

Sl. No.:.....



**FORTUNE**

CAPITAL SERVICES PVT LTD

ALWAYS ON YOUR SIDE

(Member : NSE, BSE, MCX & ICEX)

**(Depository Participant with CDSL)**

## ACCOUNT OPENING FORM

|               |
|---------------|
| CLIENT NAME : |
| CLIENT CODE   |

# INDEX OF DOCUMENTS

| S. No. | Name of the Document | Brief Significance of the Document | Page No |
|--------|----------------------|------------------------------------|---------|
|--------|----------------------|------------------------------------|---------|

## MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES

|   |                                |                                                                                                                                                                                                                                       |               |
|---|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| 1 | Account Opening Form           | A. KYC form - Document captures the basic information about the constituent and an instruction/check list.<br>B. Document captures the additional information about the constituent relevant to trading account and an instr          | 3-13<br>14-21 |
| 2 | Rights and Obligations         | Document stating the Rights & Obligations of Member, Authorized Person and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading) & Depository Participant | Annexure A    |
| 3 | Risk Disclosure Document (RDD) | Document detailing risks associated with dealing in the securities market./ Commodity market                                                                                                                                          | Annexure B    |
| 4 | Guidance note - DO's & Don'ts  | Document detailing do's and don'ts for trading on exchange, for the education of the investors.                                                                                                                                       | Annexure C    |
| 5 | Policies and Procedures        | Document describing significant policies and procedures of the stock broker / Commodity broker                                                                                                                                        | Annexure D    |
| 6 | Tariff sheet                   | Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s) / Commodity exchange(s) / DP                                                                              | 22-23         |

Annexures A, B, C & D are available in the link <http://ftconline.in/download/Annexures A to D.pdf>

## VOLUNTARY DOCUMENTS AS PROVIDED BY THE MEMBER

|    |                                                     |                                                                                                                          |       |
|----|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------|
| 7  | Voluntary Additional Tariff Sheet                   | Other charges levied on the client for the services opted by them, if any, in trading on the stock exchanges(s)          | 24    |
| 8  | Voluntary Rights and Obligations                    | Voluntary undertakings stating the rights and obligations of stock broker / sub-broker / client for trading on exchanges | 25-28 |
| 9  | Maintenance of Running A/c. - Letter of Authority   | Helps the client to enjoy exposures linked to the credit in the trading account                                          | 29    |
| 10 | Option Form - DP                                    | Option Form for issue of DIS Booklet                                                                                     | 30    |
| 11 | Power of Attorney (POA)                             | Authority to operate demat account                                                                                       | 31-32 |
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| 16 | Self Declaration                                    | Consent for each Commodity on Self Declaration basis for the following to report to Exchange                             | 37    |
| 17 | Authorisation for DP                                | Authorisation to Debit Demat Account Operating Charges                                                                   | 38    |
| 18 | Acknowledgement & Authorization                     | Acknowledgement for receipt of documents executed and Authorization for the modification requests.                       | 39    |

## DOCUMENTS TO BE ATTACHED ALONG WITH THE TRADING FORM

|   |               |                                                                                                                                                                                                                                                                                                                                                    |
|---|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | ID Proof      | 1 Self-attested copy of any of the following documents :<br>i) Passport Number      iv) Driving Licence<br>ii) Voter ID card      v) UID (Aadhaar)<br>iii) PAN card      vi) NREGA Job card                                                                                                                                                        |
| 2 | Address Proof | 1 Self-attested copy of any of the following documents :<br>i) Passport Number      iii) Driving Licence      v) NREGA Job card<br>ii) Voter ID card      iv) UID (Aadhaar)                                                                                                                                                                        |
| 3 | Bank Proof    | 1 cancelled cheque (Personalised i.e Name to be printed on the cheque). If not, please attach a copy of Passbook alongwith 1 to 3 months Transaction Page or Bank Statement of latest 1 to 3 months.                                                                                                                                               |
| 4 | Income Proof  | 1 Self-attested copy of any of the following documents :<br>i) Pay slip (last 3 Months)      ii) Form 16 / IT Returns ( latest)<br>iii) 6 month Bank statement (latest)      iv) Copy of Demat Holding with any other Broker / DP<br>v) Copy of Property Document under Income Proof part of Documents to be attached along with the trading form. |

**In-Person Verification** : The Exchange requires us to perform in-person verification, so you have to be available on a webcam at a later date for the in-person verification.

### **Cheque for Account Opening Charges :**

|   |                          |                                                                 |
|---|--------------------------|-----------------------------------------------------------------|
| 1 | Pre-printed Forms        | - Rs.200+GST/- in favour of Fortune Capital Services Pvt. Ltd., |
| 2 | PDF / Self printed Forms | - Rs.200+GST/- in favour of Fortune Capital Services Pvt. Ltd., |

## QUICK CHECK LIST FOR CLIENT

1. Photocopy of clear and legible PAN Card / ID Proof ☐
2. Photocopy of clear and legible Address Proof ☐
3. Photocopy of clear and legible Bank Proof (Name, A/c. No. MICR & IFSC details) ☐
4. Photocopy of Financial Proof ☐
5. Application charges in the name of Fortune Capital Services Pvt. Ltd., ☐
6. Sign in all the places  (41) marked - Pagewise details given below. ☐

| Page No. | No. of Signatures | Check & Tick             | Page No. | No. of Signatures | Check & Tick             |
|----------|-------------------|--------------------------|----------|-------------------|--------------------------|
| 3        | 1                 | <input type="checkbox"/> | 26       | 1                 | <input type="checkbox"/> |
| 4        | 1                 | <input type="checkbox"/> | 28       | 1                 | <input type="checkbox"/> |
| 7        | 1                 | <input type="checkbox"/> | 29       | 1                 | <input type="checkbox"/> |
| 9        | 1                 | <input type="checkbox"/> | 30       | 1                 | <input type="checkbox"/> |
| 12       | 1                 | <input type="checkbox"/> | 31       | 2                 | <input type="checkbox"/> |
| 13       | 1                 | <input type="checkbox"/> | 32       | 1                 | <input type="checkbox"/> |
| 15       | 1                 | <input type="checkbox"/> | 33       | 1                 | <input type="checkbox"/> |
| 17       | 1                 | <input type="checkbox"/> | 34       | 2                 | <input type="checkbox"/> |
| 18       | 10                | <input type="checkbox"/> | 35       | 1                 | <input type="checkbox"/> |
| 20       | 1                 | <input type="checkbox"/> | 36       | 1                 | <input type="checkbox"/> |
| 22       | 1                 | <input type="checkbox"/> | 37       | 1                 | <input type="checkbox"/> |
| 23       | 1                 | <input type="checkbox"/> | 38       | 2                 | <input type="checkbox"/> |
| 24       | 5                 | <input type="checkbox"/> |          |                   |                          |

## 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 ID card/ Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments Statutory/Regulatory Authorities, Public Sector Undertakings Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

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

1. Passport / Voters Identity Card / Ration Card /Registered Lease or Sale

Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks / Scheduled Co-Operative Bank / Multinational Foreign Banks / Gazetted Officer / Notary public / Elected representatives to the Legislative Assembly / Parliament/ Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments Statutory/Regulatory Authorities, Public Sector Undertakings Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or 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. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FIIs, Mfs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

### E. List of people authorized to attest the documents:

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

Name of the Trading Member : **Fortune Capital Services Private Limited**

SEBI Registration No. : INZ000201438

NSE : NSE Code No. 14572

BSE : BSE Clearing No. 6524

MCX : MCX ID No. 16765

Registered office address : **M/s. Fortune Capital Services Private Ltd.,**  
 "Kochar Technology Park"  
 6th Floor, SP 31-A, 1st Cross Road,  
 Ambattur Industrial Estate,  
 Ambattur, Chennai – 600 058.  
 Phone : 044- 6132 9696 E-Mail : ftc@ftconline.in  
 Website: www.ftconline.in

Compliance officer name : **D. Meenambal**  
 phone no : 044- 6132 9696  
 e-mail id : compliance@flattrade.in

Managing Director name : **K. Narayana Moorthy**  
 phone no. : 044- 6132 9696  
 e-mail id : ftc@ftconline.in

*For any grievance / dispute please contact Fortune Capital Services Private Limited at the above address or email id- ftc@ftconline.in and Phone no. 91- 44 6132 9696. In case not satisfied with the response, please contact the concerned exchange(s) at*

**National Stock Exchange of India Ltd. (NSE)**

Ph : (022) 26598190  
 Fax : (022) 26598191  
 E-mail : ignse@nse.co.in

**Multi Commodity Exchange of India Ltd. (MCX)**

Ph : (022) 6731 8888 Fax : (022) 6649 4151  
 E-mail : grievance@mcxindia.com  
 Website : www.mcxindia.com

**Bombay Stock Exchange Ltd. (BSE)**

Ph : (022) 2272 1233 / 34  
 Fax : (022) 2272 3677  
 E-mail : is@bseindia.com

**Indian Commodity Exchange Ltd. (ICEX)**

Ph : (022) 40381546  
 E-mail : grievance@icexindia.com  
 Website : www.icexindia.com

**Central Depository Services (India) Ltd (CDSL)** Ph : (022) 2272 3333 E-mail : complaints@cdslindia.com



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

**Important Instruction :**

- 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**

(To be filled by financial institution)

Application Type \*

☐ New ☐ Update

KYC Number

(Mandatory for KYC update request)

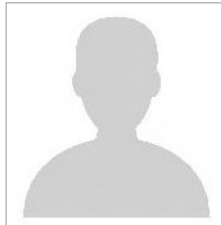
Account Type \*

☐ 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"/>                                                                                  |
| Maiden name (If any*)                             | <input type="text"/>                                                          | <input type="text"/>                                                          | <input type="text"/>                                                                                  |
| Father / Spouse name *                            | <input type="text"/>                                                          | <input type="text"/>                                                          | <input type="text"/>                                                                                  |
| Mother name *                                     | <input type="text"/>                                                          | <input type="text"/>                                                          | <input type="text"/>                                                                                  |
| Date of Birth *                                   | <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"/> ) |                                                                                                       |
| Residential Status*                               | <input type="checkbox"/> Resident Individual                                  | <input type="checkbox"/> Non Resident Individual                              |                                                                                                       |
|                                                   | <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 categorised                                   |                                                                               |                                                                                                       |

**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 refer instruction D at the end)

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

|                   |                                                                           |                                          |                                        |                                            |                                      |
|-------------------|---------------------------------------------------------------------------|------------------------------------------|----------------------------------------|--------------------------------------------|--------------------------------------|
| Address Type*     | <input type="checkbox"/> Residential / Business                           | <input type="checkbox"/> Residential     | <input type="checkbox"/> Business      | <input type="checkbox"/> Registered Office | <input type="checkbox"/> Unspecified |
| Proof of Address* | <input type="checkbox"/> Passport                                         | <input type="checkbox"/> Driving Licence | <input type="checkbox"/> UID (Aadhaar) |                                            |                                      |
|                   | <input type="checkbox"/> Voter Identity card                              | <input type="checkbox"/> NREGA Job card  | <input type="checkbox"/> Others        | <input type="text"/>                       |                                      |
| Address           | <input type="checkbox"/> Simplified Measures Account - Document Type code | <input type="text"/>                     |                                        |                                            |                                      |

|           |                      |                  |                      |                        |                      |
|-----------|----------------------|------------------|----------------------|------------------------|----------------------|
| Line 1*   | <input type="text"/> |                  |                      |                        |                      |
| Line 2    | <input type="text"/> |                  |                      |                        |                      |
| Line 3    | <input type="text"/> |                  |                      |                        |                      |
| District* | <input type="text"/> | Pin / Post Code* | <input type="text"/> | State / U.T. Code*     | <input type="text"/> |
|           |                      |                  |                      | ISO 3166 Country Code* | <input type="text"/> |



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

**General Instructions :**

- Fields marked with '\*' are mandatory fields.
- Tick '☑' wherever applicable.
- Self-Certification of documents is mandatory.
- Please fill the form in English and in BLOCK Letters.
- Please fill all dates in DD-MM-YYYY format.
- 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.
- KYC number of applicant is mandatory for updation of KYC details.
- For particular section update, please tick (☑) in the box available before the section number and strike off the sections not required to be updated.
- 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**

- 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.
- 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**

- 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**

- If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.
- 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**

- 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.
- State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 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**

- 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.
- In case of multiple correspondence / local addresses, Please fill '**Annexure A1**'

**F Clarification / Guidelines on filling 'Contact details' section**

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

**G Clarification / Guidelines on filling 'Related Person details' section**

- Provide KYC number of related person if available.

**H Clarification / Guidelines on filling 'Related Person details Proof of Identity [PoI] of Related Person' section**

- 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   |
| Chattisgarh            | 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           |                                              |              |





## Additional KYC Form for Opening a Demat Account

## For Individuals

|                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                              |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|  <b>FORTUNE</b><br>CAPITAL SERVICES PVT LTD<br>ALWAYS ON YOUR SIDE | <b>Fortune Capital Services Private Limited</b><br>Depository Participant with CDSL DP SEBI Regn No. IN-DP-CDSL-729-2014<br>Regd. Office : "Kochar Technology Park", 6th Floor, SP 31-A, 1st Cross Road, Ambattur Industrial Estate,<br>Ambattur, Chennai – 600 058. Phone : 044 - 6132 9696 Email : ftc@ftconline.in Web : www.ftconline.in |  |
|                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                              |  |

(To be filled by the Depository Participant)

|                           |   |      |   |   |   |   |   |   |           |  |  |  |
|---------------------------|---|------|---|---|---|---|---|---|-----------|--|--|--|
| Application Form No.      |   | Date |   |   |   |   |   |   |           |  |  |  |
| DP Internal Reference No. |   |      |   |   |   |   |   |   |           |  |  |  |
| DP ID                     | 1 | 2    | 0 | 8 | 0 | 3 | 0 | 0 | Client ID |  |  |  |

(To be filled by the applicant in **BLOCK LETTERS** in English)

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

**Holders Details**

|                           |  |     |  |  |  |  |  |  |  |  |  |
|---------------------------|--|-----|--|--|--|--|--|--|--|--|--|
| Sole/ First Holder's Name |  | PAN |  |  |  |  |  |  |  |  |  |
|                           |  | UID |  |  |  |  |  |  |  |  |  |
| Second Holder's Name      |  | PAN |  |  |  |  |  |  |  |  |  |
|                           |  | UID |  |  |  |  |  |  |  |  |  |
| Third Holder's Name       |  | PAN |  |  |  |  |  |  |  |  |  |
|                           |  | UID |  |  |  |  |  |  |  |  |  |

|               |  |
|---------------|--|
| <b>Name *</b> |  |
|---------------|--|

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

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

| Status                                    | Sub - Status                                                                                                                                                                                                                                                                                                                                                                                                       |
|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Individual       | <input type="checkbox"/> Individual Resident<br><input type="checkbox"/> Individual Director's Relative<br><input type="checkbox"/> Individual Promoter<br><input type="checkbox"/> Individual Margin Trading A/c (MANTRA)<br><input type="checkbox"/> Individual - Director<br><input type="checkbox"/> Individual HUF / AOP<br><input type="checkbox"/> Minor<br><input type="checkbox"/> Others (specify) _____ |
| <input type="checkbox"/> NRI              | <input type="checkbox"/> NRI Repatriable<br><input type="checkbox"/> NRI Repatriable Promoter<br><input type="checkbox"/> NRI - Depository Receipts<br><input type="checkbox"/> NRI Non-Repatriable<br><input type="checkbox"/> NRI Non-Repatriable Promoter<br><input type="checkbox"/> Others (specify) _____                                                                                                    |
| <input type="checkbox"/> Foreign National | <input type="checkbox"/> Foreign National<br><input type="checkbox"/> Foreign National - Depository receipts<br><input type="checkbox"/> Others(specify) _____                                                                                                                                                                                                                                                     |

**Details of Guardian ( Incase the account holder is a minor)**

|                                 |  |     |  |
|---------------------------------|--|-----|--|
| Guardian's Name                 |  | PAN |  |
| Relationship with the Applicant |  |     |  |

|                                                                                                                                                                                                                                |                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| I / We instruct the DP to receive each and every credit in my / our account<br>(If not marked, the default option would be "Yes")                                                                                              | [ Automatic Credit]<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                      |
| I/We would like to instruct the DP to accept all the pledge instructions in my / our account without any other further instruction from my / our end<br>(If not marked, the default option would be "No")                      | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                             |
| Account Statement Requirement                                                                                                                                                                                                  | <input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly |
| I / We request you to send Electronic Transaction-cum-Holding statement at the email ID                                                                                                                                        | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                             |
| I / We would like to receive the Copy of Charges for Depository Services – Schedule A & Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories.                          | <input type="checkbox"/> Physical <input type="checkbox"/> Electronic                                                                                                                |
| I / We would like to share the email ID with the RTA                                                                                                                                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                             |
| I / We would like to receive the Annual Report<br>(Tick the applicable box. If not marked, the default option would be in Physical)                                                                                            | <input type="checkbox"/> Physical <input type="checkbox"/> Electronic<br><input type="checkbox"/> Both Physical and Electronic                                                       |
| I/We wish to receive dividend / interest directly in to my/our bank account given below through ECS? (If not marked, the default option would be 'Yes')<br>[ECS is mandatory for locations notified by SEBI from time to time] | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                             |

**Bank Details (Dividend Bank Details) :**

|                               |                                                                                                                   |  |  |  |  |         |  |  |  |  |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------|--|--|--|--|---------|--|--|--|--|
| Bank Code (9 digit MICR code) |                                                                                                                   |  |  |  |  |         |  |  |  |  |
| IFS Code (11 character)       |                                                                                                                   |  |  |  |  |         |  |  |  |  |
| Account Number                |                                                                                                                   |  |  |  |  |         |  |  |  |  |
| Account Type                  | <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Others (Specify) _____ |  |  |  |  |         |  |  |  |  |
| Bank Name                     |                                                                                                                   |  |  |  |  |         |  |  |  |  |
| Branch Name                   |                                                                                                                   |  |  |  |  |         |  |  |  |  |
| Bank Branch Address           |                                                                                                                   |  |  |  |  |         |  |  |  |  |
|                               | City                                                                                                              |  |  |  |  | State   |  |  |  |  |
|                               | Country                                                                                                           |  |  |  |  | Pincode |  |  |  |  |

Submit Bank proof as per following :

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

**Other Details**
**Gross Annual Income Details**

|                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Income Range per annum :</b> <input type="checkbox"/> Up to Rs.1 Lac <input type="checkbox"/> Rs.1-5 Lac <input type="checkbox"/> Rs.5-10 Lac <input type="checkbox"/> Rs.10-25 Lac <input type="checkbox"/> More than Rs.25 Lacs |                                                                                                                                                                                                                                                                                                                                                              |
| <b>Networth as on (date)</b> _____ (Rs. _____) (Net worth should not be older than 1 year)                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                              |
| <b>Occupation</b><br>(Please tick any one)                                                                                                                                                                                           | <input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture<br><input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others (Specify) _____ |
| Please Tick, if Applicable                                                                                                                                                                                                           | <input type="checkbox"/> Politically Exposed Person (PEP)    / <input type="checkbox"/> Related to a Politically Exposed Person (RPEP)                                                                                                                                                                                                                       |
| Any other information : _____                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                              |

|                                                                                                           |                                                                                                                                                                                                                                                      |                                                          |                                                             |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------|
| Account to be operated through Power of Attorney (POA)                                                    |                                                                                                                                                                                                                                                      | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                             |
| <b>SMS Alert Facility</b><br>Refer to Terms & Conditions given as <b>Annexure - 2.4</b>                   | Mobile No. +91 _____<br>[Mandatory, if you are giving Power of Attorney (POA)]<br>(If POA is not granted & you do not wish to avail of this facility, cancel this option)                                                                            |                                                          | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| Transactions Using Secured Texting Facility (TRUST),<br>Refer to Terms & Conditions <b>Annexure - 2.6</b> | I wish to avail the TRUST facility Using the Mobile number registered for SMS Alert Facility. I have read and understood the Terms and Conditions _____<br>prescribed by CDSL for the same. <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                          |                                                             |
|                                                                                                           | I/We wish to register the following clearing member Ids under my/our below mentioned BO ID registered for TRUST                                                                                                                                      |                                                          |                                                             |
|                                                                                                           | Stock Exchange Name/ID                                                                                                                                                                                                                               | Clearing Member Name                                     | Clearing Member ID (Optional)                               |
|                                                                                                           | NSE                                                                                                                                                                                                                                                  | FORTUNE CAPITAL SERVICES PVT LTD                         | 14572                                                       |
| BSE                                                                                                       | FORTUNE CAPITAL SERVICES PVT LTD                                                                                                                                                                                                                     | 6524                                                     |                                                             |
| <b>Easi</b>                                                                                               | To register for <b>easi</b> , please visit CDSL's website : <a href="http://www.cdslindia.com">www.cdslindia.com</a><br><b>Easi</b> allows a BO to view his ISIN balances, transactions and value of the Portfolio online.                           |                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No    |

## Nomination Form

**[Annexure A to SEBI circular No. SEBI/HO/MIRSD/RTAMB/CIR/P/2021/601 dated July 23, 2021 on Mandatory Nomination for Eligible Trading and Demat Accounts]**

|                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----------------------------------------------------------------------|---|---|---|---|---|------------------------------------------|----|--|--|--|------------------------------------------------------------------------------------------|--|--|-----------|--|------------------------------------------|--|--|--|--|--|--|--|--|--|
| <b>Fortune Capital Services Private Limited</b><br>Regd. Office : "Kochar Technology Park", 6th Floor, SP 31-A, 1st Cross Road,<br>Ambattur Industrial Estate, Ambattur, Chennai – 600 058.<br>Phone : 044 - 6132 9696 Email : ftc@ftconline.in Web : www.ftconline.in |  |                                                                                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  | <b>FORM FOR NOMINATION</b><br>(To be filled in by individual applying singly or jointly) |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| Date                                                                                                                                                                                                                                                                   |  | D                                                                                                                                                                                                                                                                                                                                                                      | D | M                                                                     | M | Y | Y | Y | Y | UCC/ DP                                  | ID |  |  |  |                                                                                          |  |  | Client ID |  |                                          |  |  |  |  |  |  |  |  |  |
| I/We wish to make a nomination. [ As per details given below ]                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| <b>Nomination Details</b>                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| <b>Nomination can be made upto three nominees in the account.</b>                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   | <b>Details of 1<sup>st</sup> Nominee</b> |    |  |  |  | <b>Details of 2<sup>nd</sup> Nominee</b>                                                 |  |  |           |  | <b>Details of 3<sup>rd</sup> Nominee</b> |  |  |  |  |  |  |  |  |  |
| 1                                                                                                                                                                                                                                                                      |  | Name of the nominee(s) (Mr./Ms.)                                                                                                                                                                                                                                                                                                                                       |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 2                                                                                                                                                                                                                                                                      |  | Share of each Nominee                                                                                                                                                                                                                                                                                                                                                  |   | Equally<br><small>[If not equally, please specify percentage]</small> |   |   |   |   |   | %                                        |    |  |  |  | %                                                                                        |  |  |           |  | %                                        |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                        |  | Any odd lot after division shall be transferred to the first nominee mentioned in the form.                                                                                                                                                                                                                                                                            |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 3                                                                                                                                                                                                                                                                      |  | Relationship With the Applicant ( If Any )                                                                                                                                                                                                                                                                                                                             |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 4                                                                                                                                                                                                                                                                      |  | Address of Nominee(s)<br><br>City / Place:<br>State & Country:                                                                                                                                                                                                                                                                                                         |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                        |   | PIN Code                                                              |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 5                                                                                                                                                                                                                                                                      |  | Mobile / Telephone No. of nominee(s)                                                                                                                                                                                                                                                                                                                                   |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 6                                                                                                                                                                                                                                                                      |  | Email ID of nominee(s)                                                                                                                                                                                                                                                                                                                                                 |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 7                                                                                                                                                                                                                                                                      |  | <b>Nominee Identification details-</b><br>[Please tick any one of following and provide details of same]<br><input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN<br><input type="checkbox"/> Aadhaar <input type="checkbox"/> Savings Bank account no. <input type="checkbox"/> Proof of Identity<br><input type="checkbox"/> Demat Account ID |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| Sr. Nos. 8 - 14 should be filled only if nominee(s) is a minor:                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 8                                                                                                                                                                                                                                                                      |  | Date of Birth {in case of minor nominee(s)}                                                                                                                                                                                                                                                                                                                            |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 9                                                                                                                                                                                                                                                                      |  | Name of Guardian (Mr./Ms.) {in case of minor nominee(s)}                                                                                                                                                                                                                                                                                                               |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 10                                                                                                                                                                                                                                                                     |  | Address of Guardian(s)<br><br>City / Place:<br>State & Country:                                                                                                                                                                                                                                                                                                        |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                        |   | PIN Code                                                              |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 11                                                                                                                                                                                                                                                                     |  | Mobile / Telephone no of Guardian                                                                                                                                                                                                                                                                                                                                      |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |
| 12                                                                                                                                                                                                                                                                     |  | Email ID of Guardian                                                                                                                                                                                                                                                                                                                                                   |   |                                                                       |   |   |   |   |   |                                          |    |  |  |  |                                                                                          |  |  |           |  |                                          |  |  |  |  |  |  |  |  |  |

|                               |                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                     |  |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------|--|
| 13                            | Relationship of Guardian with nominee                                                                                                                                                                                                                                                                                                                                    |  |                                                                                     |  |
| 14                            | <b>Guardian Identification details--</b><br>[Please tick any one of following and provide details of same]<br><input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN<br><input type="checkbox"/> Aadhaar <input type="checkbox"/> Savings Bank account no. <input type="checkbox"/> Proof of Identity<br><input type="checkbox"/> Demat Account ID |  |                                                                                     |  |
| Name(s) of holder(s)          |                                                                                                                                                                                                                                                                                                                                                                          |  | Signature(s) of holder*                                                             |  |
| Sole / First Holder (Mr./Ms.) |                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |
| Second Holder (Mr./Ms.)       |                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |
| Third Holder (Mr./Ms.)        |                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |

\* Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature

**Note:**

This nomination shall supersede any prior nomination made by the account holder(s), if any.

The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

### Declaration Form for opting out of nomination

**[Annexure B to SEBI circular No. SEBI/HO/MIRSD/RTAMB/CIR/P/2021/601 dated July 23, 2021 on Mandatory Nomination for Eligible Trading and Demat Accounts]**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |   |   |   |   |   |   |   |   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---|---|---|---|---|---|---|---|
| To                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Date | D | D | M | M | Y | Y | Y | Y |
| <b>Fortune Capital Services Private Limited</b><br>Regd. Office : "Kochar Technology Park", 6th Floor, SP 31-A, 1st Cross Road,<br>Ambattur Industrial Estate, Ambattur, Chennai – 600 058.<br>Phone : 044 - 6132 9696 Email : ftc@ftconline.in Web : www.ftconline.in                                                                                                                                                                                                                                                                                               |      |   |   |   |   |   |   |   |   |
| UCC/DP ID                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |      |   |   |   |   |   |   |   |   |
| Client ID (only for Demat account)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |   |   |   |   |   |   |   |   |
| Sole/First Holder Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      |   |   |   |   |   |   |   |   |
| Second Holder Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |   |   |   |   |   |   |   |   |
| Third Holder Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |   |   |   |   |   |   |   |   |
| I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account. |      |   |   |   |   |   |   |   |   |
| <b>Name and Signature of Holder(s)*</b><br><br><div style="display: flex; justify-content: space-between;"> <div>1. </div> <div>2. </div> <div>3. </div> </div>                                                                                                                                           |      |   |   |   |   |   |   |   |   |

\* Signature of witness, along with name and address are required, if the account holder affixes thumb impression,

1. The nomination can be made only by Individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non-Individuals including society, trust, body corporate, partnership firm, karta of Hindu Undivided Family (HUF), Holder of Power of attorney cannot nominate. If the account is held jointly, all the joint holders must sign the nomination form.
2. Nomination can be made in favour of a Minor, in that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner(s). Guardian should be someone other than the holders of the beneficiary account.
3. The Nominee shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a Family or a Power of attorney holder. A Non-resident Indian (NRI) can be Nominee subject to the RBI Regulations in force, from time to time.
4. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly the nomination in respect of the securities shall stand terminated upon transfer of the securities.
5. Transfer of securities in favour of a nominee shall be valid discharge by the Depository or Depository Participant against the legal heirs of the beneficial owner(s).
6. The cancellation of Nomination can be made by the same persons who made the original nomination. Non-individuals including society, trust, body corporate, partnership firm, karta of Hindu Undivided Family (HUF), Holder of Power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all the joint holders must sign the cancellation form.
7. On cancellation of nomination, the nomination shall stand rescinded and the Depository / Depository Participant shall not be under any obligation to transfer the securities in favour of the Nominee.
8. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of shares for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
9. In case you do not wish to nominate, we request you to tick the first option.

**(To be filled by DP)**

Nomination accepted and registered vide Registration No. \_\_\_\_\_ dated \_\_\_\_\_

For **FORTUNE CAPITAL SERVICES PVT. LTD.**

Authorised Signatory

**DECLARATIONS**

I/We have received and read the Rights and Obligations document of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I / We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action. In case of non-resident account, I/We also declare that I/We have complied and will continue to comply with FEMA regulations.

I/We hereby confirm that I/We will act on my/our own behalf and will continue to act to my/our behalf unless otherwise communicated in writing.

**DECLARATIONS RE : PREVENTION OF MONEY LAUNDERING**

Prevention of Money Laundering Act, 2002 (hereinafter referred to as "Act") came into effect from July 1, 2005 vide Notification No. GSR 438(E) dated July, 1 2005 issued by Department of Revenue, Ministry of Finance, Government of India. Further SEBI vide its circular reference number ISD/CIR/RR/AML/1/06 dated January 18, 2006 mandated that all intermediaries should formulate and implement a proper policy framework as per the guidelines on anti money laundering measures and also to adopt a Know Your Customer (KYC) policy. The intermediaries may, according to their requirements specify additional disclosures to be made by clients for the purpose of identifying , monitoring and reporting incidents of money laundering and suspicious transactions undertaken by clients. SEBI also issued another circular reference no. ISD/CIR/RR/AML/2/06 dated March 20, 2006 advising all intermediaries to take necessary steps to ensure compliance with the requirement of section 12 of the Act, inter alia, maintenance and preservation of records and reporting of information relating to cash and suspicious transactions to Financial Intelligence Unit - India (FIU-IND), New Delhi. The Investor should ensure that the amount invested in the securities and represented as credit in their demat account is through legitimate sources only and does not involve and is not designated for the purpose of any contravention or evasion of the provisions of the Income Tax Act, Prevention of Money Laundering Act, Prevention of Corruption Act and/or any other applicable law in force and also any laws enacted by the Government of India from time to time or any rules, regulations, notifications or directions issued thereunder.

To ensure appropriate identification of the customer(s) under its KYC policy and with a view to monitor transactions, FCSPL DP reserves the right to seek information, record customer's telephonic calls and/or obtain and retain documentation for establishing the identity of the customer, proof of residence, source of funds, etc. It may re-verify identity, seek and obtain any incomplete or additional information for this purpose.

|            |                                                                                     |                                                                                     |                                                                                       |
|------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Signatures |  |  |  |
|            | <b>First / Sole Holder</b>                                                          | <b>Second Holder</b>                                                                | <b>Third Holder</b>                                                                   |
| Name       |                                                                                     |                                                                                     |                                                                                       |

(Signatures should be preferably in blue ink).

## ANNEXURE - 2.4

### Terms And Conditions-cum-Registration Form for receiving SMS Alerts from CDSL [SMS Alerts will be sent by CDSL to Bos for all debits.]

#### Definitions:

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

1. "Depository" means Central Depository (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 - 400 001 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 account holders 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 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 from the 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](mailto:complaints@cdslindia.com). The BO is advised not to inform the service provider about such unauthorized debit to / transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.**
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.

**Fees:**

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

**Disclaimer:**

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

**Liability and Indemnity:**

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

**Amendments:**

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

**Governing Law and Jurisdiction:**

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

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. **I / We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.**

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

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

I/We am/ are aware that mere acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service.

I/We provide the following information for the purpose of **REGISTRATION / MODIFICATION** (Please cancel out what is not applicable)

|       |                                   |   |   |   |   |   |   |   |                                       |  |  |  |  |  |  |  |
|-------|-----------------------------------|---|---|---|---|---|---|---|---------------------------------------|--|--|--|--|--|--|--|
| BO ID | 1                                 | 2 | 0 | 8 | 0 | 3 | 0 | 0 |                                       |  |  |  |  |  |  |  |
|       | (Please write your 8 digit DP ID) |   |   |   |   |   |   |   | (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

Sole / First Holder

Second Holder

Third Holder

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

## Terms And Conditions for availing Transaction Using Secured Texting (TRUST) Service offered by CDSL

### 1. Definitions:

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

- i. "Depository" means Central Depository Services (India) Limited (CDSL)
  - ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.
  - iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
  - iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
  - v. "Third Party" means the operators with whom the Service Provider is having/will have an arrangement for providing SMS to the BO.
2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time . Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository.
  3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depository shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure of the service provider or network.
  4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
  5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
  6. The BO shall be responsible for submitting response to the 'Responsive SMS' within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for deregistration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
  7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
  8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.
  9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP.
  10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.

11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP.
13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.
17. Indemnity:  
In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.
18. Disclaimer:  
Depository shall be absolved of any liability in case:-
  - a. There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
  - b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such service provider.
  - c. There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.



Signatures

Sole / First Holder

Second Holder

Third Holder

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

Date : \_\_\_\_\_

## TRADING ACCOUNT RELATED DETAILS

### A. BANK DETAILS (Please attach separate sheet & documentary proof if more than two Bank accounts has to be registered)

|                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                                                                                                 |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------|
| Bank Name           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Bank A/C Type</b> | <input type="checkbox"/> Savings / <input type="checkbox"/> Current /<br><input type="checkbox"/> Others-in case Of NRI/NRE/NRO |
| Bank A/C Number*    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                                                                                                 |
| Bank Branch Address |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                                                                                                 |
| MICR                | <div style="display: flex; justify-content: space-between;"> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> </div> | RTGS/NEFT/IFSC       |                                                                                                                                 |

|                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                                                                                                 |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------|
| Bank Name           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Bank A/C Type</b> | <input type="checkbox"/> Savings / <input type="checkbox"/> Current /<br><input type="checkbox"/> Others-in case Of NRI/NRE/NRO |
| Bank A/C Number     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                                                                                                 |
| Bank Branch Address |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                                                                                                 |
| MICR                | <div style="display: flex; justify-content: space-between;"> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px;"></div> </div> | RTGS/NEFT/IFSC       |                                                                                                                                 |

\*Payment will be issued to the said Bank account by default unless & otherwise specified

### B. DEPOSITORY ACCOUNT(S) DETAILS (Attach Client Documentary Proof for each Client ID )

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

### C. TRADING PREFERENCES

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

| Exchanges    | NSE, BSE                                                                            |                                                                                     |                                                                                     | MCX                                                                                   |
|--------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| All Segments | Cash                                                                                | F&O                                                                                 | Currency                                                                            | Commodity Derivatives                                                                 |
|              |  |  |  |  |
|              |                                                                                     |                                                                                     |                                                                                     |                                                                                       |

If you do not wish to trade in any of segments please mention here

**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 AUTHORISED PERSON AND OTHER MEMBERS :**

|                                                                                                                   |                        |                           |                                                          |
|-------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|----------------------------------------------------------|
| If client is dealing through the Authorised Person, provide the following details :                               |                        |                           |                                                          |
| Authorised Person Name                                                                                            | SEBI Registration No.  | Registered Office Address | Phone / Fax Details                                      |
|                                                                                                                   |                        |                           |                                                          |
| Whether dealing with any other Members/ Authorised Person<br>If Yes, give details (Please Provide details of all) |                        |                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Member Name                                                                                                       | Authorised Person Name | Exchange                  | Client Code                                              |
|                                                                                                                   |                        |                           |                                                          |
| Details of disputes/dues pending from / to such Member/Authorised Person :                                        |                        |                           |                                                          |
|                                                                                                                   |                        |                           |                                                          |

**F. ADDITIONAL DETAILS :**

|                                                                                                                                                                            |                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Whether you wish to receive <b>contract note / communication</b> from Member in electronic form on your Email-id :                                                         |                                                                          |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                   | If Yes, Specify your email ID                                            |
| E-mail ID :                                                                                                                                                                |                                                                          |
| Whether you wish to avail of the facility of internet trading / wireless technology : (Please specify)                                                                     |                                                                          |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                   |                                                                          |
| Wish to receive Copy of Standard Documents like Rights & Obligations, Uniform Risk Disclosure Documents, Guidance Note detailing Do's and Don'ts & Policies and Procedures | <input type="checkbox"/> Electronic<br><input type="checkbox"/> Physical |

**OTHER DETAILS**
**1. Gross Annual Income Details (please specify) :**

|                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Income Range per annum : <input type="checkbox"/> Below Rs.1 Lac <input type="checkbox"/> Rs.1-5 Lac <input type="checkbox"/> Rs.5-10 Lac <input type="checkbox"/> Rs.10-25 Lac <input type="checkbox"/> > Rs.25 Lacs <b>(OR)</b> |                                                                                                                                                                                                                                                                                                                                                                                               |
| Networth as on (date) _____ (Rs. _____) (Net worth should not be older than 1 year)                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>2. Occupation</b><br>(Please tick any one and give brief details)                                                                                                                                                              | <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional<br><input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> House Wife <input type="checkbox"/> Student <input type="checkbox"/> Others (Specify _____) |
| Name of Employer/ Establishment                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                               |
| Designation                                                                                                                                                                                                                       | Period of Service :                                                                                                                                                                                                                                                                                                                                                                           |
| Address (Office)                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                               |
| Contact Details (Off.)                                                                                                                                                                                                            | Phone: _____ Fax: _____ Email: _____                                                                                                                                                                                                                                                                                                                                                          |
| <b>3. Please Tick, as Applicable</b>                                                                                                                                                                                              | <input type="checkbox"/> Politically Exposed Person (PEP) / <input type="checkbox"/> Related to a Politically Exposed Person (PEP)<br><input type="checkbox"/> Not a Politically Exposed Person (PEP) / <input type="checkbox"/> Not Related to a Politically Exposed Person (PEP)                                                                                                            |
| <b>4. Any other information:</b> _____                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>G. Investment /Trading Experience</b>                                                                                                                                                                                          | No Prior Experience <input type="checkbox"/> _____ years in Capital Market<br>_____ Years in other Investment related field                                                                                                                                                                                                                                                                   |

**H. INTRODUCER DETAILS (Optional) :**

|                             |                                                                                                                                          |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Name of the Introducer      |                                                                                                                                          |
| Status of the Introducer    | <input type="checkbox"/> Authorized Person / <input type="checkbox"/> Existing Client / <input type="checkbox"/> Others, please specify: |
| Address of the Introducer   |                                                                                                                                          |
| Phone no. of the Introducer |                                                                                                                                          |
| Signature of the Introducer |                                                                                                                                          |

|                                                 |  |                                                        |  |
|-------------------------------------------------|--|--------------------------------------------------------|--|
| <input type="checkbox"/> I /WE WISH TO NOMINATE |  | <input type="checkbox"/> I /WE DO NOT WISH TO NOMINATE |  |
| Name of the Nominee                             |  |                                                        |  |
| Relationship with the Nominee                   |  |                                                        |  |
| PAN of Nominee                                  |  | D.O.B. of Nominee                                      |  |
| Address & Phone No. of the Nominee              |  |                                                        |  |

|                                                   |  |
|---------------------------------------------------|--|
| <b>IF NOMINEE IS A MINOR, DETAILS OF GUARDIAN</b> |  |
| Name of Guardian                                  |  |
| Address & Phone No. of the Guardian               |  |
| Signature of the Guardian                         |  |

WITNESSES (Only applicable in case the account holder has made nomination)

Name : ..... Name : .....

Signature : ..... Signature : .....

Address : ..... Address : .....

**DECLARATION**

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

I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.

I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website, if any.

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

**Signature of Client**

Date : \_\_\_\_\_

**FOR OFFICE USE ONLY**

UCC Code allotted to the Client :

|                             | Documents verified<br>with Originals | Client Interviewed By | In-Person Verification<br>done by |
|-----------------------------|--------------------------------------|-----------------------|-----------------------------------|
| Name of the Employee        |                                      |                       |                                   |
| Employee Code               |                                      |                       |                                   |
| Designation of the employee |                                      |                       |                                   |
| Date                        |                                      |                       |                                   |
| Signature                   |                                      |                       |                                   |

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

For **FORTUNE CAPITAL SERVICES PRIVATE LIMITED**

**Authorised Signatory**

**Date .....**

**Seal/Stamp of the stock broker**

**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.

**CHARGES FOR DEPOSITORY SERVICES - SCHEDULE - A**

I/We agree to pay the charges as per the following for our Demat account effective \_\_\_\_\_ (dd/mm/yyyy)

| SERIAL. No. | CHARGE HEAD                                                                      | CHARGES                                                                                                                                                              |
|-------------|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.          | Annual Maintenance Charges                                                       | Nil                                                                                                                                                                  |
| 2.          | Documentation Charges                                                            | Rs. 175/- (If DDPI Registered)                                                                                                                                       |
| 3.          | Dematerialization Charges                                                        | Rs. 2/- per certificate plus courier charges of Rs.35/- per demat request for every 500 gms.                                                                         |
| 4.          | Debit Transaction charges<br>Market / Inter-depository                           | A flat charge of ₹20/- per debit transaction plus applicable GST                                                                                                     |
| 5.          | SLB Charges                                                                      | For Security Borrowing : Rs.25/- plus Depository charges<br>For Security Lending : Rs.25/- plus Depository charges                                                   |
| 6.          | Pledge Charges Creation/<br>Closure and<br>Confirmation of both /<br>Invocations | Rs.50/- per transaction / ISIN                                                                                                                                       |
| 7.          | Rematerialisation Charges                                                        | Rs.50/- per Certificate + Depository Charges                                                                                                                         |
| 8.          | Same Day Execution -<br>Per Instruction / Per Scrip                              | Rs.50/- or 0.025% whichever is higher.                                                                                                                               |
| 9.          | Off-market Charges                                                               | Rs.50/- per ISIN                                                                                                                                                     |
| 10.         | Failed / Rejected Transactions                                                   | Rs.30/- per transaction.                                                                                                                                             |
| 11.         | Demat Rejection Charges                                                          | Rs.35/- per rejection.                                                                                                                                               |
| 12.         | Adhoc / Non periodic<br>statement requests                                       | Rs.25/- per request upto 10 pages. Every additional 5 pages or a portion thereof will be charged at Rs.10/- plus courier charges.                                    |
| 13.         | E-Mail Statement                                                                 | Periodic Bills and Transactions statements and other communications will be sent by email only. Requests for Physical statements will be charged as mentioned above. |
| 14.         | Margin Pledge charges                                                            | Rs. 20 + GST                                                                                                                                                         |

|            |                                                                                     |                                                                                     |                                                                                       |
|------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Signatures |  |  |  |
|            | <b>First / Sole Holder</b>                                                          | <b>Second Holder</b>                                                                | <b>Third Holder</b>                                                                   |
| Name       |                                                                                     |                                                                                     |                                                                                       |

## TARIFF SHEET TRADING ACCOUNT

I / we agree to pay the charges as per following charges structure for our Trading account with you effective \_\_\_\_\_

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

| CHARGE HEAD        | Value Pack Scheme                                    |
|--------------------|------------------------------------------------------|
| Equity Intraday    | Nil                                                  |
| Equity Delivery    | Nil                                                  |
| Equity Futures     | Nil                                                  |
| Equity Options     | Nil                                                  |
| Currency Futures   | Nil                                                  |
| Currency Options   | Nil                                                  |
| Commodity Futures  | Nil                                                  |
|                    | Nil                                                  |
| Commodity Options  | Nil                                                  |
|                    |                                                      |
| Terms & Conditions | Digital Contract sent through email at free of cost. |

In addition to the brokerage charge the following charges will also be levied.

### Schedule of Charges:

- 1) STT, CTT, GST, Education and Higher Education Cess, as applicable will be levied.
- 2) Exchange charges as applicable from to time.
- 3) Stamp Duty-state wise stamp duty as applicable will be levied
- 4) SEBI charges @ 0.0001% on total turnover.
- 5) Statutory charges payable to Exchange / SEBI / Govt. Authorities etc.,

Signature  

Client Name \_\_\_\_\_

Date \_\_\_\_\_

## VOLUNTARY ADDITIONAL TARIFF SHEET – TRADING ACCOUNT

In addition to the CHARGES mentioned in the Tariff Sheet, the following charges will be levied, if the Services opted by the Client.

Please sign in the relevant boxes where you wish to opt the additional services and not chosen should be struck off by the client.

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

| Other Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Option Opted                                                                                                                      | Signature of the Client                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| In addition to Digital Contract, if the client requires Physical Contract Note shall be charged @ Rs.50/- per Exchange per Day.                                                                                                                                                                                                                                                                                                                                                                                        | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                          |  <b>22</b><br>4T   |
| Call & Trade /Offline Trade/Intraday Square Off of MIS/CO/BO Order :<br><br><b>Equity Intraday, FAO &amp; Currency Futures</b> – Rs.50/- plus GST per executed order or 0.01% of turnover plus GST whichever is lower.<br><br><b>Equity Delivery</b> - Rs.50/- plus GST per executed order or 0.1% of turnover plus GST whichever is lower.<br><br><b>Options (Future &amp; Currency)</b> - Rs.20/- plus GST per executed order.<br><br><b>Commodity (Future &amp; Options)</b> - Rs.50/- plus GST per executed order. | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                          |  <b>23</b><br>4T   |
| Non-Acceptance of MTF Pledge Requests by Clients – 0.5% of MTF value if < ₹1 lakh; 1% of MTF value if ≥ ₹1 lakh. If non-acceptance instances occur for more than 3 consecutive days in a calendar year, 5% of the non-accepted MTF value will be charged.                                                                                                                                                                                                                                                              | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                          |  <b>24</b><br>4T |
| Debit my trading account for Application charges.                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Physical Forms - Rs. 200/-+GST <input type="checkbox"/><br><br>Print the form from PDF - Rs. 200/- + GST <input type="checkbox"/> |                  |

Signature  **26**  
4T

Client Name \_\_\_\_\_

Date \_\_\_\_\_

## **VOLUNTARY / NON MANDATORY RIGHTS AND OBLIGATIONS OF STOCK BROKERS, SUB BROKERS AND CLIENTS**

These Voluntary / Non Mandatory Rights and Obligations enumerated below are in addition to the Mandatory Rights and Obligations of Stock Bokers, Sub – Brokers and Clients to ensure smooth functioning of the operations, the parties thereto have agreed to the following terms and conditions.

### **1. Digitally signed Contract Notes, Bills, Transaction Statements, Confirmation & Electronics Communication:**

l) The client hereby agrees and permits FCSPL to provide digitally signed contract notes through internet / email. The client also authorizes FCSPL to send Welcome Kit, Statements of Account, Statement of Margin, Funds and Securities, Ledgers, Bills, Collateral Statements, Daily Margin Statements, reports, notices, circulars, letters and other documents pertaining to the Trading Account on email address. For the sake of clarity all of the above documents are referred to as “**Digital Documents**”. The client acknowledges that once Digital Documents are mailed by FCSPL at their email address registered with it, it shall be deemed to have been received by the client and hence there will be no further requirement on the part of FCSPL to send the same physically in the paper based format to the client unless Digital Documents are rejected by the client’s email ID and is bouncing back to FCSPL. The client hereby acknowledges that he has read and understood the following points governing issuance of the Digital Documents by FCSPL.

- a) For the purpose of the above, the email id used would be the same as provided by the client in the Client Registration Form at the time of opening of an account or email id subsequently notified by the client in writing. Any change in the email id of the client shall be immediately intimated by the client to FCSPL.
- b) The client shall access the contract notes / confirmations of the trades executed on his behalf on the trade date electronically. The client understands that it is his responsibility to review all confirmations, contract notes and other communications including but not limited to margin and maintenance calls etc., All information contained therein shall be binding on the client if the client does not object, either in writing or electronic mail within 24 hours after any such documents are available to the client.
- c) Should the client experience any difficulty in opening a document electronically delivered by FCSPL, FCSPL may, on receipt of intimation from the client in that behalf, make the required delivery by any other electronic means (e-mail, electronic mail attachment or in the form of an available download from the back-office website) or in paper based format. Failure to advise FCSPL of such difficulty within twenty four (24) hours after delivery shall serve as an affirmation that client was able to receive and open the said document. The client hereby agrees to pay all such amounts that FCSPL may charge to cover the operational costs that FCSPL incurs in preparing and delivering the said communication, confirmation, contract notes, documents, reports and alerts.
- d) The client shall take all the necessary steps to ensure confidentiality and secrecy of the login name and password. Unless the client lodges a complaint with FCSPL as to his inability to access the system, it would be presumed that contract notes and all other documents have been properly delivered to the client.
- e) The client agrees that FCSPL fulfils its legal obligation to deliver to the client any such document if sent via electronic delivery and FCSPL has not received any report indicating bouncing back of such electronic delivery.
- f) The client shall complete the necessary formalities that are required under the provisions of the Information Technology Act, 2000 for getting the above facility. The client shall initially download the specified software or any other software specified by FCSPL from time to time on our computer and the same shall be used for receiving, viewing, storing the Electronic documents including but not limited to digital contract notes, bills. Ledgers, statements of funds and securities, collateral statements, daily margin statements, notices, reports, lettes, circulars, communications etc., that shall be sent by FCSPL from time to time in respect of the trades / transactions that have been executed by me / us through FCSPL.
- g) The client agrees not to receive the contract notes in paper form from FCSPL. Provided however that in case when FCSPL is not able to provide Contract Note to me / us through electronic medium due to any unforeseen events, FCSPL would ensure that the contract note is sent to me / us in physical form as per the time schedule stipulated in the bye-laws, Rules and Regulations of the Exchanges.
- h) The client agrees that as an alternative to the e-mail communication and / or in case of non-receipt of the electronic documents through e-mail he / she / they shall utilize the facility of accessing the website hosted by FCSPL to access the Electronic documents.

## II) Statement of Account in Digital Format:

FCSP may send the Statement of Trading Account or other statements, related notices, circulars, amendments and records and documents by whatever name called (herein after referred to as **"statements"**) to the client in electronic form on their registered e-mail ID. The client agrees and permits FCSP under the terms of this document to provide to the client, Statements through Internet (web based).

## III) Copy of Client Registration Documents:

FCSP may send the Client Registration documents viz., Account Opening Form, Mandatory and Voluntary Rights and Obligations, Risk Disclosure Document, Guidance Note, and a copy of any other document executed with the client (herein after referred to as **"Registration documents"**) to the client in electronic form. The client hereby agrees and permits FCSP under the terms of this document to provide to the client, the Registration documents through Internet (web based).

IV) Terms governing issue of digitally signed Contrcat Notes / Statement(s) for Trading Account, Client Registration Documents, **Digital Documents** and other documents (herein after collectively referred to as **"the Documents"**) in electronic form to your mail ID

---

(enter E-mail ID)

- a. The client undertakes to change the initial password of such e-mail account upon first login. The client shall take all necessary steps to ensure confidentiality and the secrecy of the login and password of such e-mail accounts. FCSP shall not be liable to or responsible for any breach of secrecy. Unless the client lodges a complaint with FCSP as to his / her / its inability to access the system, it would be presumed that the documents have been properly delivered. The client agrees that the Documents may be accessed by other entities in case the confidentiality / secrecy of the login name and password is compromised.
- b. The client agrees that FCSP shall not be responsible for non-receipt of Documents sent via electronic delivery due to change in / incorrect email address provided by the Client for the purpose or for any other reason which inter alia include insufficient space in the inbox of the client, technical reasons or malfunction of the clients computer system / server / internet connection etc., It shall be the responsibility of the client to intimate FCSP of any change in the client's email accounts.
- c. FCSP shall not be liable or responsible for any statement received from frauds or impostors or any consequences thereof and shall not be liable for any problem which arises at the client's computer network because of the client receiving any such statement from FCSP.
- d. FCSP agrees that in case of receipt of bounced back notification from all the email account(s), FCSP shall make required delivery by any other electronic means or available download from the back office website immediately thereafter. However the client agrees that FCSP shall not take cognizance of out of office / out of station auto replies and the client shall be deemed to have received such electronic mails.
- e. The client hereby agrees to intimate FCSP of any change in E-mail ID immediately.
- f. The client understands and agrees that FCSP shall be entitled to charge to the client fees / charges for sending such Documents. Such fees and charges shall be intimated to the client from time to time by FCSP.
- g. The client acknowledges and accepts that the internet is an inherently unreliable medium of communication and provision of services due to the public nature of the communication and that the accuracy, reliability and soundness of such means of communication and provision of services depends upon, amongst others, the service providers and the telephone, modem, cables, systems, facilities and the like used and operated from time to time by such providers and other participants. Client acknowledges and further accepts that as a result of such unreliability, there are risks associated in using such means of communication including the congestion, breakdown, interruption or failure of transmission of the internet service or any communication equipment or facilities, errors, omissions or delay in the transmission and receipt of data and information.
- h. There are also other risks involved such as in the unauthorized access, tampering, modification or alteration of the service and / or the system, components and software used or comprised in the service which may result in the use, manipulation, retrieval or the theft or loss of data and information, including client personal data. The client agrees that the stock broker shall not be liable / responsible for such matters and resultant losses under any circumstances.



Signature of Client

## **2. Order Placement Instructions:**

I understand that you require written instructions from me for placing / modifying / cancelling orders. However, since it is not practical for me to give written instructions for placing / modifying / cancelling order. Even if I have facility to trade online through Internet and wireless technology, I may have to place orders by physically visiting / calling / E-mailing the FCSPL in case of breakdown of internet connectivity or other similar reasons.

I hereby request you to kindly accept my, my authorized representative or mandate holder's verbal orders / instructions, in person or over phone and execute the same. I understand the risk associated with placement of verbal orders and accept the same. I shall not disown orders under the plea that the same were not placed by me provided I am sent ECN / Physical contract notes or trade confirmations through SMS and other modes. I indemnify FCSPL and its employees against all losses, damages, actions which you may suffer or face, as a consequence of adhering to and carrying out my instructions for orders placed verbally.

## **3. PMLA Declaration:**

I declare that I have read and understood the contents and the provisions of the PMLA Act 2002, which were also explained to me by FCSPL officials. I further declare that I shall adhere to all the provisions of PMLA Act 2002. I further undertake and confirm that;

I do not have any links with any known criminal.

I am a genuine person and not involved or indulge knowingly or assisted, directly or indirectly, in any process or activity connected with the proceeds of crime nor I am a party to it. The investment money is derived from proper means and does not involve any black or Hawala money in any manner.

## **4. Not to act as Un-registered Sub-broker:**

I undertake not to act as unregistered Sub-broker and deal only for myself and not on behalf of other clients. Incase, FCSPL perceives that I am acting as an unregistered sub-broker, FCSPL has the right to immediately suspend my trading account and close all open positions and adjust the credits (across all segments) against the dues owned by me to FCSPL without the requirement of any notice from FCSPL. Further, FCSPL has the right to inform the concerned regulatory authorities about the same. In aforesaid eventuality, I agree and undertake to indemnify FCSPL from any loss / damage / claim arising out of such activity.

## **5. Indemnification:**

I hereby indemnify and hold FCSPL, its Directors and employees harmless from and against all claims, demands, actions, proceedings, losses, damages, liabilities, charges and / or expenses that are occasioned or may be occasioned to the FCSPL directly or indirectly, relating to bad delivery of shares / securities and / or third party delivery, whether authorized or unauthorized and fake / forged / stolen shares / securities / transfer documents introduced or that may be introduced by or through me during the course of my dealings / operations on the Exchanges and / or proof of address, identity and other supporting / documents provided by me at the time of registration and / or subsequently.

### **Indemnity of Joint Holdings:**

I hereby agree to indemnify and hold the FCSPL harmless from any claims, demands, actions, proceedings, losses, damages, liabilities, charges, and / or expenses arising from transactions in securities held jointly by me with any other person or persons, if any.

## **6. No Market Manipulation:**

I undertake not to execute transactions, either singly or in concert with other clients, which may be viewed as manipulative trades viz. artificially raising, depressing or maintaining the price, creation of artificial volume, synchronised trades, cross trades, self trades etc., or which could be termed as manipulative or fraudulent trades by SEBI / Exchanges. Incase, I am found to be indulging in such activities, FCSPL has every right to inform the Exchange / SEBI / other regulatory authority of the same and suspend / close my trading account.

## 7. Not Debarred by any Regulator:

I confirm and declare that there is no bar on me imposed by any Exchange or any Regulatory and / or Statutory authority to deal in securities directly or indirectly. I agree to inform FCSPL, in writing, of any regulatory action taken by any Exchange or Regulatory / Statutory authority on me in future. In case, I fail to inform the same and FCSPL on its own comes to know of such action, FCSPL has the right to suspend / close my trading account and refuse to deal with me. Also, FCSPL can at its sole discretion, close all the open positions and liquidate collaterals to the extent of debit balances, without any notice to me.

## 8. Errors & Omissions:

I understand and agree that inadvertent errors may occur, while executing orders placed by me. In such circumstances FCSPL shall make all reasonable efforts to rectify the same and ensure that I am not put to any monetary loss. I understand and agree that I shall not hold FCSPL responsible beyond this and claim additional damages / loss. I understand and agree that my request to modify or cancel the order shall not be deemed to have been executed unless and until the same is confirmed by FCSPL.

## 9. Mutual Fund Service System (MFSS) Facility:

I am interested in availing the MFSS facility of the Exchange for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the MFSS of the Exchange. For the purpose of availing the MFSS facility, I state that Know Your Client details as submitted by me for the opening of Trading Account may be considered for the purpose of MFSS and I / we further confirm that the details contained in same remain unchanged as on date.

I am willing to abide by the terms and conditions as has been specified and as may be specified by the Exchange from time to time in this regard. I shall ensure also compliance with the requirements as may be specified from time to time by SEBI and AMFI.

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



**Signature of Client**

## Maintenance of Running A/c.- Letter of Authority

To

M/s. Fortune Capital Services Private Ltd.,  
 "Kochar Technology Park"  
 6th Floor, SP 31-A, 1st Cross Road,  
 Ambattur Industrial Estate,  
 Ambattur, Chennai – 600 058.

Dear Sir,

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

I / we request you to maintain running balance in my account and retain the credit balance in my / our account and to use the unused funds towards my / our margin pay-in / other future obligation(s) at any segment(s) of any or all the Exchange(s) / Clearing Corporation unless I / we instruct you otherwise. I / we further authorize FCSPL to settle the funds atleast once in a calendar quarter / month as specified by me below in accordance with regulations in force.

Quarterly ☐

Monthly ☐

In case, I / we have an outstanding obligation on the settlement date, you may retain the requisite funds towards such obligations and may also retain the funds towards margin liability as on the date of settlement of running account, in all segments and additional margins (maximum upto 125% of total margin liability on the day of settlement). The margin liability shall include the end of the day margin requirement excluding the MTM and pay-in obligation, there, you may retain 225% of the total margin liability in all the segments across the exchanges.

I / We hereby authorise you to settle the entire credit balance in case there is no transactions in the 30 calendar days since the last transaction within three working days irrespective of the date when the running account was previously settled.

I / We hereby authorise you to liquidate / close out all or any of my / our positions for non-payment of margins or other account, outstanding debts etc. I / We agree to bear any and all losses and financial charges on account of such liquidation / close-out.

I / We agree not to hold you liable or responsible for delay or default in performance of your obligations due to contingencies beyond your control such as fire, flood, civil commotion, earthquake, riots, war, strikes, failure of systems, failure of internet links, Government / regulatory actions or any such other contingencies which may be beyond your control. Government / regulatory actions or any such other contingencies which may be beyond your control.

I / we agree to continue with the authorization to maintain a running account till such time the same is expressly revoked. I / we understand that FCSPL shall act upon such revocation request upon receipt of the original revocation request.

**REF:** SEBI Circular Ref. No.: MIRSD/SE/Cir-19/2009 dated December 03, 2009, SEBI/HO/MIRSD/MIRSD2/CIR/P2016/95 dated September 26, 2016, and SEBI/HO/MIRSD/DOP/P/CIR/2021/577 Dated June 16, 2021, regarding quarterly/ monthly settlement of running accounts of clients.

Yours faithfully,

Signature  29/4/21

Client Name \_\_\_\_\_ Date \_\_\_\_\_

## **Policy for Voluntary Freezing/Blocking of Online Access to Trading Accounts Due to Suspicious Activities**

(Ref: SEBI Circular No. SEBI/HO/MIRSD/POD-1/P/CIR/2024/4 Dated January 12, 2024)

In reference to the SEBI circular mentioned above, and subsequent circulars issued by NSE, BSE, and MCX, we have formulated this policy for voluntary freezing/blocking of online access to trading accounts by clients on account of suspicious activities.

### **Applicability:**

This policy applies to clients enabled for Internet/Mobile Trading and Online Access through the FLATTRADE Application.

### **Methods Available for Clients to Freeze/Block Online Access:**

**1. Trading App:** Clients can use the FLATTRADE Trading application available on Desktop, Web, and Mobile platforms. Using their user ID and password, clients can request freezing/blocking of their online trading account.

**2. Email:** Clients can send an email from their registered email ID to a dedicated email ID: [stoptrade@flattrade.in](mailto:stoptrade@flattrade.in) to initiate the freezing/blocking of their trading account.

### **Process for Freezing/Blocking of Trading Account:**

#### **1. Using the Trading Application:**

- o Clients will be shown all open positions and pending orders.
- o Clients must cancel all pending orders before proceeding with freezing/blocking their trading account.

#### **2. Email Request:**

- o FLATTRADE will validate the client's email request from the registered email ID.

After successful validation,

1. The team will contact the client to confirm the request and proceed with canceling all pending orders before freezing/blocking the trading account.
2. In case client is not reachable, FLATTRADE will cancel all pending orders based on the request and freeze/block the trading account

#### **3. Responsibility of Open Positions:**

- o FLATTRADE will not close out any open positions in the client's trading account.
- o It is the client's responsibility to close all open positions before freezing/blocking the trading account.

#### **4. Communication:**

- o Upon freezing/blocking the account, FLATTRADE will send an SMS/Email communication to the client's registered email ID, confirming the cancellation of all pending orders and detailing any open positions as stipulated by SEBI / Exchanges.

#### **5. Reactivation:**

- o If a client wishes to reactivate their trading account, they must send an email to [stoptrade@flattrade.in](mailto:stoptrade@flattrade.in) from their registered email ID.
- o Upon verification, the account will be reactivated, and an email confirmation will be sent to the client's registered email ID.

This policy ensures that clients can voluntarily freeze or block their trading accounts to protect against suspicious activities while maintaining clear communication and validation procedures.

## Annexure 2.5

### OPTION FORM FOR ISSUE OF DIS BOOKLET

|      |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|
| Date |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|

|                           |   |   |   |   |   |   |   |   |           |  |
|---------------------------|---|---|---|---|---|---|---|---|-----------|--|
| DP ID                     | 1 | 2 | 0 | 8 | 0 | 3 | 0 | 0 | Client ID |  |
| Sole/ First Holder's Name |   |   |   |   |   |   |   |   |           |  |
| Second Holder's Name      |   |   |   |   |   |   |   |   |           |  |
| Third Holder's Name       |   |   |   |   |   |   |   |   |           |  |

To

**Fortune Capital Services Pvt Ltd.**

"Kochar Technology Park", 6th Floor, SP 31-A, 1st Cross Road,  
 Ambattur Industrial Estate,  
 Ambattur, Chennai – 600 058.

Dear Sir / Madam,

I / We hereby state that:

[Select one of the options given below]

☐ **OPTION 1:**

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA / executed PMS agreement in favour of / with **FORTUNE CAPITAL SERVICES PVT LTD.** ( name of the attorney / Clearing Member / PMS manager ) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

**OR**

☐ **OPTION 2:**

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL account though I/we have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with \_\_\_\_\_ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. The issuance of DIS booklet contains 10 slips costing Rs.500/- per booklet.

Yours faithfully,

|            |                                                                                     |                                                                                     |                                                                                       |
|------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Signatures |  |  |  |
|            | <b>First / Sole Holder</b>                                                          | <b>Second Holder</b>                                                                | <b>Third Holder</b>                                                                   |
| Name       |                                                                                     |                                                                                     |                                                                                       |

## Demat Debit and Pledge Instruction (DDPI)



TO ALL TO WHOM THESE PRESENTS SHALL COME

I / We \_\_\_\_\_  
S/o, D/o, \_\_\_\_\_ aged about \_\_\_\_\_  
I / We \_\_\_\_\_  
S/o, D/o, \_\_\_\_\_ aged about \_\_\_\_\_  
I / We \_\_\_\_\_  
S/o, D/o, \_\_\_\_\_ aged about \_\_\_\_\_  
residing / having our office / registered office at \_\_\_\_\_

an individual / a sole proprietary concern / a partnership firm / a body corporate/ trust, registered / incorporated, under the provisions of the Indian Partnership Act, 1932 / the Companies Act 1956 or any relevant Act, (hereinafter referred to as “Beneficial Owner”)

Whereas I / We hold beneficial owner account number 12080300\_\_\_\_\_with Central Depository Services (India) Limited (CDSL), through Fortune Capital Services Private Limited (name of the depository participant) registered with Securities and Exchange Board of India (SEBI) Bearing ID IN-DP-811-2025.

And Whereas

I / We are desirous to buy and sell securities through Fortune Capital Services Private Limited who is a stockbroker registered with SEBI and Member of recognized stock Exchange(s) bearing SEBI registration No. INZ000201438.

Whereas in the course of availing the services and for meeting the margin and settlement obligation thereof on the exchanges and in order to make the process more transparent and simpler , I / We explicitly agree to access my / our BO account by M/s Fortune Capital Services Private Limited for the limited purposes as mentioned herein

| S.No. | Purpose                                                                                                                                                                                                                                     | Signature of Client * |  |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--|
| 1.    | Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker | 1st Holder            |  |
|       |                                                                                                                                                                                                                                             | 2nd Holder            |  |
|       |                                                                                                                                                                                                                                             | 3rd Holder            |  |
| 2.    | Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.     | 1st Holder            |  |
|       |                                                                                                                                                                                                                                             | 2nd Holder            |  |
|       |                                                                                                                                                                                                                                             | 3rd Holder            |  |
| 3.    | Mutual Fund transactions being executed on Stock Exchange order entry platforms                                                                                                                                                             | 1st Holder            |  |
|       |                                                                                                                                                                                                                                             | 2nd Holder            |  |
|       |                                                                                                                                                                                                                                             | 3rd Holder            |  |
| 4.    | Tendering shares in open offers through Stock Exchange platforms                                                                                                                                                                            | 1st Holder            |  |
|       |                                                                                                                                                                                                                                             | 2nd Holder            |  |
|       |                                                                                                                                                                                                                                             | 3rd Holder            |  |

I / We hereby authorize M/s Fortune Capital Services Private Limited to transfer the securities from my /our beneficiary account to the given demat accounts as mentioned herein below towards delivery settlement arising out of trades executed on the Stock Exchange and Pledging / Re-pledging of securities in favour of trading member (TM) / clearing member (CM) towards meeting margin requirements

| SR.NO. | ACCOUNT TYPE                                 | DP ID    | DP NAME | CLIENT ID |
|--------|----------------------------------------------|----------|---------|-----------|
| 1      | NSDL Pool A/c – NSE                          | IN300966 | GCML    | 11399792  |
| 2      | NSDL Pool A/c – BSE                          | IN300095 | ISSL    | 11663119  |
| 3      | CSDL Pool A/c – NSE                          | 12080300 | FCSPL   | 00000087  |
| 4      | Principal A/c. In CDSL                       | 12080300 | FCSPL   | 00000091  |
| 5      | CDSL NSE Early Pay-in Account                | 1 000011 | FCSPL   | 00019659  |
| 6      | CDSL BSE Early Pay-in Account                | 1 000010 | FCSPL   | 00023690  |
| 7      | Client Margin Pledge Account                 | 12080300 | FCSPL   | 00221198  |
| 8      | Client Securities Margin Funding Account     | 12080300 | FCSPL   | 00221204  |
| 9      | Corporate TM Client Securities Margin Pledge | 12080300 | FCSPL   | 00231833  |

I / We hereby agree that all such acts done by my /our above mentioned accounts shall be deemed to be acts done by me / us. Further, to return to me / us the securities or funds that may have been received by the stockbroker erroneously or those securities or funds that the stock broker was not entitled to receive from me / us.

This is a Revocable Demat Debit and Pledge Instructions (DDPI) without notice.

Signed and delivered by the within named Beneficial Owner/s

| Name(s) of holder(s)          |  | Signature(s) of holder*                                                               |
|-------------------------------|--|---------------------------------------------------------------------------------------|
| Sole / First Holder (Mr./Ms.) |  |  |
| Second Holder (Mr./Ms.)       |  |  |
| Third Holder (Mr./Ms.)        |  |  |

## FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) DECLARATION

Client Code : \_\_\_\_\_ DP ID / Client ID : \_\_\_\_\_

Place / City of Birth : \_\_\_\_\_ ISO Country Code of Birth : IN

Is your Country of Tax Residency other than India Yes ☐ No ☐  
 ( Please tick at appropriate place )

If 'Yes', Please specify the details of all countries where you hold tax residency and its Tax Identification Number & type

| S No. | Country of Tax Residency# | Tax Payer Identification Number / Functional Equivalent | Identification Type<br>(TIN or other, please specify) |
|-------|---------------------------|---------------------------------------------------------|-------------------------------------------------------|
| 1     |                           |                                                         |                                                       |
| 2     |                           |                                                         |                                                       |
| 3     |                           |                                                         |                                                       |

# to include all countries other than India, where investor is Citizen / Resident / Green card Holder / Tax Resident in those respective countries especially of USA

### Declaration :

I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I am aware that I may liable for it. I hereby authorize you to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to / any of the Regulators, their employees ('the Authorized parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit - India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same.

Further, I authorize you to share the given information to other SEBI Registered Intermediaries/or any other regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your end or by domestic or overseas regulators / tax authorities. I/We authorize you to provide relevant information to the above regulators and to enable withholding any sums from my account or close or suspend my account(s) without any obligation of advising me of the same.

Signature : 

Name of the Client : \_\_\_\_\_

Date : \_\_\_\_\_

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

## **MOBILE DECLARATION**

### **Declaration for Mobile Number**

I \_\_\_\_\_ having PAN No. \_\_\_\_\_ do hereby declare that my mobile No. is \_\_\_\_\_. Further I authorize FCSPL that the same may be used for giving me any information / alerts / Trade Communications/ Margin Calls/ SMS etc.,

I further declare the above mentioned statement is true and correct.

Signature  

Client Name \_\_\_\_\_

## **CLIENT DEFAULTER DECLARATION**

I \_\_\_\_\_ having PAN No. \_\_\_\_\_ do hereby declare that I have not been involved in any terrorist activities and I have not been declared a defaulter or my name is not appearing in defaulter database as per SEBI / Exchanges / Regulatory bodies etc.,

I further declare that the above mentioned declaration / statement is true and correct.

Signature  

Client Name \_\_\_\_\_



# FORTUNE CAPITAL SERVICES PVT LTD.

(Member of NSE, BSE, MCX & ICEX)

Regd. Office : "Kochar Technology Park", 6th Floor, SP 31-A, 1st Cross Road,  
Ambattur Industrial Estate, Ambattur, Chennai – 600 058.

Ph. : 044 - 6132 9696 / 6132 9696 Email : ftc@ftconline.in Web : ftconline.in

## RULES & REGULATIONS

1. Please maintain secrecy of your User Name and Password and never Share your Login Credentials / User Name and Password with anyone.
2. All Bank Accounts from which the client will issue cheques should be registered with FORTUNE CAPITAL SERVICES PVT LTD. Third party cheques will not be accepted at any cost.
3. Fortune Capital Services Pvt Ltd will not accept any cash from its clients and will not pay by cash to its clients. Clients are strictly advised not to do any cash transactions with any of the sub brokers / staffs / associates of Fortune Capital Services Pvt Ltd. Fortune Capital Services Pvt Ltd will not be responsible for any cash transactions.
4. Fortune Capital Services Pvt Ltd does not do any portfolio type of trading. Clients are advised not to do any such activity with any of our sub brokers / associates / staffs.
5. Fortune Capital Services Pvt Ltd will not give any third party cheques at any cost and the cheques will be issued only from the Fortune Capital Services Pvt Ltd Bank account.
6. Kindly check the emails on a daily basis. We send all your contract notes, Daily Activity Reports, Long short Positions, Ledgers on a daily basis to your email id. Discrepancies if any, should be brought to our knowledge immediately. Incase of disputes if any, please write to us at ftc@ftconline.in
7. Daily the clients will be sent a SMS from Fortune Capital Services Pvt Ltd with all the account details, Trade confirmations and their pending positions.
8. Delayed payment charges @ 2% per month on account of delay / failure by the client in meeting the pay-in / margin obligations / mark to market obligations on the scheduled date till date of payment. Not consider any credit balance in other family or group account of the client while computing delayed payment charges on the debit balance in the running account of a client.
9. The above levy is only a penal measure incase of a client default in meeting settlement and margin obligation and should not be construed as funding arrangement by the client; and the client cannot demand continuation of service on a permanent basis citing levy of delayed payment charges.
10. We are not a dealer and not selling any automated software, charts, technical analysis softwares etc., to our clients for placing orders / trading purposes. Fortune neither have arrangements nor tied up with any vendor for selling any kind of automated software, technical analysis softwares etc., to our clients.
11. Fortune neither providing any advisory regarding trading of stocks / commodities nor we offer Portfolio Management Services (PMS). Please be aware of unauthorised website / SMS / Emails / whatsapp / chats etc., for trading calls or PMS in our name. If you find any suspicious messages / chats with our name, please report the same to ftc@ftconline.in or call and inform us 044-45609696.

## DECLARATION

I.....have read and understood all the terms and conditions of Fortune Capital Services Pvt Ltd mentioned in the Account Opening Form. I also read and understood the rules and regulations of FORTUNE CAPITAL SERVICES PVT LTD mentioned above and I will abide the same. I Further state and confirm that I have read & understood all the clauses of Risk Disclosure Document - RDD and Rights & Obligations. I will do all the trading on my own and I will not allow anyone else to do the trading on my behalf. I ensure you that I will not do any Portfolio Business through any associates of FORTUNE CAPITAL SERVICES PVT LTD. We are aware that Fortune Capital Services Pvt Ltd will not accept Cash, Un-mapped Bank account and / or Third Party Cheques from their clients. We are completely aware that Fortune Capital Services Pvt Ltd not selling any automated software, charts, technical analysis software etc., to their clients. I have been made understood by Fortune Capital Services Pvt Ltd that Fortune Capital Services Pvt Ltd will not be held responsible for all mis happenings, if I do not follow the Rules & Regulations.



Signature of Client

Place : .....

Name : .....

Date : .....

Client Code : .....

With reference to the SEBI Circular No. SEBI/HO/CDMRD/DNPMP/CIR/P/2019/08 Dated, January 04, 2019, In order to enhance transparency to the public in Commodity Derivatives Markets and also as recommended by Commodity Derivatives Advisory Committee (CDAC), we request your consent for each Commodity on Self Declaration basis for the following to report to Exchange.

| Commodity  | Farmers / FPOs | Value Chain Participants (VCPs) | Proprietary Traders | Domestic Financial Institutional Investors | Foreign Participants | Others (All other participants which cannot be classified in the 5 categories) |
|------------|----------------|---------------------------------|---------------------|--------------------------------------------|----------------------|--------------------------------------------------------------------------------|
| ALUMINIUM  |                |                                 |                     |                                            |                      |                                                                                |
| BRASS      |                |                                 |                     |                                            |                      |                                                                                |
| CARDAMOM   |                |                                 |                     |                                            |                      |                                                                                |
| CASTORSEED |                |                                 |                     |                                            |                      |                                                                                |
| COPPER     |                |                                 |                     |                                            |                      |                                                                                |
| COTTON     |                |                                 |                     |                                            |                      |                                                                                |
| CRUPALMOIL |                |                                 |                     |                                            |                      |                                                                                |
| CRUDE OIL  |                |                                 |                     |                                            |                      |                                                                                |
| GOLD       |                |                                 |                     |                                            |                      |                                                                                |
| LEAD       |                |                                 |                     |                                            |                      |                                                                                |
| MENTHAOIL  |                |                                 |                     |                                            |                      |                                                                                |
| NATURALGAS |                |                                 |                     |                                            |                      |                                                                                |
| NICKEL     |                |                                 |                     |                                            |                      |                                                                                |
| PEPPER     |                |                                 |                     |                                            |                      |                                                                                |
| RBDPALM    |                |                                 |                     |                                            |                      |                                                                                |
| SILVER     |                |                                 |                     |                                            |                      |                                                                                |
| ZINC       |                |                                 |                     |                                            |                      |                                                                                |
| DIAMOND    |                |                                 |                     |                                            |                      |                                                                                |
| STEEL      |                |                                 |                     |                                            |                      |                                                                                |
| RUBBER     |                |                                 |                     |                                            |                      |                                                                                |
| KAPAS      |                |                                 |                     |                                            |                      |                                                                                |
| MCXBULLDEX |                |                                 |                     |                                            |                      |                                                                                |
| MCXMETLDEX |                |                                 |                     |                                            |                      |                                                                                |

Signature of Client 

Name : ..... Client Code : .....

## Authorisation to Debit Demat Account Operating Charges

To

Fortune Capital Services Pvt. Ltd.,  
"Kochar Technology Park",  
6th Floor, SP 31-A, 1st Cross Road,  
Ambattur Industrial Estate,  
Ambattur, Chennai – 600 058.

Dear Sir,

SUB: Authorisation for debit the Demat Account Charges

REF: Trading Client ID: \_\_\_\_\_

I / we have opened / have a CDSL beneficiary account with you alongwith trading account for investment and trading purposes. I / we hereby authorize you to debit from my trading account, the charges payable towards transaction charges and applicable statutory levies in the above said demat account. I / we are aware of the charges for operating the said demat account with you. Any such sum debited to my trading account shall be binding on me / us.

Thanking You,

Yours truly,



Signature of Client

## ACKNOWLEDGEMENT



To

M/s. Fortune Capital Services Private Ltd.,  
“Kochar Technology Park”, 6th Floor, SP 31-A, 1st Cross Road,  
Ambattur Industrial Estate, Ambattur, Chennai – 600 058.

Dear Sir,

This is to acknowledge the receipt of following documents. I further state and confirm that I have read and understood all the clauses of aforesaid document. I also confirm that I have received the relevant clarifications, if any, wherever required from the officials of Fortune Capital Services Pvt. Ltd.

| Sl.No. | Brief Significance of the Document                                           |  |  |
|--------|------------------------------------------------------------------------------|--|--|
|        | <b>Equity Segment</b>                                                        |  |  |
| 1      | Rights and Obligations and Most Important Terms and Conditions(MITC)         |  |  |
| 2      | Risk Disclosure Document (RDD)                                               |  |  |
| 3      | Guidance Note Do's and Don't for trading on the Exchanges for Investors      |  |  |
| 4      | Policies and Procedure document pursuant to the SEBI Circular Dt: 03.12.2009 |  |  |
| 5      | Duly executed copy of KYC & Tariff Sheet                                     |  |  |
| 6      | Voluntary Documents executed with the Trading Member                         |  |  |
| 7      | Internet & Wireless based Trading disclosure                                 |  |  |
| 8      | Risk Management Policy                                                       |  |  |
|        | <b>Commodity Segment</b>                                                     |  |  |
| 1      | Rights and Obligations and Most Important Terms and Conditions(MITC)         |  |  |
| 2      | Risk Disclosure Document (RDD)                                               |  |  |
| 3      | Guidance Note Do's and Don't for trading on the Exchanges for Investors      |  |  |
| 4      | Internet & Wireless based Trading disclosure                                 |  |  |
| 5      | Policies and Procedure document                                              |  |  |
| 6      | Devolvement Policy for Commodity Trading                                     |  |  |
| 7      | Additional Risk Disclosure – Options Trading                                 |  |  |
|        | <b>Depository Operation</b>                                                  |  |  |
| 1      | Rights & Obligations for DEMAT Account                                       |  |  |

I have executed the Voluntary documents without any compulsion and I read, understood the same. The above documents are binding on me.

Yours faithfully,

Client Signature: 

Name of the Client : \_\_\_\_\_ Date: \_\_\_\_\_

### **AUTHORIZATION FOR ACCOUNT MODIFICATION REQUESTS**

I / We hereby authorize you to carry out any addition, modification and/or removal of my details like Mobile No & E-mail ID without supporting documents and Bank Details, DP Details, Address Details with supporting documents duly self attested including brokerage plan changes sent through my Registered Mail ID with you to your Mail ID [KYCCHANGES@FTCONLINE.IN](mailto:KYCCHANGES@FTCONLINE.IN) and/or [FORMS@FTCONLINE.IN](mailto:FORMS@FTCONLINE.IN) or intimation through an interface provided by you, where to I have been allowed secured access.

Signature: 

**Most Important Terms and Conditions (MITC)**

(For non-custodial settled trading accounts)

1. Your trading account has a “Unique Client Code” (UCC), different from your demat account number. Do not allow anyone (including your own stock broker, their representatives and dealers) to trade in your trading account on their own without taking specific instruction from you for your trades. Do not share your internet/ mobile trading login credentials with anyone else.
2. You are required to place collaterals as margins with the stock broker before you trade. The collateral can either be in the form of funds transfer into specified stock broker bank accounts or margin pledge of securities from your demat account. The bank accounts are listed on the stock broker website. Please do not transfer funds into any other account. The stock broker is not permitted to accept any cash from you.
3. The stock broker’s Risk Management Policy provides details about how the trading limits will be given to you, and the tariff sheet provides the charges that the stock broker will levy on you.
4. All securities purchased by you will be transferred to your demat account within one working day of the payout. In case of securities purchased but not fully paid by you, the transfer of the same may be subject to limited period pledge i.e. seven trading days after the pay-out (CUSPA pledge) created in favor of the stock broker. You can view your demat account balances directly at the website of the Depositories after creating a login.
5. The stock broker is obligated to deposit all funds received from you with any of the Clearing Corporations duly allocated in your name. The stock broker is further mandated to return excess funds as per applicable norms to you at the time of quarterly/ monthly settlement. You can view the amounts allocated to you directly at the website of the Clearing Corporation(s).
6. You will get a contract note from the stock broker within 24 hours of the trade.
7. You may give a one-time Demat Debit and Pledge Instruction (DDPI) authority to your stock broker for limited access to your demat account, including transferring securities, which are sold in your account for pay-in.
8. The stock broker is expected to know your financial status and monitor your accounts accordingly. Do share all financial information (e.g. income, networth, etc.) with the stock broker as and when requested for. Kindly also keep your email Id and mobile phone details with the stock broker always updated.
9. In case of disputes with the stock broker, you can raise a grievance on the dedicated investor grievance ID of the stock broker. You can also approach the stock exchanges and/or SEBI directly.
10. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. You will not have any protection/recourse from SEBI/stock exchanges for participation in such schemes.

Date : \_\_\_\_\_

From,

---

---

---

---

To,

**M/s. Fortune Capital Services Private Ltd.,**  
"Kochar Technology Park", 6th Floor, SP 31-A, 1st Cross Road,  
Ambattur Industrial Estate,  
Ambattur, Chennai – 600 058.

**SUB: Mapping of Client Code \_\_\_\_\_ to USER ID \_\_\_\_\_**

Dear Sir,

With reference to the above, I request you to kindly map my Client ID \_\_\_\_\_ to USER ID's \_\_\_\_\_ for my operational convenience. As I am travelling a lot, I can place the order with the above USER ID while on travel and also facing connectivity issues. I am fully aware of the risks associated with the mapping of my client ID with the above said USER ID and I confirm that all my orders routed through the above USER ID are placed by myself and with my knowledge only. I am aware that Fortune Capital Services Private Ltd. is not liable for any unauthorised trading happens in the above said User ID, since I am requesting to map my client ID to the above said USER ID for my trading convenience. I am fully aware that the above USER is not connected with the Voice Recording System and I assure that I will not blame Fortune Capital Services Private Ltd. for any loss arises for the orders placed in the above said USER ID as I have been provided with SMS confirmation of all the trades done in my account immediately and Contract Note on Daily basis for all the trades. Hence I request you to kindly map the client ID with the above USER ID and confirm.

Thanking You,

Yours faithfully,



**Signature of Client\_**

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

## **MARGIN TRADING FACILITY (MTF)**

Margin Trading Facility (MTF) is the facility offered by M/s Fortune Capital Services Private Limited to fund its clients for the purchase of shares and securities and allow them to take a benefit of trading opportunities by taking delivery of shares based on margin. (The product hereinafter called as MTF).

I / we wish to avail the Margin Trading Facility (MTF) on the platform of National Stock Exchange of India Ltd., (NSE) as per the framework prescribed by SEBI vide its Circular No. CIR/MRD/DP/54/2017 dated, 13<sup>th</sup> Jun 2017.

Further I / we have read and understood “Rights and Obligation of Stockbrokers & Client for Margin Trading Facility (MTF)” as prescribed by NSE vide its Circular No. NSE/COMP/35260 dated, 30<sup>th</sup> Jun 2017 and BSE Vide its Circular No. 20170619-26 dated 19<sup>th</sup> Jun 2017.

I / we have read and understood the “Policies & Procedures for MTF” as specified by Fortune Capital Services Pvt. Ltd., (FCSPL) regarding terms and conditions of Margin Trading Facility, method of communication for confirmation of orders / trades, margin calls and calls for liquidation of collateral / securities / positions etc. and agreed to abide by the clauses mentioned therein all the times. Further, I/we will refer to FCSPL website [www.flattrade.in](http://www.flattrade.in) from time to time for any updation w.r.t. Policies and Procedures.

### **Collection of Margin:**

The margin is collected in Cash & Securities by way of pledge from the client who wish to trade in MTF Segment. Approved Securities List is available in our Website ([www.flattrade.in](http://www.flattrade.in)) download page along with the Hair-cut value **naming Acceptance of Approved Securities List**. Kindly refer the same before Pledging. Please find below the DP Account details to pledge the securities:

| <b>Account Type</b>                    | <b>DP ID</b> | <b>DP NAME</b> | <b>CLIENT ID</b> |
|----------------------------------------|--------------|----------------|------------------|
| TM Client Securities Margin Pledge A/C | 12080300     | F C S P L      | 00231833         |

**Setting of Exposure:** Trading is allowed only against available margin in client’s MTF account. For this purpose, margin should be available at the time of entering trade in the cash segment of NSE in the form of credit balance either cash or pledged securities value in the MTF segment of the client’s trading account.

The shares purchased by the client will be given to Pledge in the below mentioned DP Account of Client Security Margin Funding Account. The securities will be delivered to the clients own Beneficiary account on making the full payment and based on the request or delivered to the Exchange Pool a/c on obligations / selling of shares automatically.

| <b>Account Type</b>                | <b>DP ID</b> | <b>DP NAME</b> | <b>CLIENT ID</b> |
|------------------------------------|--------------|----------------|------------------|
| Client Security Margin Funding A/C | 12080300     | F C S P L      | 00221204         |

### **Exposure for Approved Securities Buying under Product MTF :**

The facility will be applicable only for approved securities. List of approved securities details are updated in our website ([www.flattrade.in](http://www.flattrade.in)) download page naming “**Approved Securities List for Buying**”.

At the time of order placing, always select the product code as “**MTF**” and place orders using the exe or mobile application provided for trading. Approved Securities List will be reviewed on monthly basis and the changes can be taken place with addition / removal of stocks. The clients will be provided additional One Time Margin for purchase of approved securities and the payment needs to be made to Fortune Capital Services P. Ltd., whenever required. **For purchase of unapproved stocks, client must use the product code “CNC” for placing order and Unapproved Stocks are not allowed under MTF.**

### **Adjustment of Credit Balances in Regular Account with MTF Account:**

Client has to make separate request by sending mail to [accounts@ftconline.in](mailto:accounts@ftconline.in) / via MTF fund transfer option available in the application to transfer the Credit balance from their Normal Account to MTF account. The fund transfer will not be happened automatically from normal ledger to MTF Ledger and on receipt of request only transfer will be affected. Whenever there is short fall in margins, company having right to move the funds from the normal ledger to MTF ledger without intimation to the clients. Further, if there is debit in normal ledger, excess margin amount available in the MTF margin account, the same will be adjusted with the debit in the normal ledger automatically.

### **Interest Charges for MTF:**

Interest will be levied @ 18% p.a. for MTF Funded value after adjusting the Cash Margin available in the client’s MTF margin ledger. In case, if the client provided securities through pledge as non-cash component towards margin, the same will not be considered towards interest calculation and interest will be charged for entire Funded value. Interest Charges will be calculated on a daily running balance and debited to the client ledger by end of the week. While calculating interest, the credit lying in Normal Ledger will not be considered and hence, please make the fund transfer request as explained above. Increasing the interest rates will be done by the company with the prior intimation notice to the clients.

### **Liquidation of the position under MTF:**

If the client is not made good the Mark to Market (M2M) losses or margin short fall within 5 working days from the date of margin call, position will be squared off to the extend of the M2M losses or margin call with the discretion of the stockbroker.

If the securities are moved out of approved securities list by Fortune Capital Services P Ltd and or Group 1 securities list provided by exchange / SEBI, client is expected to clear the debit and take delivery to his demat account immediately. Otherwise, position will be squared off by Fortune Capital Services P Ltd without giving any intimation.

In case if the client is not fulfilled the Mark to Market (M2M) losses and or Margin shortfall and the same reaches 75% and the client is not made good on the Mark to Market losses and or margin shortfall, MTF Funded stock will be squared off immediately. Even after the square off the funded stock, there is shortfall in margin or debit in the trading account, collateral securities pledged towards margin also will be squared off and set off the losses occurred on the trading account of the client.

Fortune Capital Services P Ltd cannot guarantee the price at the time of square off and the orders are placed on market and the position will be squared off on the prevailing market price which is traded on the exchange.

If the securities are purchased in the market and the said securities are not received from the exchange or due to internal matching and the auction / Closed Out rates are provided by the exchange or as per policy, then the said MTF position will be liquidated and the necessary credits are passed on the client account.

In the event of any corporate action on a particular scrip held in the client's account, the funding amount associated with the scrip will be liquidated. The client must clear any resulting debit within T+1 day. Failure to clear the debit within the stipulated time will grant FLATTRADE the right to square off the client's positions without further notice

### **Terms and Conditions:**

1. Fortune Capital Services P Ltd reserves the absolute right to either allow or refuse the aforesaid facility without giving any reasons to the clients and I agree that I shall not dispute the result in any manner whatsoever.
2. All Transactions in my account shall be subject to Margin Trading Facility rules and regulations of the exchange / SEBI.
3. The Maximum credit limit for a client will not exceed 10% of the net worth of the company computed as per SEBI Guidelines. However, Fortune Capital Services P Ltd reserves the right to reduce the maximum credit limit at any time without any prior intimation or assigning any reasons thereof.
4. The maximum single scrip funding limit for a client will not exceed Rs.50 Lakhs where the scrip is part of Nifty, CNX 100 and Junior Nifty collateral and will not exceed Rs.25 Lakhs where the scrip is not part of Nifty, CNX 100 and Junior Nifty.
5. In order to avail margin trading, initial margin and maintenance margin required at all times shall be as prescribed by SEBI which is as under.

| Category of Stock                                  | Initial margin & maintenance margin as prescribed by SEBI | Initial margin and maintenance margin as set-in trading platform                                                                                                                                                                          |
|----------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Group I stock available for trading in F&O Segment | VaR + 3 times applicable ELM                              | The margin will be determined as the <b>highest</b> of the following: (i) <b>VAR + 4× applicable ELM</b> , (ii) <b>25% of buy value</b> , or (iii) <b>Exchange-prescribed applicable margin (VAR+ELM+Adhoc)</b> for the respective stock. |
| Group I stock other than F&O stocks                | VaR + 5 times ELM                                         | The margin will be determined as the <b>highest</b> of the following: (i) <b>VAR + 6× applicable ELM</b> , (ii) <b>25% of buy value</b> , or (iii) <b>Exchange-</b>                                                                       |

|  |  |                                                                        |
|--|--|------------------------------------------------------------------------|
|  |  | prescribed applicable margin (VAR+ELM+Adhoc) for the respective stock. |
|--|--|------------------------------------------------------------------------|

6. Mark to Market (MTM) loss if any on the funded stocks should be paid immediately under this funding facility.
7. Margin call will be initiated by Fortune Capital Services P Ltd at any time if the client fails to meet the daily mark to market. Margin calls to the client shall be made in the form of E-Mail to the registered email id or SMS to the registered mobile number or both by the company.
8. Upon receipt of the margin call, I agree to bring additional margin amount within the specified time to cover the margin short fall and make good of such deficiency in the amount of margin placed with the company. Margin shortfall can be replenished by way of online fund transfer / by pledging additional collateral stocks / by transferring the funds from the normal trading account to the MTF Account.
9. If there is a margin call on MTF Account and have the credit balance in the normal trading account, Fortune Capital Services P Ltd reserves the right to transfer any clear credit balance from the normal trading account to MTF Account. By agreeing to this terms and conditions, you give Fortune Capital Services P Ltd the explicit right to do this transfer without any intimation to you.
10. Margin Trading Facility allowed under this facility can be continued for a long period till it is terminated by you or Fortune Capital Services Private Ltd.
11. Fortune Capital Services P Ltd at its discretion, may liquidate, close out / sell shares, a part of or whole position if I fail to meet the margin call made by the company within the specified time, without prior intimation to me.
12. Fortune Capital Services P Ltd has full lien on cash and security balances in my trading / depository account and Fortune Capital Services Private Ltd may sell such securities lying with this demat account on account of any loss arising out of squaring off or sale of securities. Fortune Capital Services P Ltd will not be liable for any cost or damage or any consequences thereof.
13. If there are no transaction for 90 days in the MTF Account and where MTF Account is in credit, then the same would be settled as per the running account settlement process.
14. I / We shall loge / protest any disagreement with any transactions done under the MTF facility within 2 days from the receipt of the contract note.
15. The stock valuation of fully paid securities in the Collateral account will be determined by Fortune Capital Services Private Limited after applying the necessary haircuts from time to time.
16. Fortune Capital Services Private Limited reserves the absolute right to withdraw this aforesaid facility at any time without giving any reasons thereof, and I shall not protest or take a stand against them.
17. If this MTF facility is granted to me/us, I/We shall have no right to revoke the POA or withdraw the Collateral, unless and until all the claims, demands, loss, damages, penalties, and liabilities are settled with Fortune Capital Services Private Limited.

18. The brokerages and other regulatory charges etc. are applicable for each trade that is executed through the Margin funding account.
19. By signing and agreeing to the terms and conditions of MTF, I\We give my\our explicit permission to move the MTF trades to my MTF account daily basis.
20. I\We have the right to terminate this facility if, at any time, Fortune Capital Services Private Limited breaches its terms and conditions.

21. I\We agree that, have received the Risk Disclosure document, Rights & obligations, Policies, and procedures, and read, understood and accepted the same.
22. Fortune Capital Services P Ltd will have a discretion to alter / change any of the information / parameter defined in the policy on the basis of prevailing market conditions with or without intimation to the clients and can use their discretion to grant any kind of exemption / permission in case they deem fit on case to case basis.
23. I/we hereby confirm that I/we will continuously monitor the positions and the Margin Calls issued to me/us by Fortune Capital Services Pvt. Ltd., and I/we will top up the Margin immediately. I/we hereby confirm that I/we am/are aware that the Policy is tends to be changed depending on the market scenario and we will update myself/ourselves by reading the Policy from at regular intervals.

**Client Name:**

**Client Code:**

**Signature of the client:**

## **RIGHTS & OBLIGATIONS OF STOCK BROKERS & CLIENTS FOR MARGIN TRADING FACILITY (MTF)**

### **CLIENT RIGHTS**

1. Client shall receive all communications in a mode mutually agreed between the broker and the client regarding confirmation of orders/trades, margin calls, decision to liquidate the position / security.
2. Client shall be free to take the delivery of the securities at any time by repaying the amounts that was paid by the Stockbroker to the Exchange towards securities after paying all dues.
3. Client has a right to change the securities collateral offered for Margin Trading Facility at any time so long as the securities so offered are approved for margin trading facility.
4. Client may close / terminate the Margin Trading Account at any time after paying the dues.

### **CLIENT OBLIGATIONS**

1. Client shall, in writing in his own hand or in any irrefutable electronic method, agree to avail of Margin Trading Facility in accordance with the terms and conditions of Margin Trading Facility offered by the broker, method of communication for confirmation of orders/trades, margin calls and calls for liquidation of collateral/security/position.
2. Client shall inform the broker of its intent to shift the identified transaction under Margin Trading Facility within the timelines specified by the broker failing which the transaction will be treated under the normal trading facility
3. Client shall place the margin amounts as the Stockbroker may specify to the client from time to time.
4. On receipt of 'margin call', the client shall make good such deficiency in the amount of margin placed with the Stockbroker within such time as the Stockbroker may specify.
5. By agreeing to avail Margin Trading Facility with the broker, client is deemed to have authorized the broker to retain and/or pledge the securities provided as collateral or purchased under the Margin Trading Facility till the amount due in respect of the said transaction including the dues to the broker is paid in full by the client.
6. Client shall lodge protest or disagreement with any transaction done under the margin trading facility within the timelines as may be agreed between the client and broker.

### **STOCK BROKER RIGHTS**

1. Stockbroker and client may agree between themselves the terms and condition including commercial terms if any before commencement of MTF.
2. Stockbroker may set up its own risk management policy that will be applicable to the transactions done under the Margin Trading Facility. Stockbroker may make amendments there to at any time but give effect to such policy after the amendments are duly communicated to the clients registered under the Margin Trading Facility.

3. The broker has a right to retain and/or pledge the securities provided as collateral or the securities bought by the client under the Margin Trading Facility.
4. The broker may liquidate the securities if the client fails to meet the margin call made by the broker as mutually agreed of liquidation terms but not exceeding 5 working days from the day of margin call.

### **STOCK BROKER OBLIGATIONS**

1. Stockbroker shall agree with the client the terms and condition before extending Margin Trading Facility to such client. However, for clients who already have existing trading relationship and want to avail of Margin Trading Facility, stockbroker may take consent in writing in his own hand or in any irrefutable electronic method after stock broker has communicated the terms and conditions of Margin Trading Facility to such existing clients.
2. The terms and conditions of Margin Trading Facility shall be identified separately, in a distinct section if given as a part of account opening agreement.
3. The mode of communication of order confirmation, margin calls or liquidation of position/security shall be as agreed between the broker and the client and shall be in writing in his own hand or in any irrefutable electronic method. Stockbroker shall prescribe and communicate its margin policies on haircuts/ VAR margins subject to minimum requirements specified by SEBI and exchanges from time to time.
4. The Stockbroker shall monitor and review on a continuous basis the client's positions with regard to MTF. It is desirable that appropriate alert mechanism is set up through which clients are alerted on possible breach of margin requirements.
5. Any transaction to be considered for exposure to MTF shall be determined as per the policy of the broker provided that such determination shall happen not later than T + 1 day.
6. If the transaction is entered under margin trading account, there will not be any further confirmation that it is margin trading transaction other than contract note.
7. In case the determination happens after the issuance of contract, the broker shall issue appropriate records to communicate to Client the change in status of transaction from Normal to Margin trading and should include information like the original contract number and the margin statement and the changed data.
8. The Stockbroker shall make a 'margin call' requiring the client to place such margin; any such call shall clearly indicate the additional/deficient margin to be made good.
9. Time period for liquidation of position/security shall be in accordance declared policy of the broker as applicable to all MTF clients consistently. However, the same should not be later than 5 working (trading) days from the day of 'margin call'. If securities are liquidated, the contract note issued for such margin call related transactions shall carry an asterisk or identifier that the transaction has arisen out of margin call.
10. The daily margin statements sent by broker to the client shall identify the margin/collateral for Margin Trading separately.

11. Margin Trading Accounts where there were no transactions for 90 days shall be settled immediately.
12. The stocks deposited as collateral with the stockbroker for availing margin trading facility (Collaterals) and the stocks purchased under the margin trading facility (Funded stocks) shall be identifiable separately and there shall not be any comingling for the purpose of computing funding amount.
13. Stockbroker shall close/terminate the account of the client forthwith upon receipt of such request from the client subject to the condition that the client has paid dues under Margin Trading Facility.

#### **TERMINATION OF RELATIONSHIP**

1. The margin trading arrangement between the stockbroker and the client shall be terminated; if the Stock Exchange, for any reason, withdraws the margin trading facility provided to the Stockbroker or the Stock Broker surrenders the facility or the Stock Broker ceases to be a member of the stock exchange.
2. The MTF facility may be withdrawn by the broker, in the event of client committing any breach of any terms or conditions therein or at anytime after due intimation to client allowing such time to liquidate the MTF position as per the agreed liquidation terms without assigning any reason. Similarly, client may opt to terminate the margin trading facility in the event of broker committing any breach of any terms or conditions therein or for any other reason.
3. In the event of termination of this arrangement, the client shall forthwith settle the dues of the Stockbroker. The Stockbroker shall be entitled to immediately adjust the Margin Amount against the dues of the client, and the client hereby authorizes the Stockbroker to make such adjustment.
4. After such adjustment, if any further amount is due from the client to the Stockbroker, the client shall settle the same forthwith. Upon full settlement of all the dues of the client to the Stockbroker, the Stockbroker shall release the balance amount to the client.
5. If the client opts to terminate the margin trading facility, broker shall forthwith return to the client all the collaterals provided and funded securities retained on payment of all the dues by clients.

**Client Name:**

**Client Code:**

**Client Signature:**

## **RIGHTS & OBLIGATIONS OF STOCK BROKERS & CLIENTS FOR MARGIN TRADING FACILITY (MTF)**

### **CLIENT RIGHTS**

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3. Client has a right to change the securities collateral offered for Margin Trading Facility at any time so long as the securities so offered are approved for margin trading facility.
4. Client may close / terminate the Margin Trading Account at any time after paying the dues.

### **CLIENT OBLIGATIONS**

1. Client shall, in writing in his own hand or in any irrefutable electronic method, agree to avail of Margin Trading Facility in accordance with the terms and conditions of Margin Trading Facility offered by the broker, method of communication for confirmation of orders/trades, margin calls and calls for liquidation of collateral/security/position.
2. Client shall inform the broker of its intent to shift the identified transaction under Margin Trading Facility within the timelines specified by the broker failing which the transaction will be treated under the normal trading facility
3. Client shall place the margin amounts as the Stockbroker may specify to the client from time to time.
4. On receipt of 'margin call', the client shall make good such deficiency in the amount of margin placed with the Stockbroker within such time as the Stockbroker may specify.
5. By agreeing to avail Margin Trading Facility with the broker, client is deemed to have authorized the broker to retain and/or pledge the securities provided as collateral or purchased under the Margin Trading Facility till the amount due in respect of the said transaction including the dues to the broker is paid in full by the client.
6. Client shall lodge protest or disagreement with any transaction done under the margin trading facility within the timelines as may be agreed between the client and broker.

### **STOCK BROKER RIGHTS**

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2. Stockbroker may set up its own risk management policy that will be applicable to the transactions done under the Margin Trading Facility. Stockbroker may make amendments there to at any time but give effect to such policy after the amendments are duly communicated to the clients registered under the Margin Trading Facility.

3. The broker has a right to retain and/or pledge the securities provided as collateral or the securities bought by the client under the Margin Trading Facility.
4. The broker may liquidate the securities if the client fails to meet the margin call made by the broker as mutually agreed of liquidation terms but not exceeding 5 working days from the day of margin call.

### **STOCK BROKER OBLIGATIONS**

1. Stockbroker shall agree with the client the terms and condition before extending Margin Trading Facility to such client. However, for clients who already have existing trading relationship and want to avail of Margin Trading Facility, stockbroker may take consent in writing in his own hand or in any irrefutable electronic method after stock broker has communicated the terms and conditions of Margin Trading Facility to such existing clients.
2. The terms and conditions of Margin Trading Facility shall be identified separately, in a distinct section if given as a part of account opening agreement.
3. The mode of communication of order confirmation, margin calls or liquidation of position/security shall be as agreed between the broker and the client and shall be in writing in his own hand or in any irrefutable electronic method. Stockbroker shall prescribe and communicate its margin policies on haircuts/ VAR margins subject to minimum requirements specified by SEBI and exchanges from time to time.
4. The Stockbroker shall monitor and review on a continuous basis the client's positions with regard to MTF. It is desirable that appropriate alert mechanism is set up through which clients are alerted on possible breach of margin requirements.
5. Any transaction to be considered for exposure to MTF shall be determined as per the policy of the broker provided that such determination shall happen not later than T + 1 day.
6. If the transaction is entered under margin trading account, there will not be any further confirmation that it is margin trading transaction other than contract note.
7. In case the determination happens after the issuance of contract, the broker shall issue appropriate records to communicate to Client the change in status of transaction from Normal to Margin trading and should include information like the original contract number and the margin statement and the changed data.
8. The Stockbroker shall make a 'margin call' requiring the client to place such margin; any such call shall clearly indicate the additional/deficient margin to be made good.
9. Time period for liquidation of position/security shall be in accordance declared policy of the broker as applicable to all MTF clients consistently. However, the same should not be later than 5 working (trading) days from the day of 'margin call'. If securities are liquidated, the contract note issued for such margin call related transactions shall carry an asterisk or identifier that the transaction has arisen out of margin call.
10. The daily margin statements sent by broker to the client shall identify the margin/collateral for Margin Trading separately.

11. Margin Trading Accounts where there were no transactions for 90 days shall be settled immediately.
12. The stocks deposited as collateral with the stockbroker for availing margin trading facility (Collaterals) and the stocks purchased under the margin trading facility (Funded stocks) shall be identifiable separately and there shall not be any comingling for the purpose of computing funding amount.
13. Stockbroker shall close/terminate the account of the client forthwith upon receipt of such request from the client subject to the condition that the client has paid dues under Margin Trading Facility.

#### **TERMINATION OF RELATIONSHIP**

1. The margin trading arrangement between the stockbroker and the client shall be terminated; if the Stock Exchange, for any reason, withdraws the margin trading facility provided to the Stockbroker or the Stock Broker surrenders the facility or the Stock Broker ceases to be a member of the stock exchange.
2. The MTF facility may be withdrawn by the broker, in the event of client committing any breach of any terms or conditions therein or at anytime after due intimation to client allowing such time to liquidate the MTF position as per the agreed liquidation terms without assigning any reason. Similarly, client may opt to terminate the margin trading facility in the event of broker committing any breach of any terms or conditions therein or for any other reason.
3. In the event of termination of this arrangement, the client shall forthwith settle the dues of the Stockbroker. The Stockbroker shall be entitled to immediately adjust the Margin Amount against the dues of the client, and the client hereby authorizes the Stockbroker to make such adjustment.
4. After such adjustment, if any further amount is due from the client to the Stockbroker, the client shall settle the same forthwith. Upon full settlement of all the dues of the client to the Stockbroker, the Stockbroker shall release the balance amount to the client.
5. If the client opts to terminate the margin trading facility, broker shall forthwith return to the client all the collaterals provided and funded securities retained on payment of all the dues by clients.

**Client Name:**

**Client Code:**

**Client Signature:**

## **CHECK LIST**

| Sl. No. | Details                                                                                               | Checked By | Checked By | Checked By |
|---------|-------------------------------------------------------------------------------------------------------|------------|------------|------------|
| 1.      | Signature across Photograph                                                                           |            |            |            |
| 2.      | Signature in 41 Places                                                                                |            |            |            |
| 3.      | Clear & Legible ID Proof (Self attested)                                                              |            |            |            |
| 4.      | Clear & Legible Address proof (Self attested)                                                         |            |            |            |
| 5.      | Clear & Legible Bank Account Proof (Self attested) / Cancelled cheque leaf with IFSC Code duly signed |            |            |            |
| 6.      | Clear & Legible Xerox copy of PAN card (Self attested)                                                |            |            |            |
| 7.      | Clear & Legible Financial Proof                                                                       |            |            |            |

## **FOR OFFICE USE ONLY**

### **MAPPING**

|                    | Code | Name |
|--------------------|------|------|
| SUB-BROKER         |      |      |
| REFERRAL           |      |      |
| MB / MF            |      |      |
| RM NAME (DIRECT)   |      |      |
| RM NAME (INDIRECT) |      |      |

**Data Entered in System by**

Name :

Signature :