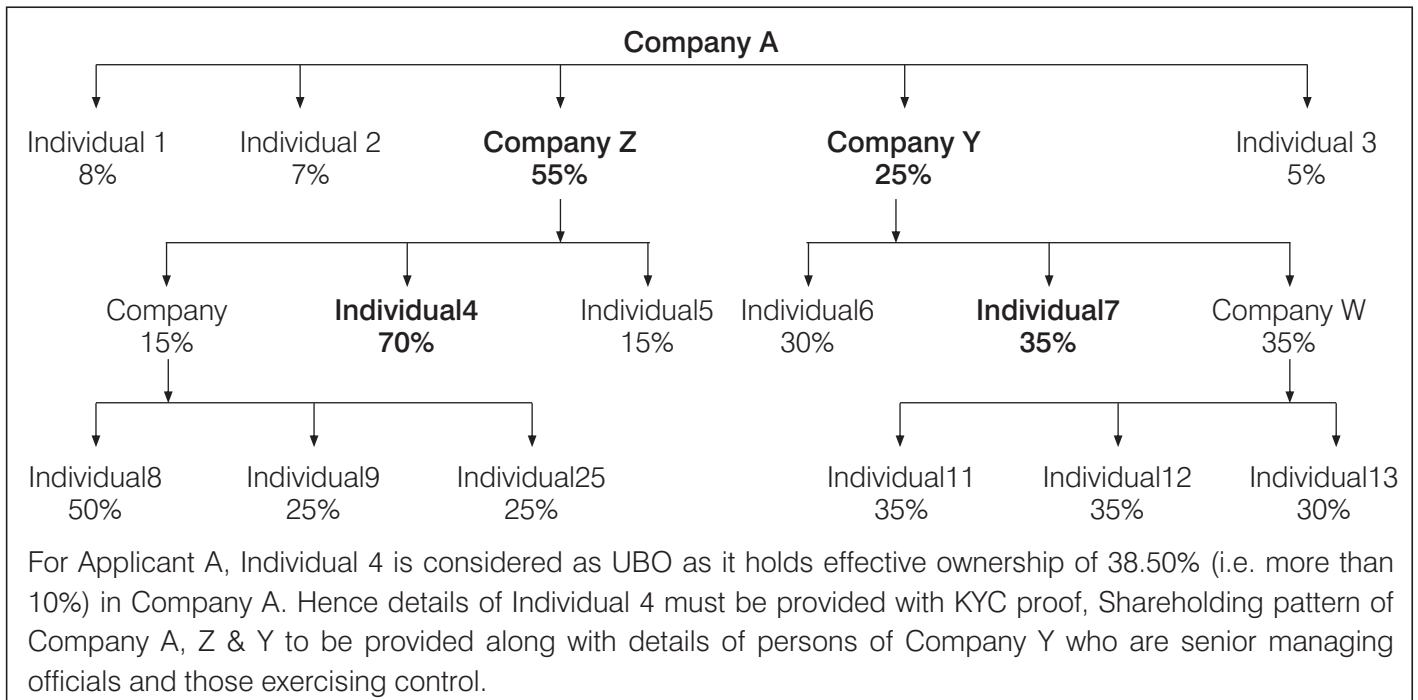
Beneficial Owner(s)/ Controlling Persons/ Senior Managing Official (SMO)/ Trustees are/ are required to comply with the prescribed KYC process as stipulated by SEBI from time to time with any one of the KRA & submit the same to the Registered Intermediary. KYC acknowledgement proof is to be submitted for all the UBO(s)/ Controlling Persons/ SMO(s)/ Trustees.



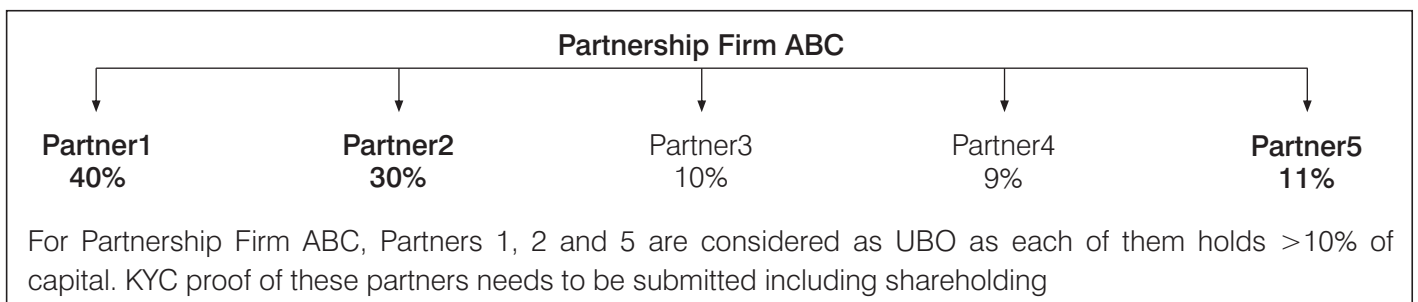
# IMPORTANT INSTRUCTIONS ON CONTROLLING PERSONS/ULTIMATE BENEFICIAL OWNER

Sample Illustrations for ascertaining beneficial ownership:

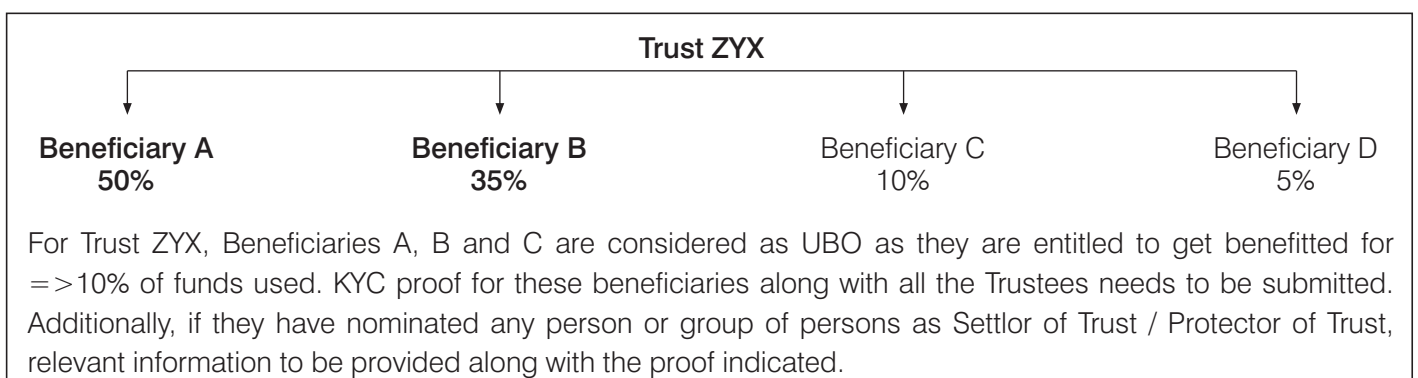
## Illustration No. 1 – Company A



## Illustration No. 2 – Partner ABC



## Illustration No. 3 – Trustee ZYX



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## DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI) IN FAVOUR OF NJ INDIA INVEST PRIVATE LIMITED

I/We \_\_\_\_\_

(Sole/First Holder) Jointly with \_\_\_\_\_ (Second Holder)

And \_\_\_\_\_ (Third Holder)

Residing/registered office/place of business at \_\_\_\_\_

hold Beneficial Owner Account number (BO ID) \_\_\_\_\_ with Central Depository Services (India) Limited (CDSL)/National Securities Depository Limited (NSDL), through NJ India Invest Private Limited, a Depository Participant registered with Securities and Exchange Board of India (SEBI) bearing SEBI registration no. IN-DP-14-2015. And Whereas I/ We am/ are desirous to buy and sell securities through NJ India Invest Private Limited, a stock broker registered with SEBI and a member of recognized Stock Exchange/s (National Stock Exchange of India Limited and BSE Ltd) bearing SEBI single registration no. INZ000213137.

Whereas I/ we authorize NJ India Invest Private Limited to operate my/ our Beneficial Owner Account in a manner hereinafter appearing and subject to conditions as provided herein. Whereas I/ we hereby am/ are fully aware and understand that this DDPI is voluntary and I/ we have been fully made aware of the explicit authority consented by me/ us under this executed document.

I/ We do hereby authorize NJ India Invest Private Limited (hereinafter referred to as the "Stock Broker / Stock Broker and Depository Participant") acting through any of its directors and/or its duly authorized officers to perform the following functions on my/our behalf:

Sr. No	Purpose	Signature of the Client*		
		First Holder/ Sole Holder	Second Holder	Third Holder
1	Transfer of securities held in my/ our beneficial owner accounts towards Stock Exchange related deliveries/ settlement obligations arising out of trades executed by me/ us on the Stock Exchange through the Stock Broker.			
2	Pledging/ re-pledging of securities in favour of trading member (TM)/ clearing member (CM) for the purpose of meeting margin requirements in connection with the trades executed by me/ us 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			

## DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI) IN FAVOUR OF NJ INDIA INVEST PRIVATE LIMITED

I/we hereby covenant, ratify and confirm that all acts done and documents executed or signed by the stock broker/ stock broker and depository participant pursuant to this DDPI has been made, done and executed in good faith and shall for all-purpose be valid and binding on me/us and I/ we undertake to indemnify the stock broker/ stock broker and depository participant against all actions proceedings, claims, costs, expenses and liabilities of every description arising from the exercise or the purported exercise in good faith, of authorities conferred by this DDPI.

The stock broker/ stock broker and depository participant may appoint and remove at its discretion any authorized signatories for or under this DDPI in respect of all or any of the matters contained herein upon such terms and conditions as the stock broker/ depository participant may think fit.

I/we further agree and confirm that the authorities conferred under this DDPI shall continue until it is revoked in writing by me/us and that the said revocation shall be effective from the date on which the revocation notice is received by any person authorized in this regard by the Stock Broker in its office situated at Block No.901 & 902, 6th Floor, B Tower, Udhna Udhyaog Nagar Sangh Commercial Complex, Central Road No 10, Udhna Surat -394 210, Gujarat. However, such revocation shall not be applicable for any outstanding settlement obligation of funds/ securities arising out of the trades carried prior to receiving request for revocation of this DDPI.

List of the Stock Broker Designated Demat Account:-

Sr. No.	POOL ID/CLIENT ID/ CM BP ID	DP Name	Purpose
1	1206420000000404	NJ India Invest Private Limited	CM Pool Account(BSE)
2	1206420000000398	NJ India Invest Private Limited	CM Principal Account(BSE)
3	1100001000020915	NJ India Invest Private Limited	Early Pay In Account(BSE)
4	1206420000012724	NJ India Invest Private Limited	CM Clearing Member Account(BSE)
5	1100001100018830	NJ India Invest Private Limited	Early Pay In Account (NSE)
6	IN304262100000029	NJ India Invest Private Limited	NSDL Pool Account (BSE)
7	IN304262100000004	NJ India Invest Private Limited	NSDL Pool Account (NSE)
8	1206420012905404	NJ India Invest Private Limited	CDSL Client Unpaid Securities Account(BSE)
9	1206420012905419	NJ India Invest Private Limited	CDSL Client Unpaid Securities Account(NSE)
10	IN304262100000096	NJ India Invest Private Limited	NSDL Client Unpaid Securities Account(BSE)
11	IN30426210000107	NJ India Invest Private Limited	NSDL Client Unpaid Securities Account(NSE)
12	IN30426210000140	NJ India Invest Private Limited	NSDL TM Client Securities margin Pledge Account
13	1206420014906261	NJ India Invest Private Limited	CDSL Corporate TM/CM CMPA

I/we hereby authorize the stock broker/stock broker and depository participant to buy the stamp duty on DDPI through e-stamp certificate forming part of this document. I/we agree and acknowledge that the date of payment of stamp duty through e-stamp certificate or otherwise shall be considered as the date of execution of this DDPI.

I/we have hereunto set and subscribed my/our respective hands to these presents the day and the year herein below mentioned.

	Sole/First Applicant	Second Applicant	Third Applicant
NAME			
SIGNATURE			

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## DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI) IN FAVOUR OF NJ INDIA INVEST PRIVATE LIMITED

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We hereby accept to exercise the authorities conferred upon us in terms of the purposes mentioned herein above. This document is in conformity with the conditions as specified in SEBI/HO/MIRSD/DoP/P/CIR/2022/44 dated April 04, 2022 and amendments from time to time.

**For NJ India Invest Private Limited**



Director / Authorised Signatory

Date: DDMMYY

Place \_\_\_\_\_

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## BANK MANDATE TERMS & CONDITIONS

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(In favour of NJ India Invest Private Limited)

1. Bank Mandate is in favor of "NJ India Invest Private Limited" (Hereinafter 'NJ'), which will be used by NJ in the capacity of stock broker and depository participant.
2. The Bank details in the Bank Mandate MUST match with bank details updated in Client's E-Wealth Account/E-Wealth MF Account.
3. For Physical Mandate, Client Signature on bank mandate must be as per bank records. Signature of all bank account holders required if mode of holding in account is "Joint".
4. NJ reserves the right to register bank mandate with any mode i.e Auto Debit or ACH.
5. Client bank may charge client Bank accounts for activating any such services. Neither NJ nor its service provider shall be held responsible or bear any such charges.
6. The Mandate format is subject to change as per the guidelines issued by RBI/Bank or other concerned governmental or statutory authorities. NJ or its service provider may change the Mandate format without prior notice to the Clients & Transactions may be rejected by NJ or its service provider or Client's Bank due to any such change. Neither NJ nor its service provider shall be held responsible for any consequences.
7. The Mandate will be used for collection of all kinds of DP charges including Annual Maintenance Charges, client's fund obligation including pay-in and other charges arising out of client account. The Mandate shall cover all collections other than the Mutual Funds segment.
8. Client shall ensure sufficient balance in bank account for successful processing of Transactions.
9. Client banks may levy any charges to the client bank account if payment debit request submitted by NJ is failed due to any reason. Neither NJ nor its service provider shall be held responsible for any failure & any charges levied by the bank.
10. These Terms & Conditions cover Physical as well as eMandate both.
11. NJ reserves rights to change any of the Terms and Conditions without prior notice.
12. Any dispute shall be subject to exclusive jurisdiction of Courts at Surat.

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

\*Unique Client Code(UCC): \_\_\_\_\_

\*Date:   D     D     M     M     Y     Y     Y     Y  

Client Signature:



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## BANK MANDATE TERMS & CONDITIONS

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(In favour of Clearing Corporation)

1. Bank Mandate will be in favor of 'ICCL' for BSE Clearing Corporation and 'NCL' for NSE Clearing Corporation for all mutual fund transactions of clients.
2. The Bank details in the Bank Mandate MUST match with bank details updated in Client's E-Wealth Account/E-Wealth MF Account.
3. Client banks may charge for activating any such services from the Client's account. Neither NJ nor its service provider shall be held responsible or bear any such charges.
4. Client shall ensure sufficient balance in bank account for successful processing of Transactions.
5. Mandate format is subject to change as per the guidelines issued by Clearing Corporation/Stock Exchange or RBI/Bank or other concerned governmental or statutory authorities. NJ or its service provider may change the Mandate format without prior notice to the Clients & Transactions may be rejected by NJ or its service provider or Client's Bank due to any such change. Neither NJ nor its service provider shall be held responsible for any consequences.
6. Payment collection will be done by respective Clearing Corporation for Purchase & SIP transactions done using the Mandate registered with Clearing Corporation.
7. Mandate will be registered through the service providers of respective Clearing Corporation.
8. The Client authorizes Clearing Corporation to debit the Client Bank account for recovery of any dues of the Client in regards to mutual fund transactions including recovery of erroneous payments or collections.
9. These Terms & Conditions cover Physical as well as eMandate both.
10. NJ reserves rights to change any of the Terms and Conditions without prior notice.
11. Any dispute shall be subject to exclusive jurisdiction of Courts at Surat.

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

\*Unique Client Code(UCC): \_\_\_\_\_

\*Date:   D     D     M     M     Y     Y     Y     Y  

Client Signature:



[www.njwealth.in](http://www.njwealth.in)



**WEALTH**

**FINANCIAL  
PRODUCTS  
DISTRIBUTORS  
NETWORK**

**Head Office: NJ India Invest Private Limited**, Block No. 901 & 902, 6th Floor, 'B' Tower, Udhna Udyog Nagar Sangh Commercial Complex, Central Road No. 10, Udhna, Surat - 394 210, Gujarat.  
Phone: 91 261 4025500 | Website: [www.njwealth.in](http://www.njwealth.in) | CIN: U67120GJ2000PTC037674  
SEBI Reg No - BSE, NSE & ICEX: INZ000213137, SEBI Reg No - CDSL & NSDL: IN-DP-14-2015  
**Processing Centre:** Plot No. 232, Ground Floor and First Floor, Silvassa Commercial Complex, Tokarkhada, Silvassa - 396 230 | Mo.: 9909042468 | Email: [dpservices@njgroup.in](mailto:dpservices@njgroup.in)