

SARAL

ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUALS TRADING IN CASH SEGMENT

PHOTOGRAPH
Please affix your recent passport size photograph and sign across it

I KYC - Please fill this form in BLOCK LETTERS.

A. IDENTITY DETAILS

1. Name of the Applicant: _____
2. Father's/ Spouse Name: _____
3. a. Gender: Male/ Female b. Marital status: Single/ Married c. Date of birth: ____ (dd/mm/yyyy)
4. Nationality: _____
5. a. PAN: _____ b. Aadhaar Number, if any: _____
6. Specify the proof of Identity submitted: _____

B. ADDRESS DETAILS

1. Residence/ Correspondence Address: _____ City/town/village: _____
Pin Code: _____ State: _____ Country: _____
2. Contact Details: Tel. (Off.) _____ Tel. (Res.) _____ Mobile No.: _____ Fax: _____ Email id: _____
3. Permanent Address (if different from above address): _____
City/town/village: _____ Pin Code: _____ State: _____ Country: _____
4. Specify the proof of address submitted for residence/correspondence /permanent address: _____

DECLARATION

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

_____ Signature of the Applicant Date: _____ (dd/mm/yyyy)

Originals verified and Self-Attested Document copies received (.....)

Name & Signature of the Authorised Signatory
Seal/Stamp of the intermediary

Date

II OTHER DETAILS:

1. Bank account details:

Bank Name	Branch address	Bank account no.	Account Type: Saving/Current/	MICR Number	IFSC code

2. Demat account details:(In case the client does not have DP account, this column may be crossed)

DP name	NSDL/CDSL	Beneficiary name	DP ID	BO ID

3. Whether DP account is also to be opened with the same intermediary (Yes/No)

4. Trading Preferences: Please sign the relevant boxes where you wish to trade.

Exchange	Sign	Exchange	Sign	Exchange	Sign
NSE		BSE		MCX-SX	

5. Mode of receiving Contract Note/ Statement of Account: Physical / Electronic (Please indicate your preference).....

6. Standing instructions to receive credits automatically into my BO account (Yes/No)

7. Nomination details (Name, PAN, Address and Phone no. of nominee); relationship with the nominee (If nominee is a minor, details of Guardian like name, address, phone no. and signature of Guardian may be obtained)

I have understood the contents of policy and procedures document, tariff sheet, 'Rights and Obligations' document and 'Risk Disclosure Document'. I do hereby agree to be bound by such provisions as outlined in these documents. I have also been informed that the standard set of documents has been displayed for information on stock broker's designated website.

_____ Signature of the Applicant Date: _____ (dd/mm/yyyy)

FOR OFFICE USE ONLY

UCC Code allotted to the Client: -----

DP name	NSDL/CDSL	Beneficiary name	DP ID	BO ID

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

I / We undertake that I/we have made the client aware of 'Policy and Procedures', tariff sheet. 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 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.

If the client chooses to avail the demat facility from the same stock broker who is also a depository participant, the stock broker may use the same form and provide the details of the demat account opened for the said client to the client while providing a copy of the KYC documents.

.....

Signature of the Authorised Signatory

Date

Seal/Stamp of the stock broker

NOTE: This form is applicable for individual investors trading in the cash segment. If such investors wish to trade in segments other than cash segment and / or wish to avail facilities such as internet trading, running account, margin trading, Power of Attorney etc., they may furnish additional details required as per prescribed regulations to the concerned intermediary.

FE SECURITIES PRIVATE LIMITED
[Depository Participant of Central Depository Services (India) Limited]
814, Arunachal Building
19, Barakhamba Road, New Delhi-110001
Phones : 011-23350670, 23350672, 23317382, 23317385
E-mail : fes@fesecurities.in Website : www.fesecurities.in

Additional information to be obtained along with the SARAL Account Opening Form for Resident Individuals

Date	D	D	M	M	Y	Y	Y	Y

To be filled by the Depository Participant)

Application No.											Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.																			
DP ID	1	2	0	4	6	9	0	0	Client ID										

Holders Details

Sole / First Holder's Name		UID																
Second Holder's Name		PAN																
		UCC																
		Exchange Name & ID																
Third Holder's Name		UID																
		PAN																
		UID																

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

Status	Sub - Status
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident

I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report (Tick the applicable box. If not marked the default option would be in Physical)	<input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic

I / We wish to receive dividend / interest directly in to my bank account as given in SARAL AOF through ECS (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

Other Details Gross Annual Income Details	Income Range per annum:																
	<input type="checkbox"/> Up to Rs.1,00,000 <input type="checkbox"/> Rs 1,00,000 to Rs 5,00,000 <input type="checkbox"/> Rs 5,00,000 to Rs 10,00,000 <input type="checkbox"/> Rs 10,00,000 to Rs 25,00,000 <input type="checkbox"/> More than Rs 25,00,000																
	Net worth as on (Date) <table border="1"> <tr> <td>D</td> <td>D</td> <td>M</td> <td>M</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> Rs [Net worth should not be older than 1 year]	D	D	M	M	Y	Y	Y	Y								
D	D	M	M	Y	Y	Y	Y										
Occupation	<input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <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 Politically Exposed Person (RPEP)																
Any other information:	_____																

FE SECURITIES PRIVATE LIMITED
[Depository Participant of Central Depository Services (India) Limited
814, Arunachal Building
19, Barakhamba Road, New Delhi-110001
Phones : 011-23350670, 23350672, 23317382, 23317385
E-mail : fes@fesecurities.in Website : www.fesecurities.in

SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4	MOBILE NO. +91 _____ [(Mandatory , if you are giving Power of Attorney (POA)] (if POA is not granted & you do not wish to avail of this facility, cancel this option).	
Easi	To register for easi, please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.	

Nomination Details

Nomination Registration No.	Dated

- I/We hereby confirm that I/We **do not wish to appoint any nominee in my 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 demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the demat account.. _

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures			

Note:

- Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature [in both the cases i.e. nomination / / opt out nomination -
- I/We wish to make 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.

Mandatory Details

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name : *First Name: Middle Name: *Last Name			
*Percentage of allocation of securities Equally [If not equally, please specify percentage] Or <input type="checkbox"/> Share of each Nominee	%	%	%
Any odd lot after division shall be transferred to the first nominee mentioned in the form			
* Date of birth and Name of Guardian to be provided in case of minor nominee (s)			

Non - mandatory details			
*Address of Nominee (s) / Guardian in case of Minor :			
*City /place:			
*State & Country:			
*Pin Code:			
Mobile no/Telephone No. of the Nominee (s) Guardian in case of Minor :			
Email ID of the nominee (s) / Guardian in cae of minor:			
Nominee/Guardian (in case of minor) Identification Details – [Please tick any one of following and provide details of same]			
<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			

* Marked is Mandatory

field Note

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

Details of the Witness	
Witness Details	
Name of witness	
Address of witness	
Signature of witness	

I / We have received and read the Rights and Obligations document and terms & conditions 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.

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures			

(Signatures should be preferably in black ink).

*** Marked is Mandatory field**

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



===== Please Tear Here) =====

Acknowledgement Receipt
Application No.:
Date:

We hereby acknowledge the receipt of the Account Opening and nomination Application Form:

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

Alerts. However, if the 1st holder of the account is different, the surviving BO(s) will have to provide the mobile number of the 1st holder of the new account for availing the "SMART" facility.

2.7.5 Nomination: a fresh Nomination form, duly signed by the surviving holders will have to be obtained for the new account and duly updated in the CDSL system and Nomination Register.

2.7.6 The DP should ensure that any original documents removed from the **old** account opening records (and used for KYC purposes in the **new** account), are replaced with photocopies of the same, for future co-relation / reference.

2.8 SARAL Account Opening Form (AOF) for resident individuals:

SEBI vide its circular no. CIR/MIRSD/1/2015 dated March 04, 2015, has specified a simplified Account Opening Form (AOF) termed as SARAL AOF which can be used by only resident individuals for opening demat accounts.

If an applicant submits SARAL AOF then the DP should obtain additional KYC form as per annexure 2.8 (instead of annexure 2.1)

2.9 Mode of operation in Joint Account

2.9.1 In the case of demat account with joint holders, the DP shall ensure that all instructions submitted are duly signed by all account holders.

2.9.2 2.9.2 The joint account holders may opt for any one of the following modes of operation for executing the transactions (as mentioned under OI 2.9.4) by submitting a specific instruction at the time of demat account opening or at a later date duly signed by all account holders:-

- a. Jointly
- b. Anyone or Survivor

In system the default option for mode of operation will be "Jointly". If mode of operation chosen by the demat account holders is other than "Jointly", then the same should be captured by the DP in CDSL system.

2.9.3 DP can execute the following transactions as per the mode of operation captured in the CDSL system.

- i. Transfer of securities including Inter-Depository Transfer.
- ii. Pledge / Unpledge / Confiscation Margin repledge (Creation, closure and invocation