



**STEWART &
MACKERTICH**
LEGACY | TRUST | GROWTH

Account Opening Kit



Stewart & Mackertich Wealth Management Limited

Stock Broking ❖ Depository ❖ Portfolio Management ❖ Research

4, Lee Road (Satyajit Ray Dharani), Vaibhav, 5th Floor, Kolkata - 700 020

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Website : www.smifs.com | E-mail : investors@smifs.com



STEWART & MACKERTICH WEALTH MANAGEMENT LTD.

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MEMBERSHIP DETAILS

NAME OF EXCHANGE / DEPOSITORY	MARKET SEGMENT	SEBI REGISTRATION NO.	DATE
National Stock Exchange of India Limited	Capital Market	INB 230599932	27/05/1994
National Stock Exchange of India Limited	Derivative Market (Equity)	INF 230599932	12/03/2001
National Stock Exchange of India Limited	Derivative Market (Currency)	INE 230599932	04/03/2009
Bombay Stock Exchange Limited	Capital Market	INB 011207459	03/11/2000
Bombay Stock Exchange Limited	Derivative Market (Equity)	INF 010599935	05/10/2000
Central Depository Services (India) Limited	Depository Participant	IN-DP-24-2015	06/02/2015
National Securities Depository Limited	Depository Participant	IN-DP-24-2015	06/02/2015



STEWART & MACKERTICH WEALTH MANAGEMENT LTD.

REGISTERED & CORRESPONDENCE OFFICE	
ADDRESS	4, Lee Road, Vaibhav, 5 th Floor, Kolkata – 700 020
CONTACT NUMBERS	Tel. No.: (91 33) 3051 5400 Fax: 2289 3401
OFFICIAL WEB SITE	www.smifs.com

KEY OFFICIALS		
DESIGNATION OF OFFICIAL	DESIGNATED DIRECTOR	COMPLIANCE OFFICER
NAME OF OFFICIAL	SHRI RAJESH KUMAR KOCHAR	SHRI SUDIPTO DATTA
CONTACT TELEPHONE NUMBER	(91 33) 3051 5420	(91 33) 3051 5401
E-MAIL ID.	rajesh.kochar@smifs.com	sudipta@smifs.com

GRIEVANCE REDRESSAL
FOR ANY GRIEVANCE/DISPUTE PLEASE CONTACT:
STEWART & MACKERTICH WEALTH MANAGEMENT LIMITED
Investor Grievance Officer : Ms Nilanjana Mukherjee • 4, Lee Road, Vaibhav, 5Th Floor, Kolkata - 700 020 Tel. No.: (91 33) 3051 5401 Fax: 2289 3401 • E-mail - investors@smifs.com

IN CASE NOT SATISFIED WITH THE RESPONSE OF STEWART & MACKERTICH WEALTH MANAGEMENT LIMITED PLEASE CONTACT THE CONCERNED EXCHANGE(S)/DEPOSITORY AT:		
Name of Stock Exchange/Depository	Contact Telephone Nos.	Contact E-Mail ID
Bombay Stock Exchange Ltd.	(91 22) 2272 8517/8097	is@bseindia.com
National Stock Exchange of India Ltd.	(91 22) 2659 8190/91/18002660058	ignse@nse.co.in
Central Depository Services (India) Limited	1800-200-5533	complaints@cdslindia.com
National Securities Depository Limited	(91 22) 2499 4200	relations@nsdl.co.in

GRIEVANCE REDRESSAL THROUGH SECURITIES AND EXCHANGE BOARD OF INDIA (SEBI)		
Addresses Of Sebi Offices	Contact Person: Telephone Nos.	Contact E-Mail ID
Sebi – Head Office: Sebi Bhavan , Plot No. C4 – A, “G” Block, Bandra Kurla Complex, Bandra East, Mumbai – 400 051	Deputy General Manager (DGM) (91 22) 2644 9000/4045 9000	iggc@sebi.gov.in sebi@sebi.gov.in
SEBI – NORTHERN REGIONAL OFFICE: 5 TH FLOOR, BANK OF BARODA BUILDING, 16, SANSAD MARG, NEW DELHI – 110 001	Deputy General Manager (DGM) (91 11) 2372 4001 - 05	sebinro@sebi.gov.in
Sebi – Eastern Regional Office: I&T Chambers, 3 rd Floor 16, Camac Street, Kolkata – 700 016	Deputy General Manager (DGM) (91 33) 2302 3000	sebiero@sebi.gov.in
Sebi – Southern Regional Office: 3 rd Floor, D Monte Building, No. 32D Monte Colony, Ttk Road, Alwarpet Chennai – 600 018	Deputy General Manager (DGM) (91 44) 2467 4000/2467 4150	sebisro@sebi.gov.in
Sebi – Western Regional Office: unit No. 002, Ground Floor Sakar I, Near Gandhigram Railway Station, Opp. Nehru Bridge Ashram Road, Ahmedabad – 380 009	Deputy General Manager (DGM) (91 79) 2658 3633 - 35	sebiwro@sebi.gov.in

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

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual



Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only Application Type* New Update
(To be filled by financial institution) KYC Number _____ *(Mandatory for KYC update request)*
 Account Type* Normal Simplified (for low risk customers) Small

1. PERSONAL DETAILS (Please refer instruction **A** at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> <input type="text"/>)		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian		
	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin		
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector)	
	<input type="checkbox"/> O-Others (<input type="checkbox"/> Professional	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife <input type="checkbox"/> Student)
	<input type="checkbox"/> B-Business			
	<input type="checkbox"/> X- Not Categorized			

PHOTO

Signature / Thumb Impression

2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction **B** at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent (If issued by jurisdiction)* _____

Place / City of Birth* _____ ISO 3166 Country Code of Birth*

3. PROOF OF IDENTITY (PoI)* (Please refer instruction **C** at the end)

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

<input type="checkbox"/> A- Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>
<input type="checkbox"/> B- Voter ID Card	<input type="text"/>		
<input type="checkbox"/> C- PAN Card	<input type="text"/>		
<input type="checkbox"/> D- Driving Licence	<input type="text"/>	Driving Licence Expiry Date	<input type="text"/>
<input type="checkbox"/> E- UID (Aadhaar)	<input type="text"/>		
<input type="checkbox"/> F- NREGA Job Card	<input type="text"/>		
<input type="checkbox"/> Z- Others (any document notified by the central government)	<input type="text"/>	Identification Number	<input type="text"/>
<input type="checkbox"/> S- Simplified Measures Account - Document Type code	<input type="text"/>	Identification Number	<input type="text"/>

4. PROOF OF ADDRESS (PoA)*

4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction **D** at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Passport Driving Licence UID (Aadhaar)

Voter Identity Card NREGA Job Card Others _____ please specify _____

Simplified Measures Account - Document Type code

Address

Line 1* _____

Line 2 _____

Line 3 _____ City / Town / Village* _____

District* _____ Pin / Post Code* _____ State / U.T Code* _____ ISO 3166 Country Code* _____

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)

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

Line 1*

Line 2

Line 3 City / Town / Village*

State* ZIP / Post Code* ISO 3166 Country Code*

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)

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

FAX - Email ID

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

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

Related Person Type* Guardian of Minor Assignee Authorized Representative

Prefix First Name Middle Name Last Name

Name*

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

PROOF OF IDENTITY [Pol] OF RELATED PERSON* (Please see instruction (H) at the end)

A- Passport Number Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date

E- UID (Aadhaar)

F- NREGA Job Card

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

S- Simplified Measures Account - Document Type code Identification Number

7. REMARKS (If any)

8. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : - - Place :

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

KYC VERIFICATION CARRIED OUT BY

Date

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

INSTITUTION DETAILS

Name

Code

[Institution Stamp]

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

General Instructions:

- 1 Fields marked with “*” are mandatory fields.
- 2 Tick ‘✓’ wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- 6 Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of ‘Small Account type’ only personal details at section number 1 and 2, photograph, signature and self-certification required.

A Clarification / Guidelines on filling ‘Personal Details’ section

- 1 **Name:** Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either **father’s name or spouse’s** name is to be mandatorily furnished. In case PAN is not available father’s name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

- 1 **Tax identification Number (TIN):** TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a “Functional equivalent”), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

C Clarification / Guidelines on filling ‘Proof of Identity [PoI]’ section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if ‘Z- Others (any document notified by the central government)’ is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code	Description
01	Identity card with applicant’s photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
02	Letter issued by a gazetted officer, with a duly attested photograph of the person.

D Clarification / Guidelines on filling ‘Proof of Address [PoA] - Current / Permanent / Overseas Address details’ section

- 1 PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3 In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal Tax receipt.
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

E Clarification / Guidelines on filling ‘Proof of Address [PoA] - Correspondence / Local Address details’ section

- 1 To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2 In case of multiple correspondence / local addresses, Please fill ‘**Annexure A1**’

F Clarification / Guidelines on filling ‘Contact details’ section

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

G Clarification / Guidelines on filling ‘Related Person details’ section

- 1 Provide KYC number of related person if available.

H Clarification / Guidelines on filling ‘Related Person details – Proof of Identity [PoI] of Related Person’ section

- 1 Mention identification / reference number if ‘Z- Others (any document notified by the central government)’ is ticked.

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

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

List of ISO 3166 two- digit Country Code

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

Annexure A1

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual | Correspondence / Local Address

Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.



For office use only Application Type* New Update
(To be filled by financial institution) KYC Number (Mandatory for KYC update request)

1. CORRESPONDENCE / LOCAL ADDRESS DETAILS (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

2. CONTACT DETAILS (All communications will be sent on provided Mobile no./ Email-ID) (Please refer instruction F at the end)

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

FAX - Email ID

3. APPLICANT DECLARATION

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

Date : - - Place :

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

Annexure B1

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual | Related Person

Important Instructions:

- A) Fields marked with '**' are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike of the sections not required to be updated.



For office use only Application Type* New Update
 (To be filled by financial institution) KYC Number (Mandatory for KYC update request)

1. DETAILS OF RELATED PERSON (Please refer instruction G at the end)

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

Related Person Type* Guardian of Minor Assignee Authorized Representative

Name* Prefix First Name Middle Name Last Name

(If KYC number and name are provided, below details of section 1 are optional)

PROOF OF IDENTITY (PoI) OF RELATED PERSON* (Please see instruction (H) at the end)

A- Passport Number Passport Expiry Date - -

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date - -

E- UID (Aadhaar)

F- NREGA Job Card

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

S- Simplified Measures Account - Document Type code Identification Number

2. APPLICANT DECLARATION

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

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

Date : - - Place :

3. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date <input type="text"/> - <input type="text"/> - <input type="text"/>	Name <input type="text"/>
Emp. Name <input type="text"/>	Code <input type="text"/>
Emp. Code <input type="text"/>	<div style="border: 1px solid black; height: 100px; width: 100%; text-align: center;">[Institution Stamp]</div>
Emp. Designation <input type="text"/>	
Emp. Branch <input type="text"/>	
<div style="border: 1px solid black; height: 40px; width: 100%; text-align: center;">[Employee Signature]</div>	



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 NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/ Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

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

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

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

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

Maintenance bill/Insurance Copy.

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

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

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. SIP of Mutual Funds upto Rs 50,000/- p.a.
4. 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.
5. UN entities/multilateral agencies exempt from paying taxes/ filing tax returns in India.

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.

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 (FII)	<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

INSTRUCTIONS/ CHECK LIST

1. Additional documents in case of trading in derivatives segments - illustrative list:

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

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

2. Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.
3. Demat master or recent holding statement issued by DP bearing name of the client.
4. For individuals: (A) Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office. (B) In case of non-resident clients, employees at the stock broker's local office, overseas can do in-person' verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
5. For non-individuals: (A) Form need to be initialized by all the authorized signatories. (B) Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.

KNOW YOUR CLIENT (KYC) Application Form - For Non Individuals

NEW CHANGE REQUEST (Please tick ✓ the appropriate) **Acknowledgement No.**

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**
 (Please tick ✓ the box on left margin of appropriate row where **CHANGE/CORRECTION** is required and provide the details in the corresponding now)

A IDENTITY DETAILS

1. Name of the Applicant

2a. Date of Incorporation / / 2b. Place of Incorporation

3. Date of commencement of business / /

4a. PAN

4b. Registration No. (e.g. CIN)

5. Status (Please tick ✓ the appropriate)

<input type="checkbox"/> Private Limited Co.	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> Charities	<input type="checkbox"/> NGO's	<input type="checkbox"/> FI	<input type="checkbox"/> FII	<input type="checkbox"/> HUF
<input type="checkbox"/> AOP	<input type="checkbox"/> Bank	<input type="checkbox"/> Government Body	<input type="checkbox"/> Non-Government Organization	<input type="checkbox"/> Defense Establishment
<input type="checkbox"/> BOI	<input type="checkbox"/> Society	<input type="checkbox"/> LLP	<input type="checkbox"/> FPI - Category I	<input type="checkbox"/> FPI - Category II
<input type="checkbox"/> FPI - Category III	<input type="checkbox"/> Others (Please specify) _____			

B ADDRESS DETAILS

1. Address for Correspondence

City / Town Village Pin Code
 State Country

2. Specify the Proof of Address submitted for Correspondence Address: _____

3. Contact Details

Tel. (Off.) <input type="text"/>	Fax <input type="text"/>
Tel. (Res.) <input type="text"/>	Mobile No. <input type="text"/>
E-Mail Id <input type="text"/>	

4. Registered Address (If different from above)

City / Town Village Pin Code
 State Country

C OTHER DETAILS (If space is insufficient, enclose these details separately (Illustrative format enclosed))

1. Name, PAN, residential address and photographs of Promoters/Partners/Karta/Trustees and whole time directors:

2. DIN of whole time directors :

2b. Aadhar number of Promoters/Partners/Karta :

D DECLARATION

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

Date: / /

Signature
Name & Signature of the Authorised Signatory

FOR OFFICE USE ONLY

In Person Verification (IPV) Details:

Name of the person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of the Organizaon: _____

Date of IPV: / /

Signature of the person who has done the IPV _____ Seal/Stamp of the Intermediary

Originals Verified and Self Attested Document copies received

Date _____ Signature of the Authorised Signatory _____

KNOW YOUR CLIENT (KYC) APPLICATION FORM - FOR NON INDIVIDUALS
(Please fill this form in ENGLISH and in BLOCK LETTERS)

A. IDENTITY DETAILS

- Name of the Applicant _____
- Date of Incorporation

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Place of Incorporation _____
- Date of commencement of business :

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---
- a. PAN _____ b. Registration No. (e.g. CIN) : _____
- Status (please tick any one) : Private Ltd. Co. Public Ltd. Co. Body Corporate Partnership Trust Charities
 NGO's FI FII HUF AOP Bank Govt. Body
 Non-Government Organization Defense Establishment BOI Society LLP
 Others (please specify) _____

B. ADDRESS DETAILS

Address for correspondence	Registered Address (if different from correspondence address)
-----------------------------------	---

- Contact Details : Tel (Off.) _____ Tel. (Res.) _____ Fax : _____
Mobile No. : _____ Email-Id _____
- Specify the proof of address submitted for correspondence address : _____
- Specify the proof of address submitted for registered address : _____

C. OTHER DETAILS :

- Gross Annual Income Details (please specify) :
Income Range per annum : Below Rs. 1 Lakh Between Rs. 1 to Rs. 5 Lakhs
 Between Rs. 5 to Rs. 10 Lakhs Between Rs. 10 to Rs. 25 Lakhs
 Between Rs. 25 Lakhs to Rs. 1 Crore Above Rs. 1 Crore
- Net-worth as on (Net worth should not be older than 1 year) Rs. _____
- Name, PAN, residential address and photographs of Promoters / Partners / Karta / Trustees and wholetime directors : _____
- DIN / UID of Promoters / Partners / Karta and whole time Directors _____
- Please tick, if applicable, for any of your authorized signatories / Promoters / Partners / Karta / Trustees / whole time Directors :
 Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)
- Any other information : _____

DECLARATION :

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above mentioned 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.

Signature _____

Name & Signature of the Authroised Signatory _____

Date : _____

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

FOR OFFICE USE ONLY

- (Self-Attested) Self Certified Document copies received True Copies of documents received (Original verified)

IPV Details	Signature	In person verification done by	Details/Designation	Date

Signature of the Authroised Signatory _____

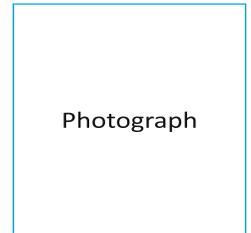
Seal/Stamp of the intermediary _____

Date :

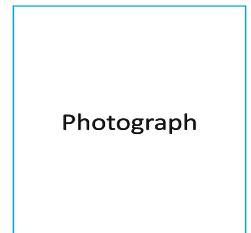
d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

DETAILS OF PROMOTERS / PARTNERS / KARTA / TRUSTEES / WHOLE TIME DIRECTORS

Name	
Designation	
DIN	
UID	
PEP/Related to a PEP	
PAN	
Residential Address	
Tel / Mobile No.	



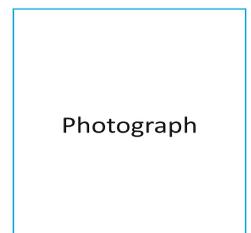
Name	
Designation	
DIN	
UID	
PEP/Related to a PEP	
PAN	
Residential Address	
Tel / Mobile No.	



Name	
Designation	
DIN	
UID	
PEP/Related to a PEP	
PAN	
Residential Address	
Tel / Mobile No.	



Name	
Designation	
DIN	
UID	
PEP/Related to a PEP	
PAN	
Residential Address	
Tel / Mobile No.	





TRADING AND DEMAT ACCOUNT RELATED DETAILS

FOR INDIVIDUALS & NON-INDIVIDUALS

Please fill in English and in BLOCK Letters: Application Form No:

DETAILS TO BE FILLED BY STEWART & MACKERTICH:

DATE:		CLIENT NAME:	
UNIQUE CLIENT CODE (UCC):		DP INTERNAL REFERENCE NO.	
DP ID:	12016000	BO ID:	
DP ID:		DP ID:	IN301629
BO ID:		BO ID:	

TYPE OF ACCOUNT (STATUS & SUB – STATUS):

<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> INDIVIDUAL RESIDENT <input type="checkbox"/> INDIVIDUAL MARGIN <input type="checkbox"/> INDIVIDUAL HUF/AOP <input type="checkbox"/> INDIVIDUAL DIRECTOR'S TRADING A/C(MANTRA) <input type="checkbox"/> MINOR RELATIVE <input type="checkbox"/> INDIVIDUAL DIRECTOR <input type="checkbox"/> OTHER (SPECIFY) _____ <input type="checkbox"/> INDIVIDUAL PROMOTER
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI REPARTIABLE <input type="checkbox"/> NRI DEPOSITORY RECEIPTS <input type="checkbox"/> NRI REPARTIABLE PROMOTER <input type="checkbox"/> NRI NON-REPARTIABLE <input type="checkbox"/> NRI NON-REPARTIABLE PROMOTER <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) _____

A. BANK ACCOUNT(S) DETAILS [PRIMARY]

Bank Name	Branch address	Bank Account Number(s)	Account Type:	MICR Number	IFSC code

BANK ACCOUNT(S) DETAILS [ADDITIONAL]

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

- ❖ Mention - Saving/Current/ Others-In case of NRI/NRE/NRO for Account Type
- ❖ For Multiple Bank Account Details use Separate Sheets

B. DEPOSITORY ACCOUNT(S) DETAILS (IN CASE OTHER DP)

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

- ❖ For Multiple Demat Account Details use Separate Sheets

C. TRADING PREFERENCES				
EXCHANGE	SEGMENTS			
NSE	Cash	Signature	Currency Derv	Signature
	Equity Derv	Signature	MFSS	Signature
	SLBS	Signature	IRF Derv	Signature
BSE	Cash	Signature		
	Equity Derv	Signature		
		Signature		
❖ Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client ❖ 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. PAST ACTIONS				
Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years				
E. DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS				
IF CLIENT IS DEALING THROUGH THE SUB-BROKER, PROVIDE THE FOLLOWING DETAILS:				
Sub-Broker's Name:			SEBI Registration Number:	
Registered Office Address:				
Phone:		Fax:		Website:
WHETHER DEALING WITH ANY OTHER STOCK BROKER/SUB-BROKER (IN CASE DEALING WITH MULTIPLE STOCK BROKERS/SUB-BROKERS, 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				
F. ADDITIONAL DETAILS IN TRADING ACCOUNT				
Whether you wish to receive physical contract note (PCN) or Electronic Contract Note (ECN) (please specify)				
Specify your Email id, if applicable				
Whether you wish to avail of the facility of internet trading/ wireless technology (please specify):				
Number of years of Investment/Trading Experience:				
Whether you wish to receive the Standard Documents of Account Opening Form i.e. Rights & Obligations of Stock Broker & Beneficial Owner and Depository Participant, Uniform Risk Disclosure Documents, Guidance Note detailing Do's and Dont's (Tick the applicable box. If not marked the default option would be in Email)				<input type="checkbox"/> Physical / <input type="checkbox"/> Electronically / <input type="checkbox"/> Both Physical and Electronically
In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorized to deal in securities on behalf of company/firm/others				
Any other information				



OTHER DETAILS (INDIVIDUAL)

1. **Gross Annual Income Details (please specify):**
Income Range per annum: Below Rs 1 Lac / 1-5 Lac /5-10 Lac / 10-25 Lac / >25 Lacs or
Net-worth as on _____ (_____) (Net worth should not be older than 1 year)
2. **Occupation (please tick any one and give brief details):** Private Sector/ Public Sector/Government Service/ Business/ Professional/ Agriculturist/ Retired/ Housewife/ Student/ Others _____
3. **Please tick, if applicable:** Politically Exposed Person (PEP)/ Related to a Politically Exposed Person (PEP)
4. Any other information: _____

OTHER DETAILS (NON-INDIVIDUAL)

1. **Gross Annual Income Details (please specify):**
Income Range per annum: Below Rs 1 Lac / 1-5 Lac /5-10 Lac / 10-25 Lac / 25 Lacs-1 crore/ > 1 crore
2. **Net-worth as on** (date) _____(dd/mm/yyyy): _____ (*Net worth should not be older than 1 year)
3. **Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/ whole time directors:** Politically Exposed Person (PEP)/ Related to a Politically Exposed Person (PEP)
4. **Any other information:** _____

G. ADDITIONAL DETAILS IN DEMAT ACCOUNT

1.	I/We authorize you to receive credits automatically into my/our account: (If not marked, the default option would be “YES”)	Yes		No	
2.	Account Statement Requirement: <input type="checkbox"/> As per SEBI Regulation	<input type="checkbox"/> Monthly			
3.	Account to be operated through Power of Attorney(POA)	Yes		No	
4.	Email Download Flag I/we request you to send Electronic Transaction-cum-Holding Statement at The Email Id : _____	Yes		No	
5.	Mode of Receiving Statement of Account: (Tick any one)	<input type="checkbox"/> Physical Form	<input type="checkbox"/> Electronic Form	<input type="checkbox"/> Both Electronic & Physical Form	
6.	I/we would like to share the email-id with the RTA	Yes		No	
7.	Annual Report Flag : I /we would like to receive Annual Report (If not marked, the default option would be in Physical)	Yes		No	
8.	I/we would like to instruct the DP to accept all the pledge instructions in my account without any further instruction from my/our end: (If not marked, the default option would be “No”)	Yes		No	
9.	Auto Pledge Confirmation	Yes		No	
10.	Pledge Processing Flag	Yes		No	
11.	Basic Services Demat Account Flag	Yes		No	
12.	Rajiv Gandhi Equity Saving Scheme (RGESS)	Yes		No	
13.	I/we wish to receive dividend/interest directly in to my bank account as given below through ECS((If not marked, the default option would be “YES”) ECS is mandatory for locations notified by SEBI from time-to time)	Yes		No	



IF NOMINEE IS A MINOR, DETAILS OF GUARDIAN:			
Name of Guardian:			
	(Surname)	(Name)	(Middle Name)
Address and phone no. of Guardian			
Signature of Guardian		Date:	
WITNESSES (Only applicable in case the account holder has made nomination)			
Name		Name	
Address		Address	
Signature		Date	Date
I.(B)NOMINATION DETAILS (for individuals only) IN DEMAT ACCOUNT (CDSL) & (NSDL)			
Nomination Registration No.:			
Date: _____			
I/WE THE SOLE HOLDER /JOINT HOLDERS/GUARDIAN (IN CASE OF MINOR)HEREBY DECLARE THAT: [STRIKE OUT WHAT IS NOT APPLICABLE] & [ALL ACCOUNT HOLDER(S) SHOULD SIGN THE FORM]			
<input type="checkbox"/> I/WE do not wish to nominate any one for this Demat account		<input type="checkbox"/> I/WE nominate the following person/ persons who is / are entitled to receive security balances lying in my account, particulars whereof are given below, in the event of the death of the Sole Holder or the death of all joint holders	
Nominee Details:		Nominee 1	Nominee 2
Nominee Name :			
*First Name:		_____	_____
Middle Name:		_____	_____
*Last Name		_____	_____
*Share of Each Nominee	Equally <input type="checkbox"/> [If not equally, please specify percentage]	%	%
*Address			
*City:			
*State:			
*Pin Code:			
*Country:			
Telephone / Mobile No:			
Fax No:			
PAN of Nominee			
UID:			
Email – Id:			
Relationship with Applicant (If any):			
*Relationship with BO:			
Nominee Identification Details- [Please tick any one of following and provide details of same] Photograph & Signature/ Pan/Aadhaar/Saving Bank Account No./ Proof of Identity /Demat Account ID			
Date of Birth of Nominee (Mandatory if Nominee is a minor):			
Name of the Guardian of Nominee (if the nominee is minor):			
*First Name:		_____	_____
Middle Name: * *Last Name		_____	_____

*Address the of Guardian of nominee:			
*City:			
*State:			
*Pin Code:			
*Country:			
Age :			
Telephone / Mobile No :			
Fax No:			
Email- Id:			
*Relationship of the Guardian with the Nominee:			
Gurdian Identification Details- [Please tick any one of following and provide details of same] Photograph & Signature/ Pan/ Aadhaar /Saving Bank Account No/. Proof of Identity /Demat Account ID			
*Residual Securities [please tick any one nominee. If tick not marked default will be first nominee]:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note : Residual securities: incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.

This nomination shall supersede any prior nomination made by me and also any testamentary document executed by me.

If Nominee / Nominees & Guardian (In case of Minor) provides Photograph as Identification Details, please Paste Photograph below and sign across the photograph

Nominee 1 (Please sign across the Photographs) Paste Latest Colour Photograph of Nominee	Nominee 2 (Please sign across the Photographs) Paste Latest Colour Photograph of Nominee
Nominee 3 (Please sign across the Photographs) Paste Latest Colour Photograph of Nominee	Guardian (In case of Minor) (Please sign across the Photographs) Paste Latest Colour Photograph of Guardian

<i>Signature</i>	<i>Signature</i>	<i>Signature</i>
Name & Signature of the Sole / First Holder	Name & Signature of the Second Holder	Name & Signature of the Third Holder

(Signature should be preferably in blue ink) (In case of minor holder, photograph of guardian has to be affixed along with minor's photograph)

Details of the Witness:

Name of Witness	Address of Witness	Signature of Witness



FOR OFFICE USE ONLY		
<input type="checkbox"/> (Originals verified) True copies of documents received <input type="checkbox"/> (Self-Attested) Self Certified Document copies received Date _____	IPV & Document Verified By : Signature of Employee	Seal/Stamp of Stewart & Mackertich Wealth Management Limited
Risk Profile Assessed based on Client interviewed by Employee		
Client Interviewed On (Mention Date & Time)	Client Interviewed By : (Name of the Employee)	Signature of Employee
Comments of Employee (if any) after Interview of Introducer of Client :		
Introducer Interviewed On (Mention Date & Time)	Client Interviewed By : (Name of the Employee)	Signature of Employee
Date of Demat Account Opening	Demat No Allotted	Other Registration in Group
Date of Trading Account Opening	Unique Client Code Allotted	Other Registration in Group

We undertake that we have made the client aware of 'Policy and Procedures', Tariff Sheet and all the Non-Mandatory Documents. We have also made the client aware of 'Rights and Obligations' Document (s), RDD and Guidance Note. We have given/sent the client a copy of all the KYC documents. We undertake that any change in the 'Policy and Procedures', Tariff Sheet and all the Non-Mandatory Documents would be duly intimated to the clients. We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on our website, if any, for the information of the clients.

Name of Authorized Signatory		Seal/Stamp of Stewart & Mackertich Wealth Management Limited
Date		
Place		



**TARIFF SHEET**

CAPITAL MARKET SEGMENT			
	Brokerage % (Subject to higher limit of 2.5%)	Minimum Brokerage	One Side / Both Side
Delivery Based			
Daily Square-Off			
EQUITY DERIVATIVE MARKET SEGMENT			
Type of Transactions	Brokerage % (Subject to higher limit of 2.5% Rs. 100/- per lot in Options)	Minimum Brokerage	One Side / Both Side
Future			
Options			
❖ Brokerage would be charged on the option premium value in case of Options trade			
CURRENCY DERIVATIVE MARKET SEGMENT			
Type of Transactions	Brokerage % (Subject to higher limit of 2.5% Rs. 100/- per lot in Options)	Minimum Brokerage	One Side / Both Side
Future			
Options			
❖ Brokerage would be charged on the option premium value in case of Options trade			
MUTUAL FUND SEGMENT			
Type of Transactions	Brokerage % (Subject to higher limit of 2.5%)	Minimum Brokerage	One Side / Both Side
Delivery Based			

All Statutory Charges presently applicable and/or would be applicable in future, under various legislation of Central Government, State Government, Regulatory Authorities, Stock Exchanges and/or any Public Authorities, would be charged and collected from the Client. The Brokerage will be exclusive of the following except in cases where it is agreed otherwise:

- (i) Service Tax and Education Cess.
- (ii) SEBI/Exchange/Clearing Member Charges
- (iii) Stamp Duty
- (iv) Statutory Charges payable to Exchange/SEBI/Government Authorities including GST, if applicable.
- (v) Any Other Charges towards customized/specialized service.

Where the sale/purchase value of a share is Rs. 10/- or less in Capital Market Segment, maximum brokerage of 25 paise per share may be collected.

No brokerage would be charged on Auction Trades, however applicable charges, viz. penalty charges, auction difference, etc., levied by the respective Stock Exchanges as may be debited to Stewart & Mackertich, would be debited to account of the Client.

Signature of Client		Date
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TARIFF SHEET – DEPOSITORY CHARGES SCHEDULE

PARTICULARS	CHARGES
DP AMC Charges * (Ordinary)	Rs. 300/-
Advance Adjustable Against Bills *(Ordinary)	Rs. 500/-
DP AMC Charges * (Corporate)	Rs. 750/-
Advance Adjustable Against Bills *(Corporate)	Rs. 1000/-
LOA Charge	Rs. 20/-
Transaction Charges	
All Receipts	NIL
All Deliveries	.04% of Market Value (Minimum Rs. 15/-)
Pledge Creation	Rs. 100/- per request
Pledge Creation Confirmation	Rs. 25/- per request
Pledge Closure	Rs. 25/- per request
Pledge Closure Confirmation	Rs. 25/- per request
Pledge Invocation	Rs. 100/- per request
Securities Lending/Borrowing	Rs. 100/- per request
Demat Request	Rs. 2/- per certificate (Minimum Rs.25/- per request)
Demat Rejection	Rs. 25/- per request
Remat Request	Rs.12/- per hundred shares or Rs 12/- per certificate, whichever is higher (Minimum Rs.25/- per request). Mailing Charges on Actuals
Miscellaneous Charges	
Same Day Execution after 4.00 p.m. *	Rs. 50/- per request
Same Day Execution before pay-in deadline *	Rs. 100/- per request
Cheque Dishonour Charges	Rs. 100/- per request
Delivery Instruction Book	Rs. 5/- per request
Additional Transaction/Holding Statement *	Rs. 10/- per request
Monthly Transaction/Holding Statement	Rs. 10/- per request
Power of Attorney processing	Rs. 20/- per request
Mailing Charges	
Demat/Remat	On Actuals
Statements, Communications, etc.	Rs. 15/- per consignment

*** Charges to be paid upfront.**

Notes:

- Charges are based on NSDL Charges and subject to revision at the sole discretion of Stewart & Mackertich Wealth Management Limited.
- Transaction Statement will be provided on a monthly basis, if there is transaction.
- Statement of Holding will be provided on a quarterly basis.



- 4. Operating instructions for the joint accounts must be signed by all holders.
- 5. Billing will be done on a monthly basis.
- 6. Other Out-of-pocket expenses will be recoverable from the accountholder(s).
- 7. Interest @ 2% per month or part thereof would be charged for delayed payments.
- 8. Any revision of fees will be intimated through Circular by Ordinary Post.

Name and Signature of Account Holder(s)		
Signature	Signature	Signature
Name & Signature of the Sole / First Holder	Name & Signature of the Second Holder	Name & Signature of the Third Holder



KYC Document Booklet & Declaration for opening Trading and/or Depository Account

Stewart & Mackertich Wealth Management Limited

Broking & Depository Division (DP ID: IN301629 / 12016000)

4 Lee Road, 5(F)
Kolkata 700 020

Dear Sir,

Subject: KYC Document Book & Declaration for opening Trading and Depository Account

1. I/we am/are desirous of opening the Trading and Demat Account with Stewart & Mackertich Wealth Management Limited in the process of executing client registration documents relating to the opening of trading and demat account..
2. I/we have furnished all the details in the KYC form as per SEBI/ Exchange/ DP requirements. I/we confirm having read /been explained and understood the contents of the KYC Documents which are provided to me in separate booklet. The KYC document booklet includes the following:
 - a) Instruction\ Checklist for filling KYC Form.
 - b) Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading) prescribed by SEBI and Stock Exchanges.
 - c) Uniform Risk Disclosure Documents (RDD) prescribed by SEBI and Stock Exchanges.
 - d) Guidance Note detailing do's and don'ts for trading on Stock Exchanges.
 - e) Policies and Procedures Documents describing significant policies and procedures of Stewart & Mackertich Wealth Management.
 - f) Information on Anti- Money Laundering.
 - g) General Information of Depository Participant
 - h) Rights and Obligation of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories to clients.
 - i) Non-Mandatory Policies and Procedures documents describing significant non-mandatory policies and procedures of Stewart & Mackertich Wealth Management Limited.
 - j) KYC Documents Booklet and Declaration.
3. I understand and agree that any amendment/modifications as required by the Exchange(s)/Depository Participant(s) and/ or Regulators will be applicable to me/us at all point of time and I/we understand that these changes will be intimated to me/us.

4. I/we understand that the KYC document booklet is in accordance of the Exchanges and/or SEBI/ Depository Participant(s) requirements applicable for opening Trading /Demat account.
5. 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 and also the Demat tariff sheet and an Instruction\ Checklist for filling KYC Form
6. I/we confirm having read /been explained and understood the contents of the document on Non-Mandatory Policies and Procedures documents describing significant non-mandatory policies and procedures of Stewart & Mackertich Wealth Management Limited, Information on Anti- Money Laundering and General Information of Depository Participant.
7. I/we further confirm having read and understood the contents of the “Right and Obligations” document(s) and “Risk Disclosure Document”(RDD). 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 website.
8. I/we have received and read the copy of “Right and Obligations” document(s) of the Beneficial Owner and Depository Participant and agree to abide by and be bound by the same and by the Byelaws as are in force from time to time. I agree and undertake to intimate you any changes in the details / particulars mentioned by me/us in this form.
9. I have received the booklet with above mentioned contents
10. I hereby declare that the details furnished in the KYC by me/us 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 misrepresenting, I am aware that I may be held liable for termination and suitable action.

Signature	Signature	Signature
Name & Signature of the Sole / First Holder	Name & Signature of the Second Holder	Name & Signature of the Third Holder

Unique Client Code:		DP Client ID:	
Date:		Place:	



REVOCABLE POWER OF ATTORNEY FOR THE OPERATION OF DEMAT ACCOUNT HELD WITH STEWART & MACKERTICH WEALTH MANAGEMENT LIMITED

This Power of Attorney (in short “PoA”) is made on the date and place as mentioned hereunder by the Client mentioned in the “Schedule A” (hereinafter referred to as “Client/s/Principal/s”) in favour of Stewart & Mackertich Wealth Management Limited, a Company incorporated under the provisions of the Companies Act, 1956 and having its Registered Office at Vaibhav, 5th Floor, 4Satyajit Ray Dharani (formerly Lee Road), Kolkata – 700020 (hereinafter referred to as “Stewart & Mackertich”) which expression shall unless repugnant to the context thereof shall mean and include its successors and assigns acting through each of its Directors or such other persons as may be authorized by Stewart & Mackertich in this regard.

WHEREAS Stewart & Mackertich Wealth Management Limited is a Member of National Stock Exchange of India Ltd. (NSE)-bearing SEBI Registration No(s). INB230599932 in Cash Segment, INF230599932 in Futures and Options Segment and INE230599932 in Currency Derivative Segment and Bombay Stock Exchange Ltd. (BSE) - bearing SEBI Registration No(s).INB011207459 in Cash Segment and INF010599935in Futures and Options Segment.

AND WHEREAS Stewart & Mackertich Wealth Management Limited (Stewart & Mackertich) is a Depository Participant with Central Depository Services (India) Limited (CDSL) bearing DP ID – 12016000 and National Securities Depository Limited (NSDL) bearing DP ID – IN301629. The details of Pool and Beneficiary Account/s currently maintained by Stewart & Mackertich are given hereto in “Schedule B” and also to include the Pool and Beneficiary Account/s which Stewart & Mackertich may hereinafter open and operate, from time to time, and the same shall be notified to the Client.

AND WHEREAS the Client (first named in the Schedule A) wish to avail and/or have availed the services offered by Stewart & Mackertich in their respective capacity as a member of the Exchange/s and has entered into or may enter into relationship with one or more member and/or account opening document/client registration kit and other related documents (hereinafter collectively referred to as “Client Agreement/s”) with Stewart & Mackertich for transacting in Securities on the Exchange/s in accordance with the provisions of the Client Agreement/s read with the terms and conditions (“Terms”) voluntarily agreed with Stewart & Mackertich and for facilitating the proper execution of the transactions contemplated in the said Client Agreement/s and the Terms and for the purpose the client along with other principal/s intends to confer on the Stewart & Mackertich the authorities and power specified in this POA.

AND WHEREAS the Client being the beneficiary/ies of the transactions carried out pursuant to this POA, the Principal/s are desirous of constituting and appointing Stewart & Mackertich as their lawfully constituted attorney and confer upon it the Powers hereinafter stated.

1. To operate the Depository Account with Stewart & Mackertich (as per the details given in the Schedule A) and communicated by the Principal/s to Stewart & Mackertich to debit the said account to meet all margin/settlement obligations arising out of transaction executed on the Exchange/s for and on behalf of

Signature(s) of Beneficial
Account Holders:

the Client and/or transfer securities from the Beneficiary Owner account of the Principal/s to such demat accounts as mentioned in Schedule B for the purpose of delivering the same in respect of securities sold by the Client and/or for margin purposes to the Stock Exchanges in relation to any segment, arising out of such transaction executed on Stock Exchanges or any other Stock Exchange duly recognized and regulated under the applicable laws, as the case may be.

2. To make application and/or issue instructions in relation to pledge on the securities/units in the Depository account of the Principal/s with Stewart & Mackertich on behalf of the Client for the purpose of meeting settlement/margin requirements in respect of transactions on the Exchanges for and on behalf of the Client.
3. To register this Power of Attorney in the Depository System with Stewart & Mackertich.
4. To return to the Client the securities that have been received erroneously or those securities that Stewart & Mackertich was not entitled to receive from the Client.
5. To retain all originals of the documents executed by and on behalf of the Principal/s.
6. The client authorizes Stewart & Mackertich to send consolidated summary of Client's scrip-wise buy and sell positions taken with average rates to the client by way of SMS/email on a daily basis, notwithstanding any other document to be disseminated as specified by SEBI from time to time.

This Power of Attorney may be REVOKED at any time by the Principal/s by lodging with Stewart & Mackertich a communication in writing duly signed. Provided, however, that the revocation shall not so operate as to preclude or deny execution of transactions as are required for the purpose of fulfilling all obligations (towards settlement, delivery, margin or otherwise), arising out of transactions executed for and on behalf of Clients by Stewart & Mackertich on the Stock Exchanges prior to the time of receipt of such revocation by Stewart & Mackertich and is exclusive to Stewart & Mackertich except to the extent not permissible under the Bye-laws, Rules and Regulations) of the Exchanges and Depository and the directions issued thereunder.

This document shall be subject to the jurisdiction of the Learned Courts in Kolkata and shall be strictly guided by the principles enshrined by Securities & Exchange Board of India in their Circular CIR/MRD/DMS/13/2010 dated April 23, 2010 and any other Circulars laid thereafter.

The details provided in the Schedule A may be altered by the Principal/s and the details provided in Schedule B may be altered by Stewart & Mackertich, by giving a due notice of 7 working days to the other party.

Schedule A (Details of Client / Principals)

Name of Client / First Holder	
Address of Client	
Trading Account No.	
Depository Participant Name	Stewart & Mackertich Wealth Management Limited
DP ID	CDSL – 12016000 ; NSDL – IN301629
Demat Account No.	

Signature(s) of Beneficial
Account Holders:

**Schedule B (Details of Demat Accounts)**

	DP ID	Client ID / CM BP ID
NSDL NSE POOL Account		IN558457
NSDL BSE POOL Account		IN651991
CDSL NSE POOL Account	12016000	00000198
CDSL NSE Early Pay In Account	11000011	00015071
CDSL BSE Principal Account	12016000	00000183
CDSL BSE Early Pay In Account	11000010	00017387
CDSL Margin Account (CM)	12016000	00002370
CDSL Margin Account (NSE)	12016000	00035396
CDSL Margin Account (BSE)	12016000	00035402
CDSL Margin Account (NSE F&O)	12016000	00015130
NSDL Margin Account (NSE F&O)	IN301629	10077243
CDSL Margin Account (BSE F&O)	12016000	00024050
CDSL Margin Account (NSE CUR)	12016000	00026005
NSDL Margin Account	IN301629	10042292
NSDL Margin Account	IN301629	10002921
NSDL Margin Account	IN301629	10003222

IN WITNESS WHEREOF, We have caused this Power of Attorney to be executed on this _____ day of _____ 20_____.

Signed and Delivered
by the First Holder

Signed and Delivered
by the Second Holder

Signed and Delivered
by the Third Holder

Witness –
Name, Address &
Signature

Witness –
Name, Address &
Signature

Witness –
Name, Address &
Signature

Acceptance of Power of Attorney at _____

I,

on and behalf of Stewart & Mackertich Wealth Management Limited accept appointment as an agent under this REVOCABLE Power of Attorney and undertake the powers conferred hereunder shall be exercised by me and / or by other person authorised by Stewart & Mackertich Wealth Management Limited honestly, in accordance with the conditions and directions set out above.

(Signature of Person Authorised for & of Stewart & Mackertich Wealth Management Limited)

Date: _____ Place: _____

Signature(s) of Beneficial
Account Holders:



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 with out 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 warranty 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

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

(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 messages are to be sent

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

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

The mobile number is registered in the name of:

Email ID: _____

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

Signatures:

Name and Signature of Account Holder(s)		
Signature	Signature	Signature
Name & Signature of the Sole/ First Holder	Name & Signature of the Second Holder	Name & Signature of the Third Holder
Date:	Place:	



DECLARATION

**SMS AND EMAIL ALERTS FROM STOCK EXCHANGE/S & STOCK BROKERS
(Reference to SEBI circular Ref: No. CIR/MIRSD/15/2011 dated August 02,2011)**

SMS and E-mail Alerts from Stock Exchange(s) and Stewart & Mackertich for my Trading Account
UCC : _____

I/we request you to activate the facility of SMS and Email alerts from Stock Exchange(s) and Stewart & Mackertich for transactions in the above mentioned trading / demat account.

- Yes I/we wish to receive alerts by SMS /Email
- By SMS BY Email By SMS & Email

***If opted for both SMS and Email Facility, it is mandatory to give both Mobile Number and E-mail ID.**

If you wish to receive alerts by SMS/Email, the following options are available (Tick any one and give the details accordingly)

I/we wish to receive alerts from Stock Exchanges and Stewart & Mackertich and give my/our consent to details being send to this below- mentioned mobile no./email Id.

My/our Mobile No. : _____

My our Email Id : _____

Signature of Client		UCC :
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DECLARATION BY CLIENT WHO IS NOT DESIROUS TO REGISTER EMAIL ADDRESS AND / OR MOBILE NUMBER WITH STEWART & MACKERTICH WEALTH MANAGEMENT LIMITED FOR RECEIVING TRADE & TRANSACTION ALERTS FROM STOCK EXCHANGE.

I/We hereby confirm and declare that currently I/we do not have any Mobile and /or Email-Id and inform you that I/we DO NOT wish to REGISTER my/our email address and/or mobile number with you at present.. I/ we will take proper initiative and provide you with the details of my/our email address and/or mobile number at the earliest. I/we understand the importance of registering my/our email address and/or mobile number to receive Transaction Alerts of my/ our executed trades from the Stock Exchange and assure you that according to guidelines laid by Regulatory Authorities I/we would provide you my/our email address and/or mobile number shortly. I/we request you to treat this declaration as a valid standing instruction till I/ we update and register my/ our email address and/or mobile number with you, until and unless communicated to you in writing.

Signature of Client		UCC :
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DECLARATION BY CLIENT TO REGISTER EMAIL ADDRESS AND/OR MOBILE NUMBER WITH STEWART & MACKERTICH WEALTH MANAGEMENT LIMITED OF FAMILY MEMBER FOR RECEIVING TRADE & TRANSACTION ALERTS FROM STOCK EXCHANGE

I/we hereby declare that the Mobile Number and/or Email ID given in the account opening form are of my relative. He/She already has a trading/demat account with Stewart & Mackertich under the below-mentioned PAN and UCC.

Relationship(Tick where applicable) : Spouse Dependent Parent Dependent Children

PAN of the family member: _____

Unique Client Code of the family member: _____

Signature of Client		UCC:
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VOLUNTARY REVOCABLE AUTHORIZATION (S)

Stewart & Mackertich Wealth Management Ltd.

4 Lee Road, Vaibhav, Kolkata - 700 020

RUNNING ACCOUNT AUTHORISATION (REVOCABLE)

I/We have been /shall be dealing through Stewart & Mackertich Wealth Management Limited (hereinafter referred to as Stewart & Mackertich) as my/our broker on the Capital Market and/or Derivative Market Segments/Currency Derivative Segments. As my/our broker I/we direct and authorize Stewart & Mackertich to carry out trading/dealings on my/our behalf as per instructions given below.

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

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

In the event I/we have outstanding obligations on the settlement date, Stewart & Mackertich may retain the requisite securities/funds towards such obligations and may also retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the exchanges. While settling the account please send me/us "a statement of accounts" containing an extract from ledger for funds and an extract from the register of securities displaying all receipts/deliveries of funds/securities. Please explain in the statement(s) being sent the retention of funds/securities and the details of the pledge, if any.

I/we agree that if I/we fail to bring any dispute arising from the statement of accounts or settlement so made to your notice within fifteen working days from the date of receipt of funds/securities or statement, as the case may be in writing by delivery at your registered office then in that event the statement of accounts or settlement so made shall attain finality and I/we shall have no right to dispute any/either of these ever.

If at a later date Stewart & Mackertich provides margin-trading facility to its clients, I/we authorize Stewart & Mackertich to not carry out above stated settlement of running account. Further, do not carry out settlement of running account referred to above for funds given by me/us towards collaterals/margin in the form of Bank Guarantee (BG)/Fixed Deposit Receipt (FDR).

In the even of my/our written request to settle funds and securities lying in credit in my/our account, Stewart & Mackertich shall be under obligation to settle such funds and securities lying in my/credit within one working day in case such credits are lying with Stewart & Mackertich and within three working days from the date of such request if such credits are lying with the Clearing Member/Clearing Corporation.

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

Once in a Calendar Quarter	_____ Signature of Client
Once in a Calendar Month	_____ Signature of Client

Stewart & Mackertich under any conditions shall NOT adjust/utilize the credit of both funds and securities for inter-client adjustment for the purpose of settlement of the running account.

Further I am/We are desirous for giving the following instructions with respect to my/our trading account:

- a) I/We authorize Stewart & Mackertich to transfer excess funds from my/our Initial Margin of Derivative Market Segment account to my/our normal account of Derivative Market Segment, if required. I/We also authorize to transfer excess funds from my/our normal account of Derivatives Segment to my/our Initial Margin Account of Derivatives Segment.
- b) I/We authorize Stewart & Mackertich to transfer excess funds from my/our Margin from Capital Market Segment account to my/our normal account of Capital Market Segment, if required. I/We also authorize to transfer excess funds from my/our normal account of Cash Market Segment to my/our Margin Account of Capital Market Segment.
- c) I/We authorize Stewart & Mackertich to transfer excess funds in my/our either in Initial Margin of Derivatives Market Segment account and/or Normal Account of Derivatives Market Segment account to my/our in any accounts of the Capital Market Segment and vice versa.
- d) I/We authorize Stewart & Mackertich to utilize my/our money lying with Stewart & Mackertich from time to time in my/our account receivable from pay-outs of any exchange at your discretion to fulfill our relevant obligation(s) in any other segment of any other exchange(s).

I/we shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions given above and further agree that Stewart & Mackertich shall not be liable for any claim for loss or profit, or for any consequential, incidental, special or exemplary damages, caused by retention of securities/monies under this declaration.

Please further note that while I am/we are entitled to revoke this authorization unconditionally at any time, however, such termination shall be subject to physical delivery of revocation letter at your registered office to allow Stewart & Mackertich to make necessary changes to handle my/our account without running account authorization. I/We shall inform Stewart & Mackertich in writing and get due acknowledgement and take signatures of atleast two authorized officers at the Branch of Stewart & Mackertich along with company stamp, at least one week in advance from the date of withdrawal.



VERBAL ORDERS/INSTRUCTIONS ACCEPTANCE & AUTHORIZATION FOR INSTRUCTIONS BY THIRD PERSONS TO TRADE AND TRANSACT ON BEHALF OF CLIENT (REVOCABLE)

I/We have been/shall be dealing through Stewart & Mackertich Wealth Management Limited (hereinafter referred to as Stewart & Mackertich) as my/our Broker on the Capital Market/Mutual Fund and/or Equity Derivative Segment(s)/Currency Derivative Segment(s), as my/our Broker I/We direct and authorize Stewart & Mackertich to carry out trading/dealings on my/our behalf as per instruction given below.

I/We agree and acknowledge that it is advised by Stewart & Mackertich that I/We should give instructions for order placement/modification and cancellation in writing and to avoid disputes, I/We must give instructions in exactly the prescribed format and take signatures of atleast two authorized officers at the Branch along with company stamp.

However, I/We shall be dealing by ordering over phone and even if we visit the Branch, the fluctuation in the market are so rapid that it is not practical to give written instruction for order placement/modification and cancellation, I/We hereby authorize Stewart & Mackertich to accept my/our/authorized representatives verbal instructions for order placement/modification and cancellation in person or over phone and execute the same. I/We also request Stewart & Mackertich to confirm the execution/non-execution of orders/instructions to me/us verbally. These orders/instructions which are given verbally shall hold good and shall be subject to all such terms and conditions as applicable to written contracts

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 Stewart & Mackertich to prove the placement 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 direction given above.

I/We am/are busy in various professional and business activities and might not be in a position to receive various documents viz. physical contract notes, bills, ledger, securities statement, Securities Transaction Tax Statement, Margin Statement, Payments and any other documents with regard to my/our trading account maintained with you.

Thus for operational convenience I/We am/are authorizing the below mentioned representative(s), to do the following:

- a) Trade and transact on my/our behalf and to place orders and/or give instructions.
- b) Receive and acknowledge contract notes, bills, order confirmations, trade confirmations, account statements, payments and any other documents or communication by endorsing/putting his/her signature(s) on the duplicate copy and/or any such receipt copies and/or Courier PODs and/or Acknowledgement Cards and/or book(s), for the records of Stewart & Mackertich. I/We also undertake that such receiving and/or acknowledgement given by any one of my below mentioned authorized representative(s) would hold good as per prevailing statutes and/or statutes which would be in force and/or passed by any regulatory authorities in future.
- c) Hand Over Cheques against my dues and Margin obligations, delivery instructions slips against my/our deliver and margin obligations.

I/We do hereby agree and declare and confirm that all the acts and things done by above authorized representative shall be my/our own acts, deeds and things validly done by me/us to all intents and purposes. I

also undertake to indemnify Stewart & Mackertich for all dues, loss, penalties and incidental expenses relating to and arising out of the transactions executed by the above named authorized representative in my/our account.

Name of Signature of my/our representative(s) is attested below.

AUTHORIZED REPRESENTATIVE - 1		
_____ Signature of Authorized Representative Name: _____	Please Affix Recent Passport Sized Colored Photograph & Sign Across of Authorized Representative	Signature of Client Attesting the Details of Authorized Representative
_____ Address of Authorized Representative		
AUTHORIZED REPRESENTATIVE - 2		
_____ Signature of Authorized Representative Name: _____	Please Affix Recent Passport Sized Colored Photograph & Sign Across of Authorized Representative	Signature of Client Attesting the Details of Authorized Representative
_____ Address of Authorized Representative		
AUTHORIZED REPRESENTATIVE - 3		
_____ Signature of Authorized Representative Name: _____	Please Affix Recent Passport Sized Colored Photograph & Sign Across of Authorized Representative	Signature of Client Attesting the Details of Authorized Representative
_____ Address of Authorized Representative		

Please further note that while I am/we are entitled to revoke this authorization unconditionally at any time, however, such termination shall be subject to physical delivery of revocation letter at your registered office to allow Stewart & Mackertich to make necessary changes to handle my/our account without running account authorization. I/We shall inform Stewart & Mackertich in writing and get due acknowledgement and take signatures of atleast two authorized officers at the Branch of Stewart & Mackertich along with company stamp, at least one week in advance from the date of withdrawal.

Signature of Client	Signature	Date
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(To be signed by the CLIENT and NOT to be signed by the Attorney/Authorized Person etc. of the Client)



**CONFIRMATION UNDER THE FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)
FOR DETERMINING US PERSON STATUS [Mandatory for all investors including
Unit holder (Guardian in case of minor) and Joint holder(s)]**

Stewart & Mackertich Wealth Management Ltd.

4 Lee Road, 5th Floor, Vaibhav, Kolkata – 700020

Please complete in **BLOCK LETTERS**

APPLICANT'S INFORMATION

Trading A/c No.

Demat A/c No.

	First Account Holder	Second Account Holder
Name of the Account Holder		
City of Birth		
Country of Birth		
Address for TAX purpose	<input type="checkbox"/> Same as mailing address <input type="checkbox"/> Same as permanent address	<input type="checkbox"/> Same as mailing address <input type="checkbox"/> Same as permanent address
Nationality (If national of more than one country, please mention all separated by comma)		
Father's Name		
Spouse Name		
Identification Type – Documents submitted as proof of identity of the individual	<input type="checkbox"/> Passport <input type="checkbox"/> PAN <input type="checkbox"/> Election / Voter's ID card <input type="checkbox"/> Driving Licence <input type="checkbox"/> Aadhar Card/letter <input type="checkbox"/> NAREGA Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Other (Please Specify)	<input type="checkbox"/> Passport <input type="checkbox"/> PAN <input type="checkbox"/> Election / Voter's ID card <input type="checkbox"/> Driving Licence <input type="checkbox"/> Aadhar Card/letter <input type="checkbox"/> NAREGA Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Other (Please Specify)
Identification Number - For the identification type mentioned above		

Are you a tax resident of any country other then India ?

- First Account Holder : Yes No
- Second Account Holder : Yes No

If yes, Please indicate all countries in which you are resident for tax purposes and associated Tax Reference Number below :

Account Holder Details	Name of Customer	Country/(ies) of Tax Residency #	Tax Identification Number (TIN)*	Identification Type (TIN or Other*, please specify)
First				
Second				

To also include USA, where the individual is a citizen/ green card holder of USA

* In case Tax Identification Number is not available, kindly provide functional equivalent \$

Certification: I/We have understood the information requirements of this Form as per the CBDT notified Rules 114F to 114H and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the Terms and Conditions below and hereby accept the same.

I/We understand that my personal details as provided /available in the bank records will be used for CBDT reporting.

Signature of First Holder

Signature of Second Holder

CBDT TERMS AND CONDITIONS

The Central Board of Direct Taxes (CBDT) has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with HDFC Bank or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information. CBDT Instructions

CBDT TERMS AND CONDITIONS

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form. In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below :

FATCA/ CRS INDICIA OBSERVED (TICKED)		DOCUMENTATION REQUIRED FOR CURE OF FATCA/ CRS INDICIA
1.	U.S. place of birth	<ol style="list-style-type: none"> 1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: <ol style="list-style-type: none"> a. Certified Copy of "Certificate of Loss of Nationality or b. Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
2.	Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> 1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
3.	Telephone number in a country other than India (and no telephone number in India provided)	<ol style="list-style-type: none"> 1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
4.	Standing instructions to transfer funds to an account maintained in a country other than India	<ol style="list-style-type: none"> 1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)

**FINANCIAL DETAILS AND OTHER DETAILS**

The information is sought under the Prevention of Money Laundering Act, 2002, the rules notified there under and SEBI and Exchange Guidelines issued on Anti Money Laundering.

1. Annual Income (Last Three years from the date of opening of this account)1st Year

Upto Rs. 1 lac	Rs. 1 lac to 2 lacs	Rs. 2 lacs to 5 lacs	Rs. 5 lacs to 10 lacs
Rs.10 lacs to Rs.25 lacs	Rs.25 lacs to Rs.50lacs	Rs.50 lacs to Rs.1 crore	Rs.1 Crore and above

2nd Year

Upto Rs. 1 lac	Rs. 1 lac to 2 lacs	Rs. 2 lacs to 5 lacs	Rs. 5 lacs to 10 lacs
Rs.10 lacs to Rs.25 lacs	Rs.25 lacs to Rs.50lacs	Rs.50 lacs to Rs.1 crore	Rs.1 Crore and above

3rd Year

Upto Rs. 1 lac	Rs. 1 lac to 2 lacs	Rs. 2 lacs to 5 lacs	Rs. 5 lacs to 10 lacs
Rs.10 lacs to Rs.25 lacs	Rs.25 lacs to Rs.50lacs	Rs.50 lacs to Rs.1 crore	Rs.1 Crore and above

2. Networth Details (as on the date of account opening)

Upto Rs. 1 lac	Rs. 1 lac to 2 lacs	Rs. 2 lacs to 5 lacs	Rs. 5 lacs to 10 lacs
Rs.10 lacs to Rs.25 lacs	Rs.25 lacs to Rs.50lacs	Rs.50 lacs to Rs.1 crore	Rs.1 Crore and above

3. Please tick mark the additional applicable category to you

- Non-resident Client
- High Networth Client (having annual income +Networth of More than Rs. 1 Crore;
- Trust, Charities, NGOs and Organizations receiving donations;
- Company having close family shareholdings or beneficial owners;
- Civil Servant or family member or close relative of Civil Servant;
- Bureaucrat or family member or close relative of bureaucrat;
- Current or Former MP or MLA or MLC or their family member or close relative;
- Politician or their family members or close relative;
- Current or Former Head of State or of Governments or their family member or close relative;
- Senior Government/judicial/military officers or their family member or close relative;
- Senior Executives of state-owned corporations or their family member or close relative;
- Companies offering foreign exchange offerings;
- None of the above;

I/we hereby further confirm/undertake that the investments/trading done in Securities Market are from my own /borrowed sources of funds and I/we confirm that the funds utilized for trading activities by me is in compliance with the rules , regulations and guidelines stipulated under PMLA.

Signature of Client	Signature	Date
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Acknowledgement

Nomination Form accepted and registered vide Registration No. _____ dated _____.

For **STEWART & MACKERTICH WEALTH MANAGEMENT LTD**

(AUTHORISED SIGNATORY)

(To be filled by DP)

Acknowledgement Receipt Received Nomination Request Form:

DP ID:	12016000	BO ID:		NAME:					
DP ID:	IN301629	BO ID:							
ADDRESS:									
NOMINATION IN FAVOUR OF:									
NO. NOMINATION	<input type="checkbox"/> DOES NOT WISH TO NOMINATE								
REGISTRATION NO.		REGISTERED ON:							
DEPOSITORY PARTICIPANT SEAL & SIGNATURE:									

Acknowledgement

Stewart & Mackertich Wealth Management Limited

4, Lee Road, Vaibhav, 5th Floor, Kolkata - 700 020

Tel. No.: (91 33) 3051 5400 Fax: 2289 3401

Compliance Officer: Sudipto Datta/(9133) 3051 5401/ compliance@smifs.com

SEBI Registration Nos.: NSE - Capital Market INB 230599932; Derivative Market (Equity) INF 230599932; Derivative Market (Currency) INE 230599932; BSE - Capital Market INB 011207459; Derivative Market (Equity) INF 010599935; CDSL AND NSDL: IN-DP-24-2015

Unique Client Code- _____ CDSL - _____; NSDL- _____

Received the application from Mr./ Mrs. _____ as the individual / sole / first holder along with _____ and _____

_____ as the second and third holders respectively for opening a depository and Broking Account.

Please quote the DP ID & Client ID in Depository Account and Unique Client Code in Broking Account allotted to you in all your future correspondence.

BROKER & DEPOSITORY PARTICIPANT SEAL & SIGNATURE: _____

DATE: _____



**STEWART &
MACKERTICH**
LEGACY | TRUST | GROWTH

