

ACKNOWLEDGEMENT TO CAPITAL WIZARD FROM CLIENT

To,

CAPITAL WIZARD STOCK BROKING PVT. LTD.

8/200, Sector-3, Rajendra Nagar,
Sahibabad, Ghaziabad, U.P.-201005

Date : _____

I/we hereby confirm that I/we have read, understood, agreed and received a duly executed copy of the:-

- Account Opening Form
- Trading Account Related Details & Tariff Sheet (Trading & Demat Account)
- Rights and Obligations of Stock Brokers, Sub-Brokers and Clients
- Rights and Obligations of Beneficiary owner and Depository Participant as prescribe by SEBI and Depository
- Internet and Wireless technology based trading facility provided by Stock Brokers to Client
- Risk and Disclosure document for capital market and derivative segments
- Guidance note-Do's and Don't for trading on the Exchange(s) for Investors
- Policies and procedures
- Terms & Conditions as Mutually agreed by me & FATCA & CRS Terms & Conditions
- Other disclosure/documents as agreed by me specifically in voluntary segment.

I/we am/are abiding by these terms & conditions. I/we reconfirm that I/we and stock broker shall refer any claim and/or disputes with respect to deposits, margin money, etc, to arbitration as per the Rules, Byelaws, and Regulation of the Exchanges where the trade is executed and circulars/notices issued there under as may be in force from time to time. I/We reconfirm that I/we and Stock Broker shall refer all claims, differences or disputes between us arising out of or in relation to dealings, contracts and transaction made subject to the Bye-Laws, Rules and Regulations of the Exchange or with reference to anything incidental thereto or in pursuance thereof or relating to their validity, construction, interpretation, fulfillment or the rights, obligations and liabilities of the parties thereto and including any question of whether such dealings, transactions and contracts have entered into to arbitration in accordance with the provisions of these Byelaws and Regulations.

Thanks and Best regards,

Client Code : _____

For _____

Sign here : (1) 

Authorised Signatory Name

For **Capital Wizard Stock Broking Pvt. Ltd.**

Authorised Signatory / Director

----- (Tear Here) -----

RECEIPT OF PHYSICAL KIT

To,

CAPITAL WIZARD STOCK BROKING PVT. LTD.

8/200, Sector-3, Rajendra Nagar, Sahibabad, Ghaziabad, U.P.-201005

I/We hereby confirm that I/We have received a copy of following documents:

- A. Right and Obligations of Member, Authorized Person and Clients.
- B. Internet and Wireless technology based trading facility provided by Member to Clients.
- C. Risk and Disclosure document for capital market and derivative segments.
- D. Guidance Note-Do's and Don'ts for trading on the Exchange(s) for Investors
- E. Policies and procedures
- F. Other disclosure/ documents as agreed by me/us specifically in voluntary segment.

Sign here : (2) 

Client Name: _____

Date: _____

DOCUMENTS REQUIRED AS PER SEBI CIRCULAR CIR/MIRSD/16/2011 DATED 22-08-2011
Read with SEBI Circular bearing Reference No. MIRSTD/SE/CIR-19/2009 dated 3-12-2009

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MANDATORY DOCUMENTS AS PRESCRIBED BY DEPOSITORIES , EXCHANGES & SEBI

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VOLUNTARY DOCUMENTS AS PROVIDED BY GLOBE

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Name of Stock Broker / Depository Participant :- **CAPITAL WIZARD STOCK BROKING PVT. LTD.**
Registered Office : 8/200, Sector-3, Rajendra Nagar, Sahibabad, Ghaziabad, U.P.-201005 • Ph.: 0120-4190271 Fax No. : 0120-4190276
Correspondence Office : 8/200, Sector-3, Rajendra Nagar, Sahibabad, Ghaziabad, U.P.-201005 • Ph. : 0120-4190271 Fax No. : 0120-4190276
Depository Division : 8/200, Sector-3, Rajendra Nagar, Sahibabad, Ghaziabad, U.P.-201005 • Ph.: 0120-4190271, Fax No. : 0120-4190276

CEO : Mr. Anil Kumar Goswami, Phone No. : Ph.: 0120-4190271, Email id: info@capitalwizard.in

Compliance Officer Details :

NSE & MSEI : Mr. Rajesh Raturi Ph.: 0120-4190271 Email id: info@capitalwizard.in	BSE Mr. Rajesh Raturi Ph.: 0120-4190271 Email id: info@capitalwizard.in	DP Mr. Rajesh Raturi Ph.: 0120-4190271 Email id: info@capitalwizard.in
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(Tear Here)

(Tear Here)

Application Form (For Individuals Only)



Please fill in ENGLISH and BLOCK LETTERS with black ink

KYC Number of applicant

A. Identity Details

1. Name of Applicant (As appearing in supporting identification document).

Name* Prefix First Name Middle Name Last Name
Maiden Name (if any*)
Father / Spouse Name*
Mother Name*

2. A. Gender Male Female Transgender B. Date of Birth C. Marital status Single Married Others

3. Nationality / Citizenship* Indian Other (Please specify)

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

(If Non Resident/Foreign National, self certified copy of statutory approval obtained must be attached)

Occupation (Please tick (3) any one and give brief details):

Private Sector Service Public Sector Government Service Business Professional Agriculturist
Retired Housewife Student Others (Please specify)

5. PAN Please enclose a duly attested copy of your PAN Card

UID/Aadhaar (Mandatory) :

6. Proof of Identity submitted for PAN exempt cases Please(3) (Please see guideline 'D' overleaf)

UID (Aadhaar) Passport Voter ID Driving Licence Others

PHOTOGRAPH

Please affix the recent passport size photograph and sign across it

B. Address Details

1. Address for Correspondence

City/Town/Village Pin Code
State Country

2. Contact Details

Tel. (Off.) (ISD) (STD) Tel. (Res.) (ISD) (STD)
Mobile (ISD) (STD) Fax (ISD) (STD)

MOBILE given by me belongs to Me Spouse Dependent children Dependent Parent

E-Mail Id.

E-MAIL ID given by me belongs to Me Spouse Dependent children Dependent Parent

No E-Mail/Mobile Declaration I hereby declare that I do not have any Email ID/Mobile

3. Specify the Proof of Address submitted for Residence / Correspondence Address

4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant

City/Town/Village Pin Code
State Country

5. Specify the Proof of Address submitted for Residence / Permanent Address

C. Fatca & CRS Detail

Nationality/Tax Residency/Citizen ship Other than India No Yes

Country of Birth Place/City of Birth
Country of Citizenship/Nationality
Country of Tax Residency (Other Than India)
Tax Payer Identification Number (Other Than India)

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I under take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it. I hereby declare that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time. I hereby give my consent for receiving information including Central KYC Registry through SMS/Email on the above registered number/email address.

Place:

Date:

SIGNATURE OF APPLICANT

(3) [Signature]

FOR OFFICE USE ONLY

Intermediary name OR code

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received Main Intermediary

IN-PERSON VERIFICATION (IPV) DOCUMENTS VERIFIED WITH ORIGINALS CLIENT INTERVIEWED BY

Date: dd / mm / yyyy

Institution Name & Code: Capital Wizard Stock Broking Pvt. Ltd.

Employee/AP/SB Details :

Name : Code :

Designation : Signature :

ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT (INDIVIDUAL)

DP ID : 12074000

DP ID		1	2	0	7	4	0	0	0	Client ID								
-------	--	---	---	---	---	---	---	---	---	-----------	--	--	--	--	--	--	--	--

I/We request you to open a depository account in my/our name as per following details :

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

(Please fill all the details in CAPITAL/BLOCK LETTERS only)

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

<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual Director	<input type="checkbox"/> Individual Director's Relative
	<input type="checkbox"/> Individual HUF/AOP	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Minor
	<input type="checkbox"/> Individual Margin Trading A/c (Mantra)		<input type="checkbox"/> Others (Specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable	<input type="checkbox"/> NRI Repatriable Promoter
	<input type="checkbox"/> NRI Non-Repatriable Promoter	<input type="checkbox"/> NRI - Depository Receipts	<input type="checkbox"/> Others (Specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National-Depository Receipts	<input type="checkbox"/> Others (Specify) _____
<input type="checkbox"/> Sub Type	<input type="checkbox"/> Stock Broker-Client	<input type="checkbox"/> Stock Broker-Proprietary	<input type="checkbox"/> Stock Broker-Collateral

B. HOLDERS DETAILS

Account Holder(s)	Sole/First Holder	Second Holder	Third Holder
Name			
PAN			
Date of Birth	-	-	-
UID / Aadhaar			
Brief Details			

C. Name _____	PAN _____
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.	

D. DETAILS OF GUARDIAN (in case the account holder is minor)

Guardian's Name _____	PAN _____
Relationship with the applicant _____	Date of birth _____

I/We instruct the DP to receive each and every credit in my/our account (if not marked, the default option would be 'Yes')	[Automatic Credit] <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 (If not marked, the default option would be as per SEBI Regulation)	<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 would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I 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"/> Both Physical & Electronic
I/We wish to receive dividend/interest directly in to my/our 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

Easi	To register for easi, please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Transactions Using Secured Texting Facility (TRUST) Refer to Terms and Conditions Annexure B	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. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I 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)

NOMINATION OPTION (For DP & Trading both)

I/We wish to make a nomination.
[As per details given below]

I/We wish to cancel the nomination made by me/ us earlier and consequently all rights and liabilities in respect of beneficiary ownership in the securities held by me / us in the said account shall vest in me/ us. [Strike off the nomination details below]

NOMINATION DETAILS

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all securities held in the Depository by me / us in the said beneficiary owner account in the event of my / our death.

Nomination can be made upto three nominees in the account.		Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1	Name of the nominee(s) (Mr./Ms.)			
2	Share of each Nominee <input type="checkbox"/> Equally [If not equally, please specify percentage]	%	%	%
Any odd lot after division shall be transferred to the first nominee mentioned in the form.				
3	Relationship With the Applicant (If Any)			
4	Address of Nominee(s)			
	PIN Code			
5	Mobile/Telephone No. of Nominee(s)			
6	Email ID of Nominee(s)			
7	Nominee Identification details : [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature	Photograph of 1st nominee <i>Signature of Nominee across photograph</i>	Photograph of 2nd nominee <i>Signature of Nominee across photograph</i>	Photograph of 3rd nominee <i>Signature of Nominee across photograph</i>
	<input type="checkbox"/> PAN			
	<input type="checkbox"/> Aadhaar			
	<input type="checkbox"/> Saving Bank Account No.			
	<input type="checkbox"/> Proof of Identity			
	<input type="checkbox"/> Demat Account ID			

Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:

8	Date of Birth {in case of minor nominee(s)}			
9	Name of Guardian (Mr./Mrs.) {in case of minor nominee(s)}			
10	Address of Guardian			
	PIN Code			
11	Mobile/Telephone No. of Guardian			
12	Email ID of Guardian			
13	Relationship of Guardian with Nominee			
14	Guardian Identification details : [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature	Photograph of 1st Guardian <i>Signature of Guardian across photograph</i>	Photograph of 2nd Guardian <i>Signature of Guardian across photograph</i>	Photograph of 3rd Guardian <i>Signature of Guardian across photograph</i>
	Signature			




<input type="checkbox"/> PAN																				
<input type="checkbox"/> Aadhaar																				
<input type="checkbox"/> Saving Bank Account No.																				
<input type="checkbox"/> Proof of Identity																				
<input type="checkbox"/> Demat Account ID																				
Signature of Witness for Nomination																				
Name of the Witness							Address							Signature of Witness						
			Date			D	D	M	M	Y	Y	Y	Y							

Notes:

- The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
- A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
- The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange/depository controls in force, from time to time.
- Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
- Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
- The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
- On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
- Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
- On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
- Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents.
- Savings bank account details shall only be considered if the account is maintained with the same participant.
- DP ID and client ID shall be provided where demat details is required to be provided.

DECLARATION

I/we acknowledge the receipt of copy of document, "Rights and Obligations of the Beneficial Owner and Depository Participant". The rules and regulations of the Depository and Depository Participants pertaining to an account are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/we hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am/we are aware that I/we may be held liable for it. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations.

	Sole / First Holder / Guardian (Mr./Ms.) (in case of Minor)	Second Holder (Mr./Ms.)	Third Holder (Mr./Ms.)
Name			
Signatures	(4) 	(1) 	(1) 

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. for non-residents and foreign nationals (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NFU's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc

B. Proof of Identity (POI): List of documents admissible as Proof of Identity:

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

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

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

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority,
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions. Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.to their Members.
7. For FII/sub account. Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted. Exemptions/clarifications to PAN

D. Exemptions/clarifications to PAN

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

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

E. List of people authorized to attest the documents:

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

F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, as mentioned below:

Types of entity	Documentary requirements
Corporate	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/whole time director/MD (to be submitted every year) • Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations • Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly • Copies of the Memorandum and Articles of Association and certificate of incorporation • Copy of the Board Resolution for investment in securities market • Authorised signatories list with specimen signatures
Partnership firm	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Certificate of registration (for registered partnership firms only) • Copy of partnership deed • Authorised signatories list with specimen signatures • Photograph POI, POA, PAN of Partners
Trust	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Certificate of registration (for registered trust only). Copy of Trust deed • List of trustees certified by managing trustees/CA • Photograph, POI, POA, PAN of Trustees
HUF	<ul style="list-style-type: none"> • PAN of HUF • Deed of declaration of HUF/List of coparceners • Bank pass-book/bank statement in the name of HUF • Photograph, POI, POA, PAN of Karta
Unincorporated Association or a body of individuals	<ul style="list-style-type: none"> • Proof of Existence/Constitution document • Resolution of the managing body & Power of Attorney granted to transact business on its behalf • Authorized signatories, list with specimen signatures
Banks/Institutional Investors	<ul style="list-style-type: none"> • Copy of the, constitution/registration or annual report/balance sheet for the last 2 financial years • Authorized signatories list with specimen signatures
Foreign Institutional Investors (Fit)	<ul style="list-style-type: none"> • Copy of SEBI registration certificate • Authorized signatories list with specimen signatures
Army/Government Bodies	<ul style="list-style-type: none"> • Self-certification on letterhead • Authorized signatories list with specimen signatures
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Societies Registration Act • List of Managing Committee members • Committee resolution for persons authorised to act as authorised signatories with specimen signatures • True copy of Society Rules and Bye Laws certified by the Chairman/Secretary

Please Submit the KYC Documents on A4 Size Paper Only.

ANNEXURE

Name, PAN, Residential Address and photographs of Promoters/Partners/Karta/Trustees and Wholetime/Other Directors :

1. Name	<input type="text"/>	<small>Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories</small>		
Date of Birth	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>		Status <input type="text"/>	PAN <input type="text"/>
Residential Address	<input type="text"/>			
DIN	UID		DPIN	
Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/Other Directors: <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not a Politically Exposed Person (PEP) <input type="checkbox"/> Not Related to a Politically Exposed Person (PEP)				

2. Name	<input type="text"/>	<small>Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories</small>		
Date of Birth	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>		Status <input type="text"/>	PAN <input type="text"/>
Residential Address	<input type="text"/>			
DIN	UID		DPIN	
Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/Other Directors: <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not a Politically Exposed Person (PEP) <input type="checkbox"/> Not Related to a Politically Exposed Person (PEP)				

3. Name	<input type="text"/>	<small>Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories</small>		
Date of Birth	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>		Status <input type="text"/>	PAN <input type="text"/>
Residential Address	<input type="text"/>			
DIN	UID		DPIN	
Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/Other Directors: <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not a Politically Exposed Person (PEP) <input type="checkbox"/> Not Related to a Politically Exposed Person (PEP)				

4. Name	<input type="text"/>	<small>Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories</small>		
Date of Birth	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>		Status <input type="text"/>	PAN <input type="text"/>
Residential Address	<input type="text"/>			
DIN	UID		DPIN	
Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/Other Directors: <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not a Politically Exposed Person (PEP) <input type="checkbox"/> Not Related to a Politically Exposed Person (PEP)				

5. Name	<input type="text"/>	<small>Photographs of Promoters / Partners / Karta / Trustees / Wholetime / Other Directors & authorised signatories</small>		
Date of Birth	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>		Status <input type="text"/>	PAN <input type="text"/>
Residential Address	<input type="text"/>			
DIN	UID		DPIN	
Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/Other Directors: <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not a Politically Exposed Person (PEP) <input type="checkbox"/> Not Related to a Politically Exposed Person (PEP)				

ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT (NON-INDIVIDUAL)

DP ID : 12074000

DP ID	1	2	0	7	4	0	0	0	Client ID								
-------	---	---	---	---	---	---	---	---	-----------	--	--	--	--	--	--	--	--

I/We request you to open a depository account in my/our name as per following details :

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

(Please fill all the details in CAPITAL/BLOCK LETTERS only)

TYPE OF ACCOUNT (Please tick whichever is applicable)

Status Body Corporate Banks Trust Mutual Fund OCB FII CM FI
 Clearing House Others (Specify) _____

Sub-Status Client Proprietary Collateral Pool account Settlement Account

SEBI Registration No. (if applicable)		SEBI Registration Date	D	D	M	M	Y	Y	Y	Y
RBI Registration No. (if applicable)		RBI Approval Date	D	D	M	M	Y	Y	Y	Y
ROC Registration No. (if applicable)		ROC Registration Date	D	D	M	M	Y	Y	Y	Y
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify) _____									

HOLDERS DETAILS

Account Holder(s)	Sole/First Holder	Second Holder	Third Holder
Name			
PAN			
Date of Incorporation			
Brief Details			

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.

I/We instruct the DP to receive each and every credit in my/our account (if not marked, the default option would be 'Yes')

[Automatic Credit] Yes No

Account Statement Requirement As per SEBI Regulation Daily Weekly Fortnightly Monthly

I/We request you to send Electronic Transaction-cum-Holding Statement at the email Id _____ Yes 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')

Yes No

Account Statement Requirement (If not marked, the default option would be as per SEBI Regulation)

As per SEBI Regulation Daily Weekly Fortnightly Monthly

I would like to share the email ID with the RTA Yes No

I would like to receive the Annual Report (Tick the applicable box. If not marked the default option would be in Physical)

Physical Electronic Both Physical & Electronic

Do you wish to receive dividend/interest directly in to your bank account 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]

Yes No

SMS Alert Facility Refer to Terms & Conditions given as Annexure A	MOBILE No.: +91-..... [Mandatory, if you are giving Power of Attorney (POA)] (if POA is not granted & you do not wish to avail of this facility, cancel this option).	<input type="checkbox"/> Yes <input type="checkbox"/> No
Easi	To register for easi, please visit our website www.cdslindia.com. Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.	<input type="checkbox"/> Yes <input type="checkbox"/> No

I/We have received and read the "Right and Obligations documents" and terms and conditions agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I/We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details/Particulars mention by me/us in this form. I/We further agree that any false/misleading information given by me/us or suppression of any material information will render my account liable for termination and suitable action.

	Sole / First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Designation			
Signatures	(6)	(2)	(2)

(Signatures should be preferably in black ink)

(In case of more authorised signatories, please add annexure)

TRADING & DEMAT ACCOUNT RELATED DETAILS
For both Individuals & Non-individuals

A. BANK ACCOUNT(S) DETAILS

I. PRIMARY BANK ACCOUNT DETAIL FOR TRADING & DEMAT ACCOUNT

Bank Name	Bank Address	Bank Account No.	Account Type	MICR No.	IFSC Code
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> NRI <input type="checkbox"/> NRO		

II. SECONDARY BANK ACCOUNT DETAIL FOR TRADING

Bank Name	Bank Address	Bank Account No.	Account Type	MICR No.	IFSC Code
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> NRI <input type="checkbox"/> NRO		












B. DEPOSITORY ACCOUNT(S) DETAILS

Depository Participant Name	Depository Name (NSDL/CDSL)	Beneficiary Name	DP ID	Beneficiary ID (BO ID)

I authorize you to transfer the shares purchased by me to the above mentioned demat beneficiary account.

C. TRADING PREFERENCE

Select and Sign against the Segment of Exchange in which Trading facility required:

<input type="checkbox"/> NSE - Cash 	<input type="checkbox"/> BSE - Cash 	<input type="checkbox"/> MSEI - Cash 
<input type="checkbox"/> NSE - F&O 	<input type="checkbox"/> BSE - F&O 	<input type="checkbox"/> MSEI - F&O 
<input type="checkbox"/> NSE - Currency 	<input type="checkbox"/> BSE - Currency 	<input type="checkbox"/> MSEI - Currency 
<input type="checkbox"/> NSE Mutual Fund 	<input type="checkbox"/> BSE Mutual Fund 	

If, in future, the client wants to trade on any new segment/new exchange, separate authorization/letter should be taken from the client by the stock broker.

D. ADDITIONAL DETAILS

- Whether you wish to receive Electronic Contract Note (ECN) : Yes No
- Whether you wish to receive your executed KYC Electronically Physically
- Whether you wish to avail of the facility of internet trading/ wireless technology : Yes No (if yes, then please specify)
- Application Base Trading Web Base Trading Securities Trading using Wireless Technology NOW
- Number of Years of Investment / Trading Experience : _____
- Any other information : _____

E. OTHER DETAILS

- **Gross Annual Income Details** : Income Range per annum : Below Rs. 1 Lac Rs. 1 Lac to 5 Lac
(please tick ✓) Rs. 5 Lac to 10 Lac Rs. 10 Lac to 25 Lac Rs. 25 Lac to 1 Crore > 1 Crore
- **Net Worth** (Net worth should not be older than 1 year) **Amount Rs**.....
as on (date)
- **Is the entity involved/providing any of the following services** Yes No
- For Foreign Exchange/Money Changer Services Yes No - Gaming/Gambling/Lottery Services (e.g. casinos, betting syndicates)
- Money Lending / Pawning Yes No
- **Please tick, if applicable** (Note : In case of Non-individuals please tick, if applicable for any of your authorised signatories/ Promoters/Partners/Karta/Trustees/whole time directors) :
 Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)
- **Any other information** :

F. PAST ACTIONS

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

G. DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS

G1. DEALINGS THROUGH SUB-BROKERS

■ If client is dealing through the sub-broker, provide the following details:
 Sub-broker's Name: _____ SEBI Registration number: _____
 Registered office address : _____

 Ph : _____ Fax: _____ Website: _____

G2. DEALINGS THROUGH OTHER STOCK BROKERS / SUB BROKERS


■ whether dealing with any other stock broker / sub broker (if case dealing with multiple stock broker / sub broker, provide details of all)
 Name of Stock Broker: _____ Name of Sub-Broker, if any : _____
 Client Code: _____ Exchange : _____
 ■ Details of disputes/dues pending from/to such stock broker / sub broker : _____

DECLARATION

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website, if any


Place:

Date:

Sign here : (7) 

TARIFF SHEET

BROKERAGE STRUCTURE

Brokerage Slab	% of Turnover	Minimum Paise Per Share	Brokerage Slab	% of Turnover	Minimum Paise Per Share
Delivery Based		Paise _____ Per Share	Currency Future		Paise _____ Per Share
Daily Square up		Paise _____ Per Share	Currency Option		Rs. _____ Per Lot
Equity Future		Paise _____ Per Share	Mutual Fund		Paise _____ Per Share
Equity Option		Rs. _____ Per Lot	 Sign here in case of cutting / overwriting		

Important Note : In case of Physical Contract notes or other related documents being dispatched to client, a difference of Rs. 25/- in total brokerage booked on a particular contract would be charged toward minimum processing fee. Delay payment charges @2% per month would be charged for debit/shortage in payin/margin default, as per exchange requirements. Depository/Pledge charges for the movement of shares between pool/ beneficiary/margin account for payin / payout or margin purpose will be charged. Transaction charges/Clearing Charges/other statutory charges/ courier/ administration/ processing charges will be charged as applicable. Handling charges for issue of account statement, copy of contract note etc. will be charged as applicable.

SCHEDULE OF CHARGES FOR DEMAT ACCOUNT INDIVIDUAL / CORPORATE - NSDL

NATURE OF SERVICES	CHARGES (Please tick whichever applicable)		
	<input type="checkbox"/> Regular Scheme	<input type="checkbox"/> Capital Relax	<input type="checkbox"/> Life Time
Account Maintenance Cycle	One year	Twenty Quarter (5 Year)	Life Time
Maintenance Charges (Non-Corporate Account)	₹ 400/-	₹ 1000/-	₹ 1500/-
Maintenance Charges (Corporate Account)	₹ 1500/-	Not Applicable	Not Applicable
TRANSACTION CHARGES			
Delivery	Market Transaction	₹ 20/- per instruction or 0.02% of transaction value, whichever is higher, subject to maximum of ₹ 100/-	
	Off Market Transaction	₹ 25/- per instruction or 0.03% of transaction value, whichever is higher, subject to maximum of ₹ 1000/-	
Pledge Creation/Closure/Invocation	₹ 50/- per instruction or 0.02% of transaction value, whichever is higher		
Demat Charges	₹ 50/- for up to first hundred and after first hundred ₹10/- for every hundred securities or part thereof or a flat fee ₹ 10/- per certificate whichever is higher plus courier charges of ₹40 for every 25 certificate and part thereof		
Remat Charges	₹ 100/- for up to first hundred and after first hundred ₹ 30/- for every hundred securities or part thereof or a flat fee ₹ 30/- per certificate whichever is higher		
Mutual Funds (Destat / Redemption)	₹ 50/- per instruction plus courier charges		
Instruction Booklet	₹ 2/- per leaf plus courier charges		

Note:

- The Depository Participant shall reserve the right to revise the charges by giving not less than 30 days notice in writing to the client.
- Value of Transaction will be in accordance with the Depository formulae.
- Modification in client detail, 40/- per instance. Maintenance charges will be charged in advance at the time of opening the account.
- Rejection charges 50/- per rejection plus courier charges.
- Slip Rejection/Fail charges 20/- per rejection.
- Off-Market Instruction not received prior to 24 hours of execution will be received at client's risk.
- Instruction for Pay-In of securities to transfer from client account to CM Pool account, Inter settlement instruction, CM Pool to CM Pool transfer and delivery instruction will be accepted up till 4:00 PM on working day prior to Pay-in date.
- Periodic statement free on Email and Rs 40 towards courier charges if sent physically.
- Non-periodic statement shall be charged @ 5/- per page and postage/courier charge @ Rs 40 or actual charges whichever is higher.
- In case of non-payment of bill/dues within 30 days of due date, interest shall be charged @ 2.0% per month on the outstanding dues.
- Rs 100 will be charged to client in case of New Delivery Instruction Booklet is requested without requisition slip.
- All charges are exclusive of Service Tax. Taxes and other Government levies will be charges extra as applicable from time to time.

“AS per SEBI Circular No. CIR/MRD/DP/22/2012 dated 27th August 2012, all clients who are willing to hold only one demat account as first holder and DP holding valuation will be maintained below Rs. 2 Lac. Is eligible to opt for BSDA (Basic Service Demat Account) subject to term and conditions mentioned by SEBI.” To opt BSDA scheme please sign a separate scheme sheet which can be obtained from our office.”

I/We do not wish to avail BSDA facility in my/our Demat Account

I/We wish to avail BSDA facility in my/our Demat Account.


For Capital Wizard Stock Broking Pvt. Ltd.

Authorised Signatory
(On Behalf of Depository Participant)


HOLDER'S SIGNATURES :

1. (8) 

Sole/First Holder Signature

2. (3) 

Second Holder Signature

3. (3) 

Third Holder Signature

GENERAL AUTHORISATION BY THE CLIENT

CAPITAL WIZARD STOCK BROKING PVT. LTD.

8/200, Sector-3, Rajendra Nagar,
Sahibabad, Ghaziabad, U.P.-201005

Date : _____

A. RUNNING ACCOUNT AUTHORISATION

I/We are dealing through you as a client in Capital Market and/or Future & Option segment and/or Currency segment and/or Interest Rate future Segment and/or Mutual Fund Segment & in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as under:

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing corporation unless I/we instruct you otherwise.
2. I/We request you to retain securities with you for my/our margin/pay-in/other-future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing Corporation unless I/We instruct you to transfer the same to my/our account.
3. I/We request you to settle my fund and securities account once in every calendar Quarter or once in a calendar Month or such other higher period as allowed by SEBI/Stock Exchange time to time except the funds given towards collaterals/margin in form of Bank Guarantee and/or Fixed Deposit Receipt.
4. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite securities/funds/Mutual Fund Units towards such obligations and may also retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the exchanges.
5. I/We confirm you that I will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 7 working days from the date of receipt of funds/securities or statement of account or statement related to it, as the case may be at your registered office.
6. I/We further authorize you to retain an amount of upto ₹ 10,000/- (net amount across segment and across stock exchanges) in order to avoid administrative/operational difficulties in settling my/our account. The same may be released on my/our specific request.

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

Sign here : (9) 

Client Name : _____

B. VERBAL ORDER ACCEPTANCE AUTHORISATION

I/we am dealing with you as client at NSE/BSE/MSEI in Capital, Derivative & Currency Derivative Segment. As my/our broker i.e. agent I/We direct and authorize you to carry out trading/ dealing on my/our behalf as per instruction given below.

I/We agree and acknowledge that it is advised by you that I/We should give instruction for order placement/ modification and cancellation in writing and to avoid disputes, I/We must give instruction in exactly the format in duplicate (carbon copy/ photocopy only) and take signatures of at least two authorized officers at the branch along with company stamp on the carbon copy/ photocopy of the instructions in acknowledgment of receipt of my our instructions.

However as I/We shall be dealing by ordering over phone and even if we visit the branch, the fluctuations in market are so rapid the it is not practical to give written instructions for order placement/modification and cancellation, I/We hereby authorize you to accept my/our authorized representative's verbal instructions for order placement/modification and cancellation in person or over phone (fixed line/mobile phone) and execute the same. I/ We understand the risk associated with verbal orders and accept the same, and agree that I/We shall not be entitled to disown orders and consequent trades (if any) by shifting the burden of proof by asking you to prove the placement/modification and cancellation of orders through telephone recording or otherwise.

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.

Sign here : (10) 

Client Name : _____

C. GENERAL AUTHORITY

Sub: Letter of Authority

I/we dealing with you as client at NSE/BSE/MSEI in Capital, Derivative & Currency Derivative Segment and in order to facilitate ease of operations, I/We authorise you as under :

1. I/We authorise you to set off outstanding in any of my/our accounts against credits available or arising in any other accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the Exchange or in any other exchange and/or against the value of cash margin or collateral shares provided to you by me/us.
2. I/We hereby authorise you not to provide me/us Order Confirmation/ Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We shall get the required details from contract notes issued by you.
3. I/We hereby authorise you to keep all securities which I/We have given you in margin including the payout securities received by us for meeting margin/order obligation in any of the stock exchanges/clearing house/clearing corporation in whatever manner which may include pledging of shares in favor of bank and/or taking loan against the same or meeting margin/pay-in obligation on my/our behalf or for giving the same as margin to any of the stock exchanges/ clearing house/clearing corporation or otherwise. Further, I/We shall when called upon to do so forthwith from time to time provide a Margin Deposit and/or furnish additional Margin as required under the Rules and Regulations in respect of the business done by me and/or as agreed upon by me with the Trading Member.
4. I/We request you to retain credit balance in any of my/our account and to use the unused funds towards my/our margin/future obligation at any or all the Exchanges unless I/We instruct you otherwise. I/We also authorize you to debit the necessary demat charges from time to time, for keeping the shares in your client demat beneficiary account on my behalf. I/We also authorise you to debit the financial charges @2% p.m., for the debit balances or delay payment charges at the rate prescribed by exchange for shortage in margin/debit balances, if any, in my account and not settled as per the exchange requirements.
5. I/We request you to retain Securities in your demat account for my/our margin/future obligations at all Exchanges, unless I/We instruct you to transfer the same to my/our account.
6. I/We request you to consider my/our telephonic instructions for order placing/order modification/order cancellation as a written instruction and give me/us all the confirmation on telephonic unless instructed otherwise in writing. I/We am/are getting required details from contracts issued by you.
7. We request that you/exchange/other regulatory authority may send/dispatch us contract notes/e-mail alert/other documents through e-mail on my/our designated e-mail address mentioned by me/us in KYC. I/We will completely rely on the log reports of you dispatching software as a conclusive proof of dispatch of e-mail to me/us and will not dispute on the same. I/We note that non-receipt of bounced mail notification by the stock broker shall amount to delivery of the contract note at my/our e-mail ID.
8. I/We will inform you the change of my/our demographic detail and other detail like Bank, DP etc.
9. I/We are aware and acknowledge that trading of all exchanges is in Electronic mode, based on Vsat, lease line, ISDN, Modem, VPN, Internet and/or combination of technologies and computer system to place and route order and also involves many uncertain factors and complex hardware, software, systems, communication lines, peripherals, pay in payout of funds & securities, online & offline banking etc. these are susceptible to interruptions, delay, mistake and dislocations; and your services may at any time be unavailable without further notice and I/we understand that there exists a possibility of communication failure or system problems or slow or delay response from system or trading half, or any such other problem/glitch whereby not been able to establish access to the trading system/network or delay in execution of trades, which may be beyond your control any may result in delay in processing or not processing of any orders either in part or in full. I understand that you are not making any representation or warranty that your service will be available to the Client at all times without any interruption. I/We agree that I/We shall not have any claim for any loss incurred by me/us against you on account of any suspension, delay, interruption, non-availability or malfunctioning of your System or Service for any reason whatsoever.
10. I/We confirm that I/We never sublet the trading terminal on any term of connectivity from my place to any other place without your prior approval.
11. I/We am/are agreeable for inter-settlement transfer of securities towards settlement.
12. I/we am/are agreeable for & authorise you to with hold funds pay-out towards all the applicable margins and debits.
13. All fines/penalties and charges levied upon you due to my acts/ deeds or transaction may be recovered by you from my account.
14. I have a Trading As well as depository relationship with **Capital Wizard Stock Broking Pvt. Ltd.** Please debit the charges relevant with depository services from my trading account. I also agree to maintain the adequate balance in my trading account/ pay adequate advance fee for the said reason.
15. I authorise you to send me the physical Contract notes/Margin statement/Ledger/Other documents through postal/courier and to charge administrative/postal/other charges if the contract notes sent to me get bounced morethan 5 times

Yours faithfully,

Sign here : (I I) 

Client Name : _____

Client Code : _____

LETTER OF AUTHORITY TO TRADE

To,

CAPITAL WIZARD STOCK BROKING PVT. LTD.

8/200, Sector-3, Rajendra Nagar, Sahibabad, Ghaziabad, U.P.-201005

Sub: Authority to trade on my / our behalf.

Dear Sir,


I/we am/are the holder of the a trading account bearing number (hereinafter referred to as the "Account") opened and maintained with you and wish to appoint/ nominate Mr./Ms. (hereinafter referred to as the "Representative"), who is my related to me as S/D/W of....., age.....years, presently residing at to perform all or any of the following acts, deeds and things, for and on my/our behalf and in my/our interest.

1. To operate the Account on my/our behalf.
 2. To issue necessary instructions to you, for purchase, sale or transfer of shares and Securities from or to the Account as per Representative own judgment, and to sign necessary documents, wherever required effectuating such instructions of purchase, sale or transfer of securities from or to the Account.
 3. To make or cause to make payments to **Capital Wizard Stock Broking Pvt. Ltd. (CWSBPL)**. whenever necessary, and in accordance with my/our obligations in accordance with the terms and conditions of various agreements executed between me/us and CWSBPL.
 4. To duly honour all my/our contractual obligations under various agreements executed between me/us and CWSBPL. As per the rules, bye laws and regulations of the Exchanges/Regulatory Authorities and/or any other undertaking, commitment issued by my/us in favour of CWSBPL.
 5. To accept and give valid discharges for acceptance and submission of contract notes, bills, ledger statements, transaction statements and all correspondence on my behalf and report any discrepancy therein to CWSBPL.
 6. To receive & accept necessary telephonic calls pertaining to margin &/or trade confirmation or any other call including verification call from CWSBPL at designated mobile no. & undertake to update this contact detail in writing with CWSBPL in the event of any such change, taking place at any time in future.
 7. To sincerely abide by the Statutes, Rules, Regulations and Guidelines prescribed for the purpose and in relation to the operation of the Account.
- A. I/we hereby agree and undertake that all such acts, deeds and things done by the Representative shall be deemed to be binding upon me/us as the same has been done by me/us only and I/we shall hereby ratify all and such acts, deeds, or things done by Representative in any manner whatsoever in discharge of the duties conferred upon him/her under the present instrument.
- B. I/we hereby agree and undertake to indemnify and keep CWSBPL including its directors, officers and employees indemnified against any loss, claims, liabilities, obligations, damages, deficiencies, actions, suits, or proceedings aroused / accrued or caused to the CWSBPL for any wrong act, deed or thing done by the Representative in any manner whatsoever in exercise of the powers conferred upon him.
- C. I/we further undertake and agree not to challenge any act, deed or things done by said Representative in any manner.
- D. I/we hereby agree and acknowledge that this letter of Authority shall be effective and operational until CWSBPL received and acknowledged revocation letter at its registered office.

Client Name : _____

Client Code : _____

Date : _____

Sign here : (12) 

FIT AND PROPER PERSON DECLARATION

As per Regulation 19(1) of Securities Contracts (Regulation) (Stock Exchanges and Clearing Corporations) Regulations, 2012 (SECC Regulations) which states that no person shall, directly or indirectly, acquire or hold equity shares of a recognised Stock Exchange or recognised Clearing Corporation unless he is a fit and proper person in terms of Regulation 19 and 20 of the said SECC Regulations.

Regulations 19 and Regulations 20 as prescribed by SEBI (herein referred as "Board") are reproduced below:

A. Eligibility for acquiring or holding shares.

- (1) No person shall, directly or indirectly, acquire or hold equity shares of a recognised stock exchange or recognised clearing corporation unless he is a fit and proper person.
- (2) Any person who, directly or indirectly, either individually or together with persons acting in concert, acquire equity shares such that his shareholding exceeds two per cent of the paid up equity share capital of a recognised stock exchange or recognised clearing corporation shall seek approval of the Board within fifteen days of the acquisition.
- (3) A person eligible to acquire or hold more than five per cent of the paid up equity share capital under sub-regulation (2) of regulation 17 and sub-regulation (2) of regulation 18 may acquire or hold more than five per cent of the paid up equity share capital of a recognised stock exchange or a recognised clearing corporation only if he has obtained prior approval of the Board.
- (4) Any person holding more than two per cent. of the paid up equity share capital of the recognised stock exchange or the clearing corporation on the date of commencement of these regulations, shall ensure compliance with this regulation within a period of ninety days from the date of such commencement.
- (5) If approval under sub-regulation (2) or (3) is not granted by the Board to any person, such person shall forthwith divest his excess shareholding.
- (6) Any person holding more than two per cent. of the paid up equity share capital in a recognised stock exchange or a recognised clearing corporation, as the case may be, shall file a declaration within fifteen days from the end of every financial year to the recognised stock exchange or recognised clearing corporation, as the case may be, that he complies with the fit and proper criteria provided in these regulations.

B. Fit and proper criteria.

- (1) For the purposes of these regulations, a person shall be deemed to be a fit and proper person if—
 - (a) such person has a general reputation and record of fairness and integrity, including but not limited to—
 - (i) financial integrity;
 - (ii) good reputation and character; and
 - (iii) honesty;
 - (b) such person has not incurred any of the following disqualifications—
 - (i) the person, or any of its whole time directors or managing partners, has been convicted by a court for any offence involving moral turpitude or any economic offence or any offence against the securities laws;
 - (ii) an order for winding up has been passed against the person;
 - (iii) the person, or any of its whole time directors or managing partners, has been declared insolvent and has not been discharged;
 - (iv) an order, restraining, prohibiting or debarring the person, or any of its whole time directors or managing partners, from dealing in securities or from accessing the securities market, has been passed by the Board or any other regulatory authority, and a period of three years from the date of the expiry of the period specified in the order has not elapsed;
 - (v) any other order against the person, or any of its whole time directors or managing partners, which has a bearing on the securities market, has been passed by the Board or any other regulatory authority, and a period of three years from the date of the order has not elapsed;
 - (vi) the person has been found to be of unsound mind by a court of competent jurisdiction and the finding is in force; and
 - (vii) the person is financially not sound.
- (2) If any question arises as to whether a person is a fit and proper person, the Board's decision on such question shall be final.

Sign here : (13) 

MUTUAL FUND FACILITY

To, Date : _____
CAPITAL WIZARD STOCK BROKING PVT. LTD.

8/200, Sector-3, Rajendra Nagar, Sahibabad, Ghaziabad, U.P.-201005

Sub: Mutual Fund Service System (MFSS) Facility/ BSE STAR Mutual Fund Facility & other MF approved platform.

Sir, I/We _____ am/are registered as your client with Client Code No. _____ for the purpose of trading in the Capital Market segment and/or Derivatives segment. I/We am/are interested in availing the trading facility of the Exchanges for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the MFSS and/or BSE STAR MF and/or other MF. For the purpose of availing these facilities, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of this facility 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 NSE Circular dated November 24, 2009, BSE circular dated December 2, 2009 and as may be specified by the Exchanges 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 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 agree and authorize you to issue payment on my behalf by debiting my account with the value of my/our transactions along with charges.

I/we therefore request you to register me/us as your client for participating in mutual fund trading facility of exchanges

Details of terms & conditions for the Investor / Client for using MFSS facility BSE STAR MF & other MF Platform

- | | |
|---|--|
| <p>I. Pre-requisites for becoming Investor / Client for the MFSS facility/ BSE STAR MF /other MF platform.</p> <p>I.1. The client who is desirous of investing in units of mutual fund schemes through the MFSS / BSE STAR /other MF platform.</p> <p>I.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 MFSS / BSE STAR /other MF platform</p> <p>I.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 transacting through the MFI.</p> <p>I.4. The Client has approached to the MFI with the application for availing the MFSS facility/BSE STAR/other MF platform</p> <p>I.5. The client has submitted relevant KYC (Know Your Client) details to the MFIs</p> <p>2. Terms and Conditions</p> <p>2.1. The client shall be bound by circulars/ notices issued by NSEIL/BSE from time to time including the Circulars issued by NSEIL/BSE and rules, regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.</p> <p>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 MFSS / BSE STAR/other MF platform or at any time thereafter.</p> <p>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</p> | <p>2.4 The client has read and understood the risks involved in investing in Mutual Fund Schemes.</p> <p>2.5. The client shall be wholly responsible for all his investment decisions and instruction.</p> <p>2.6. The client shall ensure continuous compliance with the requirements of the Exchanges, SEBI and AMFI.</p> <p>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.</p> <p>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.</p> <p>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 NSEIL/BSE or NSCCL/ Indian Clearing Corporation Ltd. (ICCL), other exchanges/Clearing Corporation.</p> <p>2.10. In case of any dispute between the MFIs and the investors arising out of the MFSS facility/ BSE STAR/other MF platform, exchanges and / or NSCCL/ICCL agrees to extend the necessary support for the speedy redressal of the disputes.</p> |
|---|--|

Sign here : (14) 

Client Name _____

TERMS & CONDITIONS - ONLINE MUTUAL FUNDS

For Online Investing in Mutual Funds, the below mentioned terms and conditions are in addition to and binding on the existing Power of Attorney Executed by you

Definitions:

“Unit” shall mean the interest of an investor, which consists of one undivided share in the Net Assets of the Scheme.

“Net Asset Value (NAV)” of the Units of the Scheme will be computed by dividing the net assets of the Scheme by the number of Units outstanding on the valuation date.

“Purchase” shall mean subscription to the units of the various schemes of the Mutual Fund.

“Redemption” shall mean sale of the units of the various schemes of the Mutual Fund.

“Switch” shall mean an option to the investor to shift his existing investment in any of the schemes of the Mutual Fund to another scheme of the Mutual Fund.

“Systematic Investment Plan (SIP) or “Automatic Investment Plan (AIP)” “or” shall mean an option available to the investor for investing in a specified frequency of months in a specified scheme of the Mutual Fund for a constant sum of investment. “Systematic Withdrawal Plan (SWP) or “Automatic Withdrawal Plan (AWP)” “or” shall mean a facility provided to the investor to withdraw a predetermined amount in a specified frequency of months from a specified scheme of the Mutual Fund.


1. Load shall mean a charge, which the Asset Management Company (AMC) may collect on entry and/or exit from a scheme.
2. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the Mutual fund /Globe Capital Market Limited responsible in anyway.
3. The units of the schemes shall be allotted, redeemed or switched, as the case may be, at the Net Asset Value (NAV) prevalent on the date of the application, if the application for purchase, redemption or switch is received by the Fund before the cut-off time as specified on the website and consistent with the terms of the Scheme. Capital Wizard Stock Broking Pvt. Ltd., shall take all necessary action to ensure that the NAV allotted is the NAV applicable on the date of the transaction. However Capital Wizard Stock Broking Pvt. Ltd., shall not be liable for any loss that may arise to the client as a result of the correct NAV not being allotted to the client's transactions on the website.
4. Any request falling due on a holiday would be processed on the next business day and respective NAV would be applicable as per the Mutual Fund's offer document.
5. In case of an NFO the units shall be allotted upon completion of allotment process. The NFO is open only for the period specified by the Mutual Fund. After the end of the NFO period, any forms submitted by the client shall be liable for being rejected by the chosen Mutual Fund and transfer of funds if any made by the client for the said transaction shall be at the sole risk and liability of the client.
6. In the case of Automatic Investment Plan, in the absence of sufficient allocated funds, unallocated funds to the extent available shall also be utilized. In the absence of sufficient funds, both allocated and unallocated, no investment shall be made for that particular period.
7. For change of address or any personal details of the client, the client shall send a letter or fax to Capital Wizard Stock Broking Pvt. Ltd., signed by all the co-holders.
8. Investors are advised to read the risk factors carefully before taking an investment decision. Offer document(s) / abridged offer document(s) are available with Mutual Fund Asset Management Companies. For taking an investment decision, investors must rely on their own examination of the issuer and offer, including risk involved.
9. Capital Wizard Stock Broking Pvt. Ltd., does not accept any liability for delay in processing time at the Mutual Fund's or Registrar's end.

10. It is explicitly stated herein that the Mutual Fund, schemes offered online, have not been recommended by Capital Wizard Stock Broking Pvt. Ltd., nor have been sponsored by Capital Wizard Stock Broking Pvt. Ltd., or its affiliates or its sponsors.
11. Neither Capital Wizard Stock Broking Pvt. Ltd., nor any of the Mutual Funds shall be liable for any failure to perform its obligations, to the extent that such performance has been delayed, hindered or prevented by systems failures, network errors, delay or loss of data due to the above and in circumstances of acts of God, floods, epidemics, quarantine, riot or civil commotion and war:
12. Capital Wizard Stock Broking Pvt. Ltd., shall provide its services on a best effort basis. However Capital Wizard Stock Broking Pvt. Ltd., shall not be liable for failure of the system or for any loss, damage or other costs arising in anyway out of:
 - a) System failure including failure of ancillary or associated systems, or fluctuation of power, or other environmental conditions; or
 - b) Accident, transportation, neglect, misuse, errors, frauds of the clients or agents or any third party; or
 - c) Any fault in any attachments or associated equipment of the clients; or
 - d) Any incidental, special or consequential damages including without limitation of loss of profit.

The client further agrees to indemnify Capital Wizard Stock Broking Pvt. Ltd., for any loss that may arise as a result of system failure, accident or any of the reasons mentioned above.

13. For all correspondences with Capital Wizard Stock Broking Pvt. Ltd., the client shall quote his e-broking account no.
14. I/We hereby agree/s to indemnify both the Mutual Fund and Capital Wizard Stock Broking Pvt. Ltd. and its employees for any loss arising as a result of any loss of data, unauthorized transaction / error during the financial transaction thereof.
15. I/we am/are aware that in order to comply with regulatory provisions under the Prevention of Money Laundering Act 2002, Rules issued there under and related guidelines/circulars issued by SEBI, KYC formalities are required to be completed for all Unit Holders, including Guardians and Power of Attorney holders, for any investment (whether new or additional purchase) of Rs. 50,000 or more in mutual funds. For the convenience of investors in mutual funds, all mutual funds have made special arrangements with CDSL Ventures Ltd. (CVL), a wholly owned subsidiary of Central Depository Services (India) Ltd. (CDSL). I/We hereby agree to indemnify the Mutual Fund/Capital Wizard Stock Broking Pvt. Ltd. /Registrar and its employees for any rejection/loss arising as a result of not completing KYC registration during the financial transaction thereof.
16. Upfront commission shall be paid directly by the investor to the AMFI registered Distributor based on the investors' assessment of various factors including the service rendered by the distributor.
17. The Distributor has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

“The Terms and Conditions set hereinabove may be modified by Capital Wizard Stock Broking Pvt. Ltd., without any prior notice to the client and the client's continued usage of the services shall be deemed to be an acceptance of the modified terms.” I/we have gone through the offer document/key information memorandum before deciding to make this investment in the mutual fund scheme.

Sign here : (15) 

Client Name _____

D. BANK MANDATE AUTHORIZATION

To
CAPITAL WIZARD STOCK BROKING PVT. LTD.
8/200, Sector-3, Rajendra Nagar,
Sahibabad, Ghaziabad, U.P.-201005

Dated : _____

Sub: Mutual Fund Service System (MFSS) facility/ BSE STAR MF and other MF approved platform

Dear Sir/Madam,

This is with reference to my/our request for availing Mutual Fund Services (MFSS) facility/BSE STAR MF and other MF approved platform as a client offered by NSE and BSE, I /we hereby undertake to provide funds to Capital Wizard Stock Broking Pvt. Ltd. (herein referred to as "Capital") equivalent to the subscription amount and applicable brokerage/fees /charges before applying for mutual fund units through the "Capital".


in its capacity as a Stock Broker and transfer funds to the extent of any shortfall towards subscription amount and / or applicable brokerage, fees, charges and other statutory levies (in case of both subscription and redemption) and/or any other obligation to meet the debit in my/our Mutual fund transaction account.

For this purpose, I/We hereby authorize "Capital" to utilize the surplus funds in my /our trading account held with "Capital" I further authorize "Capital" to process One Time Mandate Form duly executed by me in favour "Capital"/BSE and to honour the obligations that arises as a result of transactions undertaken by me/us and also debit my account for any other incidental charges including Account Maintenance Charges (AMC), applicable brokerages, fees, other statutory charges etc.

I / We hereby authorize "Capital", to execute an order in my/our account held with "Capital" for any transaction in Mutual Fund Unit which may include purchase/redemption/switch/SIP etc. on my/our instructions provided by me/us either electronically or in writing, verbally/telephonically. I hereby agree and understand that the said instructions shall be valid and binding upon me/us.

Client Name : _____

Client Code : _____

Sign here : (16) 

TERMS & CONDITIONS - BANK MANDATE

A. Bank Mandate in favour of BSE

Pursuant to agreed by me/us to invest in units of mutual funds schemes through the MFSS/BSE StAR MF/other MF platform on terms and condition mentioned therein, I further understand and acknowledge that:-

1. Bank Mandate shall be in favor of 'BSE Limited'. (Hereinafter 'BSE')
2. My/Our name MUST match with the name registered with CAPITAL as per the UCC.
3. The Bank details in the Bank Mandate MUST match with registered bank details in my/our Trading Account.
4. The Transaction value and brokerage charges, if any, shall be debited from my/our bank account.
5. BSE reserves the right to register bank mandate in any available modes (ACH & ECS etc.).
6. Mandate registration may take 30 working days to get registered from the date of submission of Mandate at CAPITAL's office subject to Bank Confirmation.
7. My/Our bank may charge for activating any such services from my/our account. Neither CAPITAL nor its service provider shall be held responsible or bear any such charges.
8. I/We shall ensure sufficient balance in my/our bank account for successful processing of Transactions.
9. Mandate format is subject to change as per the guidelines received from BSE or RBI/Bank or other concerned governmental or statutory authorities. On receiving any such intimation from RBI or Bank or any other concerned party, CAPITAL or its service provider may change the Mandate without prior notice to me/us & Transactions may be rejected by CAPITAL or its service provider or my/our Bank due to any such change. Neither CAPITAL nor its service provider shall be held responsible for any such rejections.
10. Payment collection shall be done by BSE for any SIP which is registered on the Mandate registered with BSE.
11. If the installment amount is not received by BSE on or before SIP installment date, SIP Installment will be cancelled by BSE.
12. For cancelled installment, collected amount shall be refunded to my/our registered bank account.
13. CAPITAL reserves its rights to change the terms and conditions from time to time.
14. Any dispute shall be subject to jurisdiction of Courts at Delhi only.

B. Bank Mandate in favour Capital Wizard Stock Broking Pvt. Ltd.

Pursuant to agreed by me/us to invest in units of mutual funds schemes through the MFSS/BSE StAR MF/other MF platform on terms and condition mentioned therein, I further understand and acknowledge that:-

1. Bank Mandate shall be in favor of 'Capital Wizard Stock Broking Pvt. Ltd.'. (Hereinafter 'CAPITAL')
2. The Bank details in the Bank Mandate MUST match with bank details in my/our Trading Account.
3. My/our 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. CAPITAL reserves the right to register bank mandate in any available modes (Auto Debit, ACH, ECS etc.).
5. Bank Mandate may take 30 days to get registered from the date of submission of Mandate at CAPITAL's office (subject to Bank confirmation).
6. My/Our bank may charge from my/our account for activating any such services. Neither CAPITAL nor its service provider shall be held responsible or bear any such charges.
7. Mandate format is subject to change as per the guidelines received from RBI/Bank or other concerned governmental or statutory authorities. On receiving any such intimation from RBI or Bank, CAPITAL or its service provider may change the Mandate without prior notice to the me/our & Transactions may be rejected by CAPITAL or its service provider or my/our Bank due to any such change. Neither CAPITAL nor its service provider shall be held responsible for any such rejections.

8. The mandate authorizes CAPITAL to recover any debit balance in my/our Depository Participant and/or Trading account of any segment in any of the Stock Exchange(s).
9. This mandate further authorizes CAPITAL to collect the dues, if any, arises due to purchase of mutual funds or SIP by me/us.
10. This mandate covers my/our all the fund obligations including pay-in and other charges etc in respect of my/our transactions and on account of any default thereon.

C. SIP SPECIFIC TERMS & CONDITIONS

1. The SIP will be registered pursuant to the details given in the TIS (Transaction Instruction Slip) & incomplete TIS or incorrect information may be subject to rejection by CAPITAL.
2. CAPITAL will check the correctness of TIS & other documents submitted before registration of my/our SIP(s).
3. I/We shall all the time abide by these Terms and Conditions while submitting the Transaction Instruction Slip to CAPITAL.
4. Amount debited from my/our bank account for SIP transaction(s) shall include Brokerage charges, if any.
5. I/We can register for SIP in the schemes which are available on Exchange(s) and offered by CAPITAL.
6. SIP shall commence only after successful registration of the Mandate.
7. SIP shall commence after 40 days from the date of submission of TIS and Bank Mandate at CAPITAL's office as per the SIP start date selected.
8. In case, where Bank Mandate is already registered and I/We desire to start additional SIP against the existing Mandate Limit, SIP start date may take 10 to 15 working days from the date of submission of TIS at CAPITAL's office as per the SIP Start Date selected (applicable in case an open mandate is given).
9. Depending upon the my/our location, my/our bank branch, my/our Bank Account shall be debited between 3 to 5 days prior or on SIP transaction date on Exchange(s). e.g: if the SIP transaction date is 15th of every month, my/our bank account may get debited between 10th to 12th date or maximum by 15th.
10. Maximum Upper Limit: Cumulative amount on a particular date shall not exceed the upper limit mentioned on the Bank Mandate. e.g: if the upper limit mentioned on the bank mandate is 10,000 & investor has registered 3 SIPs of 5000/- each on 1st, 15th & 28th of every month, all the SIPs will be successfully registered. But a single SIP of 11000/- on a same date will not be registered.
11. If the Transaction(s) are delayed / not processed due to any reason including delay / non realization of the funds to CAPITAL from my/our bank account, in no circumstances, CAPITAL owes responsibility to me/us or any third party, whatsoever.
12. If the transaction(s) are delayed / not processed due to any reason on the SIP due date, no back dated NAV will be given in any circumstances whatsoever.
13. In case of my/our SIP fund is realised in CAPITAL account after SIP due date, my/our SIP transaction will be cancelled by CAPITAL and such transaction shall be processed as "Purchase" on the date of realisation of the funds. If for any reason, "Purchase" transaction could not be processed, the funds will be refunded to my/our bank account.
14. Payment collection shall be done by BSE for any SIP which is registered on the Mandate registered with BSE.
15. If the installment amount is not received by BSE on or before SIP installment date, SIP Installment will be cancelled by BSE.
16. For cancelled installment, collected amount shall be refunded to my/our registered bank account.
17. CAPITAL reserves rights to change the terms and conditions from time to time.
18. Any dispute shall be subject to jurisdiction of Courts at Delhi only.

Sign here : (17) 

Client Name _____

ANNEXURE - A

TERMS AND CONDITIONS-CUM-REGISTRATION / MODIFICATION FORM FOR RECEIVING SMS ALERTS FROM CDSL

Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
2. 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. 'BO' means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make

best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.

5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
6. The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.

Fees:

Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warrant the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository gives no warranty with respect to the quality of the service provided by the service provider. The Depository will not be liable for any unauthorized use or access to the information and/ or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by any third person.

Liability and Indemnity:

The Depository 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 providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository 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.

Amendments:

The depository 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.

Governing Law and Jurisdiction:

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in Mumbai.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below.

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 purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.

I/We have read and understood the terms and conditions mentioned above 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.

I / We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the BOs would be required to take up the matter with their DP.

I/We am/ are aware that mere acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service I/We provide the following information for the purpose of **Registration / modification** (Please cancel out what is not applicable).

BOID

1	2	0	7	4	0	0	0												
---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--

(Please write your 8 digit DPID)

(Please write your 8 digit Client ID)

Sole / First Holder's Name : _____ Second Holder's Name _____ Third Holder's Name _____

Mobile Number on which message are to be sent

+91																			
-----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

The mobile number is registered in the name of : _____

Email ID : _____

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

Signatures (18) _____
Sole/First Holder Signature

(4) _____
Second Holder Signature

(4) _____
Third Holder Signature

Place : _____

Date : ____/____/20____

ANNEXURE - B

TERMS AND CONDITIONS FOR AVAILING TRANSACTION USING SECURED TEXTING (TRUST) SERVICE OFFERED BY CDSL

1. Definitions:
In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:
 - i. "Depository" means Central Depository Services (India) Limited (CDSL)
 - ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.
 - iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
 - iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
 - v. "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time. Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository
3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depository shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure of the service provider or network.
4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
6. The BO shall be responsible for submitting response to the 'Responsive SMS' within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for deregistration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.
9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP.
10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.
11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP
13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.
17. Indemnity:
In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.
18. Disclaimer:
Depository shall be absolved of any liability in case :-
 - a. There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
 - b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such service provider.
 - c. There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.

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.

- a. SMART - SMS alert facility
- b. TRUST - Transaction using Secured Texting facility.

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

BOID	1	2	0	7	4	0	0	0																				
	(Please write your 8 digit DPID)								(Please write your 8 digit Client ID)																			

Sole / First Holder's Name : _____ Second Holder's Name _____ Third Holder's Name _____

Mobile Number on which message 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 communications; 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 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.

Signatures (19)	(5)	(5)
_____ Sole/First Holder Signature	_____ Second Holder Signature	_____ Third Holder Signature

Place : _____ Date : _____/_____/20____

FATCA & CRS DECLARATION (FOR INDIVIDUAL)

Do you have any non-indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency? Yes No

Sole/First Holder/Guardian <input type="checkbox"/> Yes <input type="checkbox"/> No		Second Holder <input type="checkbox"/> Yes <input type="checkbox"/> No		Third Holder <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Birth		Country of Birth		Country of Birth	
Country of Citizenship/ Nationality		Country of Citizenship/ Nationality		Country of Citizenship/ Nationality	
Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id	Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id	Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id
Country of Tax Residency* (Other then India)	Taxpayer Identification No.	Country of Tax Residency* (Other then India)	Taxpayer Identification No.	Country of Tax Residency* (Other then India)	Taxpayer Identification No.
1.		1.		1.	
2.		2.		2.	
Address		Address		Address	

*Please indicate all countries in which you are a resident for tax purpose and associated Taxpayer identification number.


FATCA - CRS Terms and Conditions

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Capital Wizard Stock Broking Pvt. Ltd. for any modification to this information promptly.

I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).

Signatures (20) 
Sole/First Holder Signature

(6) 
Second Holder Signature

(6) 
Third Holder Signature

*For detail terms & conditions please see Client Copy

FATCA & CRS DECLARATION (FOR NON-INDIVIDUAL)

Please tick the applicable tax resident declaration -

I. 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.)

Sr. No.	Country	Tax Identification Number	Identification Type (TIN or Other*, please specify)
1.			
2.			
3.			

*In case Tax Identification Number is not available, kindly provide its functional equivalent.

In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here

PART A (to be filled by Financial Institutions or Direct Reporting NFEs)	
1. We are a, Financial institution <input type="checkbox"/> (Refer 1 of Part C) or Direct reporting NFE <input type="checkbox"/> (Refer 3(vii) of Part C) (please tick as appropriate)	GIIN <input type="text"/> Note: 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 Name of sponsoring entity _____ _____
GIIN not available (please tick as applicable)	<input type="checkbox"/> Applied for <input type="checkbox"/> Not obtained – Non-participating FI <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <input type="text"/> (Refer 1 A of Part C)

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 (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)	Yes <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 of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)	Yes <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company _____ Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company Name of stock exchange _____
3. Is the Entity an active NFE (Refer 2c of Part C)	Yes <input type="checkbox"/> Nature of Business _____ Please specify the sub-category of Active NFE <input type="text"/> (Mention code – refer 2c of Part C)
4. Is the Entity a passive NFE (Refer 3(ii) of Part C)	Yes <input type="checkbox"/> Nature of Business _____

UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)			
Category (Please tick applicable category): <input type="checkbox"/> Unlisted Company <input type="checkbox"/> Partnership Firm <input type="checkbox"/> Limited Liability Partnership Company <input type="checkbox"/> Unincorporated association / body of individuals <input type="checkbox"/> Public Charitable Trust <input type="checkbox"/> Religious Trust <input type="checkbox"/> Private Trust <input type="checkbox"/> 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). (Please attach additional sheets if necessary) Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)			
Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3(iv) (A) of Part C)			
Country of Tax residency*			
PAN #			
Address	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____

Address Type	<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
Tax ID [¶]			
Tax ID Type			
City of Birth			
Country of birth			
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____
Nationality			
Father's Name			
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
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Holding (%) [§]			

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

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

^{¶¶} In case Tax Identification Number is not available, kindly provide functional equivalent

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

DECLARATION

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform For Capital Wizard Stock Broking Pvt. Ltd. for any modification to this information promptly.

I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).

Name _____

Designation _____

(21)  _____
Sole/First Authorised Signatory

(7)  _____
Second Authorised Signatory

(7)  _____
Third Authorised Signatory

Place _____

Date ___/___/_____

*For detail terms & conditions please see Client Copy

DECLARATION BY KARTA & ALL THE CO-PARCENERS (for HUF only)

To
CAPITAL WIZARD STOCK BROKING PVT. LTD.
8/200, Sector-3, Rajendra Nagar,
Sahibabad, Ghaziabad, U.P.-201005

Dated : _____

Dear Sir/Madam,

1. Whereas the Hindu Undivided Family of.....is carrying on business in the firm name and style of at or we intent to deal have or desire to have Securities Trading Account with Capital Wizard Stock Broking Pvt. Ltd. (hereinafter referred as Member). We undersigned, hereby confirm and declare that we are the present adult co-parceners of the said joint family; that Mr./Mrs..... is the present Karta of the said joint family.
2. We confirm that affairs of HUF firm are carried on mainly by the Karta Mr/ Mrs. on behalf and in the interest and for the benefits of all the co-parceners. We hereby authorize the Karta on behalf of the HUF to deal with the member and the said trading member is hereby authorized to honor all instructions oral or written, given by him on behalf of the HUF. He is authorized to sell, purchase, transfer, endorse, negotiate documents and/or otherwise deal through the member on behalf of the HUF.
He is also authorize to sign execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may be deemed necessary or expedient to open account and give effect to this purpose. We are, however, jointly and severally responsible for all liabilities of the said HUF firm shall be recoverable from the assets of any one or all of us and also from the estate of the said joint family including the interest thereon of every co-parceners of the said joint family, including the share of the minor co parceners, if any.
3. We undertake to advise the member in writing of any change that may occur in the Karta ship or in the constitution of the said joint family or of the said HUF firm and until receipt of such notice by the member who shall be binding on the said joint family and the said HUF firm and on our respective estates. We shall, however continue to be liable jointly and severally to the member for all dues obligations f the said HUF firm in the Member's book on the date of the receipt of such notice by the member and until all such dues and obligations shall have been liquidated and discharged.
4. The names and dates of the birth of all the present minor & major co-parceners of the said joint family are given below. We also undertake to inform you in writing as and when each of the said members attains the majority and is authorized to act on behalf of, and bind the said HUF firm.

List of Family Members

S. No.	Name of the Co-parceners (Including Minor also)	Relationship with Karta	PAN No.	Address (if other than Karta's address)	Date of Birth	Signature
1.						
2.						
3.						
4.						
5.						
6.						

Note : In case of adult family member provide copy of PAN card or any other ID proof (DL/Voter ID/ Passport). In case of Minor Family Member provide copy of age certificate (Birth Certificate/School Leaving Certificate).

Name of the HUF _____

Signature of Karta with Rubber Stamp

Date : _____ Place : _____