

ACCOUNT OPENING FORM

INDIVIDUAL AND NON-INDIVIDUAL

Centricity Securities Private Limited
Member of NSE, BSE, NSDL, CDSL

Client Name : _____
Client Code : _____
Branch Code : _____
Branch Name : _____
Recommended by : _____

SEBI Registration No : INZ000323234

Registered Address : 207A & 207B, Tower-B, Global Business Park, Gurugram, Haryana-122002

CIN No. 67190HR2021PTC096860

Centricity Securities Private Limited

CONTACT DETAILS			
Compliance Officer Details (DP)	Mr. Birendra Kumar Jha Ph.+91- 8178687890 E-mail: brokingservices@centricity.co.in		
Compliance Officer Details (Stockbroker)	Mr. Sachin Jasuja Ph.: +91- : 9899982625, E-mail: brokingservices@centricity.co.in		
Director Details	Mr. Aditya Shankar Ph.: +91- :9811044926, E-mail: brokingservices@centricity.co.in		
Registered Office:	Unit no. 207A & 207B, Tower – B, Global Business Park Gurugram, Haryana-122002		
GST Registration No	06AALCC8384K1Z1		
Company Pan No.	AALCC8384K		
NSE Trading Code	90456		
BSE Trading Code	6912		
Exchange / Depository	Segment	SEBI Regn. No.	Date
NSE And BSE	Cash	INZ000323234	23.12.2024
NSE And BSE	F&O	INZ000323234	23.12.2024
NSDL	Depository (IN304924)	IN-DP-831-2026	22.01.2026
CDSL	Depository		

Clearing Membership Details

NSE & BSE Equity Cash and Derivatives Market
Globe Capital Market Limited
Regd. Office: 609, Ansal Bhawan 16, K.G Marg, Connaught Place New Delhi -110001

For any grievance/dispute please contact Centricity Securities Private Limited Services at the above address or email id- brokinggrievance@centricity.co.in and Phone No. +91-9811044926. In case not satisfied with the response, please contact the concerned exchange(s) at:

Exchange Name	E-mail ID	Phone No.
National Stock Exchange of India Ltd.	ignse@nse.co.in	022-26598190, 18002660058
Bombay Stock Exchange Ltd.	is@bseindia.com	022-22728097
National Depository Services	relations@nsdl.co.in	022-48867000
Central Depository Services (India) Ltd.	complaints@cdslindia.com	1800-200-5533

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

For grievances with SEBI Score 2.0 Version

Filing of complaints on SEBI SCORES - Easy & Quick (<https://www.scores.sebi.gov.in>)

- Register on SCORES portal
 - Mandatory details for filing complaints on SCORES: i.e. Name, Pan, Address, Mobile Number, Email
 - Benefits: i). Effective communication ii). Speedy redressal of the grievances
- Toll- Free Halpine: 1800227575/18002667575

Disclosure for Clients:

We are carrying out pro transactions in our own account.

ACCOUNT OPENING KIT

INDEX OF DOCUMENTS

MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES

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9.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in securities.	
10.	Guidance Note	Documents detailing do's and don'ts for trading on exchange, for the education of the investors.	
11.	Facility for voluntary freezing	Facility for voluntary Freezing/Blocking of online Access of the trading account.	
12.	Investor Charter	Investor Charter for stockbroker and depository Participant. &.	
13.	Policies and Procedures.	Document describing significant policies and procedures of the Stockbroker	
14.	GTT Policies	Policy on Handling of Good Till Cancelled Orders offered by Members of Clients.	

VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCKBROKER

S.No	Name of the Document	Brief Significance of the Document	Page No.
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PART-A

MANDATORY DOCUMENTS

CHECKLIST FOR KYC (PLEASE TICK WHEREVER APPLICABLE)

CKYC Reference No. :

Valid Documents (Copies of all documents to be self attested)			Please Tick
PAN Card	Account Holder & Joint Holder's (If any)		
Photograph	One Colored Passport Size Photograph		
Additional Proof of Identity (Any One)	a. PAN Card	☐ KRA document used (Email Id to be provided on given KRA Form)	
	b. Voter ID		
	c. Valid Passport		
	d. Valid Driving License		
	e. Unique Identification Number (UID) (Aadhaar)		
	f. Other (Pls. Specify) _____		
Proof of Address (Any One) Permanent / Correspondence	a. Voter ID		
	b. Valid Passport		
	c. Valid Driving License	☐ KRA document used	
	d. Unique Identification Number (UID) (Aadhaar)		
	e. Bank Statement/Passbook (not more than 3 month old must contain complete address of client)		
	f. Electricity Bill (not more than 3 months old)		
	g. Resident landline Tel. Bill (not more than 3 month		
	h. Other (Pls. Specify) _____		
Bank Proof With MICR / IFSC Code (1st Holder only)	a. Bank Statement / Bank Passbook with cheque left (not more than 3 month old)		
	b. Bank's Certificate on letter head of the Bank (ORIFINAL)		
	c. Cancelled Personalized Cheque left		
Demat Proof (Any One) (1st Holder only)	a. Client Master (CML copy duly attested by DP)		
	b. DP Statemnt / Transaction cum Holding Statement (Duly attesed by DP)		
Proof of Income (Any One) Mandatory for Derivatives Segments (1st Holder)	a. Copy of latest ITR acknowledgment		
	b. In case of salary income - Salary Slip, Copy of Form 16		
	c. Net-worth certificate (Not more than 1 year old)		
	d. Copy of Demat Account Holding Statemnt (not more than 3 months old)		
	e. Bank Account Statement for last 6 month reflecting income		

Important instructions of Account Opening Form

01

Use capital letters for all entries.

02

Pen color must be black or blue.

03

Email and mobile numbers are mandatory.

04

KYC corrections must be counter-signed.

05

Strike-off any options that are not applicable.

06

All original documents are required for physical verification

07

Regional language proofs must be translated into English.

08

Sole proprietors must apply in their individual name.

09

Name and address must match submitted proofs

10

**Whiteners/
Correction fluids
should not be used
on the AOF**

Know Your Client (KYC)

Application Form (For Individuals Only)

Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked * are pertaining to CKYC and mandatory only if processing CKYC also



CDSL VENTURES LIMITED

....Exploring New Horizons

Intermediary
Logo

Application Number:

Application Type*: ☐ New KYC ☐ Modification KYC

KYC Mode*: Please Tick (✓)

☐ Normal ☐ EKYC OTP ☐ EKYC Biometric ☐ Online KYC ☐ Offline EKYC ☐ Digilocker

1. Identity Details (please refer guidelines overleaf)

PAN*

Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof)

Father's/ Spouse's Name *

Mother's Name *

Date of Birth*

Gender*

☐ Male ☐ Female ☐ Transgender

Marital Status*

☐ Single ☐ Married

Nationality*

☐ Indian ☐ Other _____

Residential Status*

☐ Resident Individual ☐ Non Resident Indian

Please Tick (✓)

☐ Foreign National ☐ Person of Indian Origin⁺

(Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC.
Select NRI or Foreign National based on Nationality of the individual)

 Cross signature across photograph

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

☐ A — Aadhaar Card XXXX XXXX _ _ _ _ _

(Expiry Date) _____

☐ B — Passport Number _____

☐ C — Voter ID Card _____

(Expiry Date) _____

☐ D — Driving License _____

☐ E — NREGA Job Card _____

☐ F — NPR _____

☐ Z — Others _____ (any document notified by Central Government)

Identification Number _____

2. Address Details* (please refer guidelines overleaf)

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Applicant e-SIGN/ Wet Signature



B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)		
Line 1* _____		
Line 2 _____		
Line 3 _____		
City/ Town/Village* _____ District* _____ Pin Code* _____		
State* _____ Country* _____		
Address Type* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified		
Proof of Address* (attested copy of any 1 POA for correspondence and permanent address each to be submitted)		
☐ A — Aadhaar Card	XXXX XXXX _ _ _ _ _	
☐ B — Passport Number	_____	(Expiry Date) _____
☐ C — Voter ID Card	_____	
☐ D — Driving License	_____	(Expiry Date) _____
☐ E — NREGA Job Card	_____	
☐ F — NPR Letter	_____	
☐ Z — Others	_____	(any document notified by Central Government)
Identification Number _____		
3. Contact Details (in CAPITAL)		
Email ID* _____	[] Self [] Spouse [] Dependent Children [] Dependent Parents	
Mobile No. * _____	[] Self [] Spouse [] Dependent Children [] Dependent Parents	
Tel (Off) _____	Tel (Res) _____	
4. Applicant Declaration		
I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it. I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only. DATE: _____ (DD-MM-YYYY) PLACE: _____	Applicant e-SIGN	Applicant Wet Signature 
5. For Office Use Only		
In-Person Verification (IPV) carried out by*	Intermediary Details*	
IPV Date _____ Emp. Name _____ Emp. Code _____ Emp. Designation _____	☐ Self certified document copies received (OVD) ☐ True Copies of documents received (Attested) AMC / Intermediary Name : 	

Know Your Client (KYC)
Application Form (For Non-Individuals Only)

Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked * are pertaining to CKYC and mandatory only if processing CKYC also


CDSL VENTURES LIMITED

....Exploring New Horizons

Application Number:

 Intermediary
Logo

 Application Type*: ☐ New KYC ☐ Modification KYC

1. Entity Details (please refer guidelines)

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Date of Incorporation* _____

Place of Incorporation* _____

Date of Commencement* _____

Registration Number* _____

Entity Type*

Please Tick (✓)

- | | | | |
|--|--|--|--|
| ☐ Private Ltd. Co. | ☐ Public Ltd. Co. | ☐ Body Corporate | ☐ Partnership |
| ☐ Trust/Charity/NGO | ☐ HUF | ☐ FPI Category I | ☐ FPI Category II |
| ☐ AOP | ☐ Bank | ☐ Government Body | ☐ Defence Establishment |
| ☐ Body of Individuals | | ☐ Society | ☐ LLP |
| ☐ Non-Government Organization | | | |
| ☐ Others _____ | | | |

2. Proof of Identity* (please refer the guidelines)

- ☐ Officially Valid Document(s) in respect of person authorized to transact
☐ Certificate of Incorporation/Formation _____ ☐ Registration Certificate _____
☐ Memorandum of Articles and Association ☐ Partnership Deed ☐ Trust Deed
☐ Board Resolution ☐ Power of attorney granted to its manager, office, employees to transact on its behalf
☐ Activity Proof -1* (For Sole Proprietorship Only) ☐ Activity Proof -2* (For Sole Proprietorship Only)

3. Address Details* (please refer guidelines overleaf)
A. Registered Address*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

B. Correspondence/Local Address in India (if different from above)*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Name & Signature of the Authorized Signatory

Proof of Address* (attested copy of any one POA to be submitted— [†] Not more than 3 months old)		
☐ Certificate of Incorporation/Formation ☐ Latest Telephone Bill* (Landline only) ☐ Registered Lease/ Sale Agreement of Office Premises ☐ Any other proof of address document (as listed overleaf)	☐ Registration Certificate ☐ Latest Electricity Bill* Validity/Expiry Date of POA (Expiry Date) ____	☐ Other document ☐ Latest Bank Account Statement*
4. Contact Details		
Email ID _____	Mobile No. _____	
Email ID _____	Mobile No. _____	
Tel (Off) _____	Fax _____	
5. Annexures Submitted		
Number of Related Persons - _____		
6. Remarks / Additional Information		
7. Applicant Declaration		
I hereby declare that the details furnished above are true and correct to the best of my/our 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/We are aware that I/We may be held liable for it. I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address. DATE: ____ (DD-MM-YYYY) PLACE: _____	Applicant Digital Signature (DSC)	Applicant Wet Signature  Signature of the Authorized Signatory
8. For Office Use Only		
KYC carried out by*	Intermediary Details*	
KYC Date _____ Emp. Name _____ Emp. Code _____ Emp. Designation _____	☐ Self certified document copies received (Originals Verified) ☐ True Copies of documents received (Attested) AMC / Intermediary Name OR Code: Centricity Securities Pvt. Ltd.	
Employee Signature and Stamp	Employee Signature and Stamp	

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Details of Promoters/ Partners/ Karta/ Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name (1)

PAN

Residential / Registered Address

City / Town / Village PIN Code

State Country

DIN/ UID

Relationship with Applicant (i.e. Promoters, whole time directors etc.)

Please tick, if applicable, for any of your authorized signatories/ Promoters/ Partners / Karta / Trustees and whole time directors:

Politically Exposed Person (PEP) ☐ Related to a Politically Exposed person (PEP) ☐

Any Other Information

Photographs of
Promoters / Partners /
Karta/ Trustees and
Whole Time Director

Name (2)

PAN

Residential / Registered Address

City / Town / Village PIN Code

State Country

DIN/ UID

Relationship with Applicant (i.e. Promoters, whole time directors etc.)

Please tick, if applicable, for any of your authorized signatories/ Promoters/ Partners / Karta / Trustees and whole time directors:

Politically Exposed Person (PEP) ☐ Related to a Politically Exposed person (PEP) ☐

Any Other Information

Photographs of
Promoters / Partners /
Karta/ Trustees and
Whole Time Director

Name (3)

PAN

Residential / Registered Address

City / Town / Village PIN Code

State Country

DIN/ UID

Relationship with Applicant (i.e. Promoters, whole time directors etc.)

Please tick, if applicable, for any of your authorized signatories/ Promoters/ Partners / Karta / Trustees and whole time directors:

Politically Exposed Person (PEP) ☐ Related to a Politically Exposed person (PEP) ☐

Any Other Information

Photographs of
Promoters / Partners /
Karta/ Trustees and
Whole Time Director

Name (4)

PAN

Residential / Registered Address

City / Town / Village PIN Code

State Country

DIN/ UID

Relationship with Applicant (i.e. Promoters, whole time directors etc.)

Please tick, if applicable, for any of your authorized signatories/ Promoters/ Partners / Karta / Trustees and whole time directors:

Politically Exposed Person (PEP) ☐ Related to a Politically Exposed person (PEP) ☐

Any Other Information

Photographs of
Promoters / Partners /
Karta/ Trustees and
Whole Time Director

NAME

Signature of the Authorised Signatory (ies) **Date**

'CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Legal Entity/ Other than Individuals

Important Instructions:

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



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

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

☐ Name*

Entity Constitution Type* ☐ Others (Specify) (Please refer instruction B at the end)

Date of Incorporation / Formation* Date of Commencement of Business

Place of Incorporation / Formation* Country of Incorporation / Formation* TIN or Equivalent Issuing Country

PAN * ☐ Form 60 furnished

TIN / GST Registration Number

2. PROOF OF IDENTITY (PoI)* (Please refer instruction B at the end)

☐ Officially valid document(s) in respect of person authorised to transact

☐ Certificate of Incorporation / Formation ☐ Registration Certificate Regn Certificate No.

☐ Memorandum and Articles of Association ☐ Partnership Deed ☐ Trust Deed

☐ Resolution of Board / Managing Committee ☐ Power of attorney granted to its manager, officers or employees to transact on its behalf

☐ Activity Proof - 1 (For Sole Proprietorship Only) ☐ Activity Proof - 2 (For Sole Proprietorship Only)

3. ADDRESS* (Please refer instruction C at the end)

3.1 Registered Office Address / Place of Business*

Proof of Address* ☐ Certificate of Incorporation / Formation ☐ Registration Certificate ☐ Other Document

Line 1*

Line 2

Line 3 City / Town / Village*

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

3.2 Local Address in India (If different from Above)*

Line 1*

Line 2

Line 3 City / Town / Village*

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

4. CONTACT DETAILS (All communications will be sent to Mobile number/ Email-ID provides" may be used)(Please refer instruction D at the end)

Tel. (Off) FAX

Mobile Email ID

Mobile Email ID

5. NUMBER OF RELATED PERSONS ☐ (Please refer instruction E at the end)

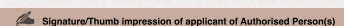
6. REMARKS (If any)

7. APPLICATION DECLARATION (Please refer instruction G at the end)

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

Date : Place:

[Signature / Thumb Impression]



8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ Equivalent e-document ☐

KYC VERIFICATION CARRIED OUT BY

Identity Verification ☐ Done Date

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

INSTITUTION DETAILS

Name

Code

[Institution Stamp]

Annexure A2 | Legal Entity / Other than Individuals

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

Important Instructions:

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



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

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

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details
KYC Number of Related Person (if available*) If KYC number is available, only 'Related Person Type' & 'Name' is mandatory

Related Person Type* ☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointment Official ☐ Proprietor
☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify)

DIN (Director Identification Number) (Mandatory if Related Person Type is Director)

1.1 PERSONAL DETAILS (Please refer instruction E at the end)

Prefix First Name Middle Name Last Name
Name* (Same as ID proof)
Maiden Name
Father / Spouse Name
Mother Name
Date of Birth* -
Gender* ☐ M- Male ☐ F- Female ☐ T-Transgender
Nationality* ☐ IN- Indian ☐ Others (ISO 3166 Country Code)
PAN* ☐ Form 60 furnished

1.2 PROOF OF IDENTITY AND ADDRESS* (Please refer instruction E at the end)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number
☐ B-Voter ID Card
☐ C- Driving Licence
☐ D-NREGA Job Card
☐ E- National Population Register Letter
☐ F - Proof of Possession of Aadhaar
II ☐ E-KYC Authentication
III ☐ Offline verification of Aadhaar

☐ PHOTO



 Cross Signature across photograph

Address

Line 1*
Line 2
Line 3
District* Pin / Post Code* City / Town / Village* State / U.T Code* ISO 3166 Country Code*

1.3 CURRENT ADDRESS DETAILS (Please refer instruction E at the end)

☐ Same as above mentioned address (In such cases address details as below need not be provided)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number
☐ B-Voter ID Card
☐ C- Driving Licence
☐ D-NREGA Job Card
☐ E- National Population Register Letter
☐ F - Proof of Possession of Aadhaar
II ☐ E-KYC Authentication
II ☐ Offline verification of Aadhaar
IV ☐ Deemed PoA
V ☐ Self Declaration

Address

Line 1*
Line 2
Line 3
District* Pin / Post Code* City / Town / Village* State / U.T Code* ISO 3166 Country Code*

1.4 CONTACT DETAILS (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction D at the end)

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

2. APPLICANT DECLARATION

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

Date : - Place:

 Signature / Thumb Impression

3. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification
☐ Digital KYC process ☐ Equivalent e-document

KYC VERIFICATION CARRIED OUT BY

Date -
Emp. Name
Emp. Code
Emp. Designation
Emp. Branch

INSTITUTION DETAILS

Name
Code

[Employee Signature]

[Institution Stamp]

FATCA & CRS Declaration - Individual

Please fill the information below as requested	First Account Holder	Second Account Holder	Third Account Holder
Name of the Account Holder			
Maiden Name (if any)			
Father's Name (mandatory)			
Spouse's Name			
Marital Status	Married Unmarried Other	Married Unmarried Other	Married Unmarried Other
Nationality	Indian Others _____	Indian Others _____	Indian Others _____
Aadhaar No.			
Identification Type Documents submitted as proof of identity of the individual	PAN Other (pls. Specify) _____	PAN Other (pls. Specify) _____	PAN Other (pls. Specify) _____
Please mention your Residential Status if it is any one of these	Resident Individual Non Resident Indian Foreign National Person of Indian Origin	Resident Individual Non Resident Indian Foreign National Person of Indian Origin	Resident Individual Non Resident Indian Foreign National Person of Indian Origin

Are you a tax resident (i.e. are you assessed for Tax) in any other country other than India ? ☐ Yes ☐ No

If 'Yes', please fill for all countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries

S. No.	Country of Tax Residency	Tax Identification Number (TIN) or Functional Equivalent	Identification Type (TIN or other, please specify)	If TIN is not available, please tick (3) the reason A, B or C [as defined below]
1.				→ ReasonA B C
2.				→ ReasonA B C

- Reason A → The country where the Account Holder is liable to pay tax does not issue TIN to its residents.
- Reason B → No TIN required [Select this reason only if the authorities of the respective country of tax residence do not required the TIN to be collected]
- Reason C → Others – Please specify the reasons _____

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. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations.

I/We authorize Its Associates/ subsidiaries to authenticate data in with UIDAI (Authentication) Regulations.



First Applicant



Second Applicant



Third Applicant

Date: _____

Place : _____

PAN		Trading Code		Client ID	
Name					

Please tick the applicable tax resident declaration -

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

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

Sr. No.	Country	Tax Identification Number	Identification Type (TIN or Other ^{xx} , please specify)
1.			
2.			

In case Tax Identification number is not available, Kindly provide its functional equivalent.

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

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

In case Tax Identification number is not available, Kindly provide its functional equivalent.

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

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

I. We are a, Financial institution ☐ (Refer I of Part C) or Direct reporting NFE ☐ (Refer 3(vii) of Part C) (please tick as appropriate)	GIIN Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below Name of sponsoring entity
GIIN not available(please tick as applicable)	☐ Applied for ☐ Not obtained - participating FI ☐ Not required to apply for - please specify 2 digits sub-category (Refer I A of Part C)

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

1.	Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)	Yes ☐ (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of Stock Exchange _____
2.	Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)	Yes ☐ (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company _____ Nature of relation: ☐ Subsidiary of the Listed Company or ☐ Controlled by a Listed Company Name of Stock Exchange _____
3.	Is the Entity an active NFE (Refer 2c of Part C)	Yes ☐ Nature of Business _____ Please specify the sub-category of Active NFE (Mention code - refer 2c of Part C)
4.	Is the Entity a passive NFE (Refer 3(ii) of Part C)	Yes ☐ Nature of Business _____

UBO Declaration (Mandatory for all entities, a Publicly Traded Company or a related entity of Publicly Traded Company)

Category (Please tick applicable category):

☐ Unincorporated association / body of individuals	☐ Unlisted Company	☐ Partnership Firm	☐ Limited Liability Partnership Company
☐ Others (please specify _____)	☐ Public Charitable Trust	☐ Religious Trust	☐ Private Trust

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

Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form WB BEN E (Refer 3(vi) of Part C)

Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3(iv) (A) of Part C)			
Country of Tax Residency*			
PAN*			
Address	Zip State: _____ Country: _____	Zip State: _____ Country: _____	Zip State: _____ Country: _____
Address Type	☐ Residence ☐ Business ☐ Registered Office	☐ Residence ☐ Business ☐ Registered Office	☐ Residence ☐ Business ☐ Registered Office
Tax ID [%]			
Tax ID Type			
City of Birth			
Country of Birth			
Occupation Type	☐ Service ☐ Business ☐ Others _____	☐ Service ☐ Business ☐ Others _____	☐ Service ☐ Business ☐ Others _____
Nationality			
Father's Name			
Gender	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Holding (%) ^{\$}			

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

IF UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like director / Sector of Trust / Protector of Trust to be specified wherever applicable.

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

\$ Attach valid documentary proof like Shareholding pattern duly self-attested by Authorized Signatory / Company Secretary

DECLARATION

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Centricity Securities Pvt. Ltd. for any modification to this information promptly. I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS.

Name	
Designation	
Sign here : (I) 	
Date :	DD - MM - YY YY
Place :	

Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest CSPL branch or you can dispatch the hard copy to

Centricity Securities Private Limited
 Unit 207A&207B Tower-B global Business
 Park Gurugram haryana-122002

MANDATORY DOCUMENT
ANNEXURE - 3
TRADING ACCOUNT RELATED DETAILS FOR INDIVIDUAL & NON-INDIVIDUAL
A. BANK ACCOUNT(S) DETAILS (Through which transactions shall generally be routed)

Bank Name	Branch Address	Account Number	Account Type	MICR Number	IFSC Code
			☐ Saving ☐ Current ☐ Others - in case of NRI / NRE / NRO		

B. DEPOSITORY ACCOUNT(S) DETAILS (Through which transactions shall generally be routed)

Depository Participant Name	Name of Depository	Beneficiary Name	DP ID	Beneficiary ID (BO ID)
	☐ NSDL ☐ CDSL			
	☐ NSDL ☐ CDSL			
	☐ NSDL ☐ CDSL			

C. TRADING PREFERENCES

Exchanges	NSE & BSE	
All Segments	Cash NSE, BSE	NSE, BSE F&O
	✓	✓

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

D. OTHER DETAILS

☐ Gross Annual Income Details (please specify)
☐ Below ₹ 1 Lac
☐ ₹ 1 Lac to 5 Lac
☐ ₹ 5 Lac to 10 Lac
☐ ₹ 10 Lac to 25 Lac
☐ ₹ 25 Lac to 1 Crore
☐ > ₹ 1 Crore

☐ Net Worth (Net worth should not be older than 1 year) Amount Rs..... as on (date) (Compulsory for Non-Individuals)

☐ Occupation (please tick any one and give brief details) :
☐ Private Sector
☐ Public Sector
☐ Government Service
☐ Business
☐ Professional
☐ Agriculturist
☐ Retired
☐ Housewife
☐ Student
☐ Others _____ Please Specify

☐ Please tick, if applicable (Note : In case of non-individuals please tick, if applicable for any of your authorised signatories/ Promoters/Partners/Karta/Trustees/whole time directors) :
☐ Politically Exposed Person (PEP)
☐ Related to Politically Exposed Person (RPEP)
☒ Not a Politically Exposed Person (PEP)
☒ Not Related to Politically Exposed Person (RPEP)

☐ Any other information :

Risk Category ☐ Low ☐ Medium ☐ High ☐

BROKERAGE STRUCTURE

EQUITY SEGMENT		
Brokerage Slab	Slab in %	Minimum per Share
Delivery Based		
Intraday		
F & O SEGMENT		
Brokerage Slab	Slab in %	Minimum per Share / Lot
Future		
Options		

Disclaimer:

1. Transaction & Clearing Charges, Stamp duty, GST, SEBI Fee, STT, and all legal levies as may be applicable from time to time shall be charged separately in addition to the brokerage.
2. Late payment penalty 18% p.a. calculated on daily overdue balance shall be charged till actual realization.
3. turnover shall be charged separately.
4. Charges/ service standards are subject to revision at sole discretion of CSPL
5. Charges quoted above are for the services listed. Any service not quoted above will be charged separately.
6. If the client's contract note email bounce, a charge of ₹25 will be applicable for the physical contract note.

Note: - Brokerage will not exceed the rates specified by SEBI and the Exchanges. All Statutory and Regulatory charges will be levied as per exchange, SEBI and depository circulars published from time to time.

Client Signature/Auth. Signatory (ies)



MANDATORY DOCUMENT
E. DEALING THROUGH AUTHORISED PERSON AND OTHER STOCK BROKERS

If client is dealing through the Authorised Person, provide the following details :

Name of the Authorised Person :

Authorised Person SEBI Regn. No. :

Authorised Person's Address :

Authorised Person's Phone/Fax No.:

Authorised Person's Website :

Whether dealing with any other stockbroker / Authorised Person (In case dealing with multiple stock brokers / Authorised Person, please provide details of all)

Name of the stockbroker :

Name of Authorised Person (If any) :

Client Code (UCC) :

Exchange :

Details of disputes / dues pending from / to such stockbroker / Authorized Person

(Please Specify)

F. 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 :

.....

.....

G. ADDITIONAL DETAILS

Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify) :

.....

Specify your Email id, if applicable:

Whether you wish to avail of the facility of internet trading/ wireless technology (please specify):

.....

Number of years of Investment/Trading Experience: ☐ 0-3 ☐ 3-7 ☐ 7-10 ☐ >10

H. GST DETAILS (As applicable, Statewise)

Legal Name			
Trade Name			
GSTIN		Registration Date	
Name of the State		State Code	
Other State GSTIN		Registration Date	
Name of the State		State Code	

MANDATORY DOCUMENT**DISCLOSURE OF PROPRIETARY TRADING BY CENTRICITY SECURITIES PVT. LTD.**

Dear Client,

In terms of SEBI circular No. SEBI/MRD/SEC/Cir-42/2003 dated 19th November 2003, member is required to disclose to its client about the proprietary trades.

In view of this circular, we wish to inform you that we do proprietary trades in the Cash, F&O Segment of NSE, BSE .

Kindly take note of the above & oblige.

PMLA - DECLARATION

I _____ having the trading code no. _____ with CCSL confirm and declare that I have read and understood the contents and the provisions of the PMLA Act, 2002 and it was also explained by CCSL official. I further declare that I shall adhere to the rules and regulations and requirements mentioned in the PMLA Act, 2002.



Sole / First Applicant Signature

DECLARATION

1. The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts.
2. I/We further confirm having read and understood the contents of the Documents on policy and procedures of the stockbroker and tariff sheet with DP and trading '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.
3. 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.
4. I/We have also been informed that the standard set of documents has been displayed for Information on stockbroker's website www.oneinvest.co.in.



First Applicant Signature

DP ID: Centricity Securities Pvt. Ltd. 207A & 207B, Tower-B, Global Business Park, Gurugram, Haryana-122002					Client –ID UCC Code -																			
I/We request you to open a depository account in my/our name as per the following details: <i>(Please fill all the details in CAPITAL LETTERS only)</i>															Date		D	D	M	M	Y	Y	Y	Y
A	Details of Account holder(s):																							
	Account holder(s)	Sole/ First Holder					Second Holder					Third Holder												
	Name																							
	PAN																							
	Occupation <i>(please tick any one and give brief details)</i>	☐ Private Sector		☐ Agriculturist			☐ Private Sector		☐ Agriculturist			☐ Private Sector		☐ Agriculturist										
		☐ Public Sector		☐ Retired			☐ Public Sector		☐ Retired			☐ Public Sector		☐ Retired										
		☐ Government Service		☐ Housewife			☐ Government Service		☐ Housewife			☐ Government Service		☐ Housewife										
☐ Business		☐ Student			☐ Business		☐ Student			☐ Business		☐ Student												
☐ Professional		☐ Others (Please specify; _____)			☐ Professional		☐ Others (Please specify; _____)			☐ Professional		☐ Others (Please specify; _____)												
Brief details:																								
B	For Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name & PAN of the Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned below:																							
	a) Name										b) PAN													
C	Type of account																							
	☐ Ordinary Resident					☐ NRI-Repatriable					☐ Promoter					☐ HUF								
	☐ Qualified Foreign Investor					☐ NRI-Non Repatriable					☐ Trust					☐ Mutual Fund								
	☐ Margin					☐ CM					☐ FI					☐ Others (Please specify)								
	☐ Foreign National					☐ Body Corporate					☐ FII					☐ AOP for holding the permitted securities								
D	Gross Annual Income Details																							
	Income Range per annum (please tick any one)																							
	☐ Below 1 lac					☐ 1- 5 lac					☐ 5- 10 lac													
☐ 10- 25 lac					☐ More than 25 lac																			
D.1	Income Details (please specify)																							
	Income Range per annum										and	Networth												
	☐ Below ` 20 Lac					☐ ` 50 Lac – 1 crore						Amount (₹) _____												
	☐ ` 20 – 50 Lac					☐ Above ` 1 crore						As on (date) <table border="1" style="display: inline-table; text-align: center; width: 100px;"> <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> </table>					D	D	M	M	Y	Y	Y	Y
	D	D	M	M	Y	Y	Y	Y																
(Networth should not be older than 1 year)																								
E	In case of NRIs/ Foreign Nationals																							
	RBI Approval Reference Number																							
	RBI Approval date										D	D	M	M	Y	Y	Y	Y						
F	Bank details																							
	1	Bank account type ☐ Savings Account ☐ Current Account ☐ Others (Please specify) _____																						
	2	Bank Account Number																						
	3	Bank Name																						

4	Branch Address												
		City/town/village				PIN Code							
		State				Country							
5	MICR Code												
6	IFSC												
G	Please tick, if applicable: ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP)												
H	Standing Instructions												
1	I/We authorize you to receive credits automatically into my/our account.								☐ Yes	☐ No			
2	Account to be operated through Power of Attorney (POA)								☐ Yes	☐ No			
3	Account to be operated through Demat Debit and Pledge Instruction (DDPI)								☐ Yes	☐ No			
4	SMS Alert facility: <i>[Mandatory if you are giving Power of Attorney (PoA/DDPI). Ensure that the mobile number is provided in the KYC Application Form]</i>												
	Sr. No.	Holder						Yes	No				
	1	Sole/First Holder						☐	☐				
	2	Second Holder						☐	☐				
	3	Third Holder						☐	☐				
5	Mode of receiving Statement of Account <i>[Tick any one]</i>		☐ Physical Form ☐ Electronic Form <i>[Read Note 3 and ensure that email ID is provided in KYC Application Form].</i>										
6	For Joint accounts, communication to be sent to <i>(See Note 5)</i>		☐ First holder ☐ All joint account holders										
H.1	Clearing Member Details (to be filled up by Clearing Members only)												
1	Name of Stock Exchange												
2	Name of Clearing Corporation/ Clearing House												
3	Clearing Member ID												
4	SEBI Registration Number												
5	Trade Name												
6	CM-BP-ID (to be filled up by Participant)												
I)	Guardian Details <i>(where sole holder is a minor):</i> <i>[For account of a minor, two KYC Application Forms must be filled i.e. one for the guardian and another for the minor (to be signed by guardian)]</i>												
	Guardian Name												
	PAN												
	Relationship of guardian with minor												
J)	Nomination Option												
	☐ I/We wish to make a nomination. <i>[Details are provided in Nomination Form Prescribed by SEBI]</i>						☐ I/We wish to opt out of a nomination. <i>[Declaration Form opting out of nomination as prescribed by SEBI]</i>						
K)	List of family members (Separate Annexure maybe used in case number of members is higher)												
	Sr No.	Name of Coparcener/Member	Gender	Date of Birth	Relation with Karta	with	Whether Coparcener/Member (please specify)						

L)	Mode of Operations for Joint Accounts
	☐ Jointly ☐ Anyone of the holder or survivor(s)
	If Mode of Operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations such as transfer of securities including Inter-Depository Transfer, pledge / hypothecation / margin pledge / margin re-pledge (creation, closure and invocation and confirmation thereof as applicable) of securities and freeze/unfreeze of account and / or securities and / or specific number of securities will be permitted.

Declaration

The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by us and we have understood the same and we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. We hereby declare that the details furnished above are true and correct to the best of our knowledge and belief and 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, we are aware that we may be held liable for it. I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

(Additional declaration applicable only for AoPs for opening of demat accounts in the name of Association of Persons (AoP) itself for holding the permitted Securities)

- I/we confirm that the AoP holds only such securities in dematerialized form as permitted by the statutes governing its constitution.
- I/we confirm that the demat account is not be used for subscribing / holding other than the permitted securities.

Authorised Signatories (Enclose a Board Resolution for Authorised Signatories. In case of HUF details of Karta to be given)

Name(s) of holder(s)		Signature(s) of holder
Sole/ First Holder/ Guardian (in case sole holder is minor) (Mr./Ms.)		X
Second Holder (Mr./Ms.)		X
Third Holder (Mr./Ms.)		X
Sole/First Holder	Name	Signature(s)
First Signatory/Karta of HUF		X
Second Signatory		X
Third Signatory		X
<u>Other Holders</u>		
Second Holder		X
Third Holder		X
☐ As per resolution		

Mode of Operation for Sole/First Holder (In case of joint holdings, all the holders must sign. In case of HUF this is not applicable)	
☐ Any one singly	
☐ Jointly by	
☐ As per resolution	
☐ Others (please specify)	

Notes:

- In case of additional signatures, separate annexures should be attached to the application form.
- Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
- For receiving Statement of Account in electronic form:
 - Client must ensure the confidentiality of the password of the email account.
 - Client must promptly inform the Participant if the email address has changed.
 - Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
- Strike off whichever is not applicable.

=====

ADDITIONAL DETAILS

Account statement requirement ☐ As per SEBI Regulation ☐ Monthly ☐ Fortnightly ☐ Weekly ☐ Daily

I/We instruct the DP to receive each and every credit in my / our account ☒ Yes ☐ No

I/We wish to receive dividend/interest directly into my/our Bank A/c through ECS
 (If not marked, the default option would be 'Yes'. ECS is mandatory for locations notified by SEBI from time to time.) ☐ Yes ☐ No

I/We request you to send Electronic Transaction-Cum-Holding Statement through E-mail
 Please mention E-mail ID in KYC form (Page A1-Individual / A3-Non-Individual) ☐ Yes ☐ No

SMS Alert Facility on Mobile Number as given in KYC Form ☐ Yes ☐ No
 Refer to T&C given as **Annexure-B** (Mandatory, If you have given PoA. If POA is not granted and you do not wish to avail of this facility, cancel this option)

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, default option will be 'No') ☐ ☐ No

I/We would like to share the E-mail ID with the RTA. ☐ ☐ No

I/We would like to receive the annual report (If not marked, default option will be 'Physical') ☐ Physical ☐ Electronic

Mode of receiving standard documents Mentioned of demat and trading ☐ Physical ☐ Electronic

Rights and obligation RDD and Do's and Don't etc to be sent through ☐ Physical ☐ Electronic

Do you have GST No., If yes please provide (please attach certificate)

Declaration - Same Mobile Number or Email Address

[Please tick (✓) wherever applicable]

DP ID		CLIENT ID		DATE	
Name of Account Holder					
☐ Mobile Number					
☐ Email ID					
I hereby declare that the aforesaid mobile number or E-mail id belongs to ☐ Me ☐ spouse ☐ Dependent children					
☐ Dependent Parents					
Signature of First Holder					
Name of First Holder					

Transactions Using Secured Texting Facility (TRUST)
☐ Yes

☐ No

I / We wish to avail the TRUST facility using the mobile number registered for SMS alert facility. I have read and understood the Terms & Conditions prescribed by CDSL for the same. (Refer to T&C given below)

I / We wish to register the following clearing member ID under my / our below mentioned BOID registered for TRUST

Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)
NSE	Globe Capital Market Limited	
BSE	Globe Capital Market Limited	

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

- Definitions:
In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:
 - "Depository" means Central Depository Services (India) Limited (CDSL)
 - TRUST means "Transactions Using Secured Texting" service offered by the Depository.
 - "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.
 - "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.
 - "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
- 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.
- 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.
- 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.
- 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.
- Disclaimer:
Depository shall be absolved of any liability in case:-
 - There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
 - 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.
 - There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.

DECLARATION

I/We have received and read the Rights & 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.

	Sole / First Holder / Authorised Signatory	Second Holder / Authorised Signatory	Third Holder / Authorised Signatory
Designation			
Signature			

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

Terms and Conditions-cum-Registration/ Modification Form for receiving SMS Alerts from CDSL.

Definitions:

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

- "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
- DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
- 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.
- SMS means "Short Messaging Service"
- "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
- "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.
- "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

- The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
- The service is currently available to the BOs who are residing in India.
- 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.
- 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.
- 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:

- 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.
- 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.
- 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.
- The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.

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

BOID

1	2	0																	
---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Please write your 8 digit DPID) (Please write your 8 digit Client ID)

Mobile Number on which messages are to be sent

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

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

The mobile number is registered in the name of : _____

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

CLIENT SIGNATURE			
	First / Sole Holder	Second Holder	Third Holder
Sign of Client			

- The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
- The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.
- 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.
- 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.
- If the BO finds that the information such as mobile number etc., has been changed with out proper authorization, the BO should immediately inform the DP in writing.

Fees:

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

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not 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.

DP ID : IN _____

DP ID : _____

CHARGES FOR DEPOSITORY SERVICES

Particular	BSDA	Individual	Corporate
Document Charges (Onetime)	Nil	Nil	Nil
Annual Maintenance Charges	Up to 4 lac AMC will be nil, 4lac To 10 lac AMC will be Rs. 100 then account will be converted in normal AMC	Rs. First year Free Then Rs.. 200 +GST per year or Life time AMC Rs.. 2000	Rs. 1000+GST Or Life time AMC Rs. 10,000/-
Rematerialization	Rs. 150 Per RRF & Courier Charges.	Rs. 150 Per RRF & Courier Charges.	Rs. 150 Per RRF & Courier Charges.
Custodian Charges	Not Applicable	Not Applicable	Not Applicable
Purchase (Market & Off Market)	Nil	Nil	Nil
Sales (Market & Off Market)	RS. 15 + GST per Transaction If First holder is women Rs.. 10 + GST	RS. 15 + GST per Transaction If First holder is women Rs.. 10 + GST	RS. 15 + GST per Transaction If First holder is women Rs. 10+ GST
Margin Pledge Creation, Closure, Invocation, Repledge	Rs. 20 + GST	Rs. 20 + GST	Rs. 20 + GST
Pledge Creation, Closure, Invocation (LAS)	Rs. 50 + GST	Rs. 50 + GST	Rs. 50 + GST

Note:-

- Rs. 50 to 100/- per request/booklet will be charged for additional DIS requisition.
- Charges levied on account of cheques return, wrong reporting of cheques, DP scheme charges, issue of duplicate statements etc. may be recovered from your account.
- Clearing charges would be charged extra wherever applicable as per the prevailing rates.
- Failed transaction charge Rs. 30 per transaction, statement and CMR request on mail free and physical Rs. 25., KYC modification request Rs. 50, KRA upload Download Rs. 50, Mutual Fund redemption and conversion Charges Nil, Off market transfer If other depository Rs.25 to 100 per ISIN. NDU 0.02% of the value of securities upon creation of hold subject to a minimum of ₹ 50/-.
- The Outstanding dues will attract interest @ 18 % p.a. (compounded) .
- Advance Payment Rs. 500 Adjustable from bill.
- ₹ 50/- for every hundred securities or part thereof subject to maximum fee of ₹ 5,00,000/-; or flat fee of ₹ 50/- per certificate, whichever is higher .
- No rematerialisation fee charged for Government Securities.
- In case CDSL account then outstanding views will attract interest @13 % per annum (compounded).

Note: Settlement Fee: A settlement fee at the rate of Rs. 4.00 per debit instruction will be charged will be charged by the NSDL from the depository Participant.

DECLARATION FOR BASIC SERVICES DEMAT ACCOUNT (BSDA)

Annexure I

To,

Centricity Securities Pvt. Ltd.

DP ID- IN304924

Unit no. 207A&B Tower- B, Global Business
Park, M.G Road Gurugram Haryana-122002.

Date:

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

With reference to my / our application for opening a depository account, I/ We request you to open my / our depository account as per the following details:

	Name	PAN							
Sole/First Holder									
Second Holder									
Third Holder									

I/We have read and understood the Securities and Exchange Board of India's guidelines for facility for a BSDA.

I/We are aware that if I/we are eligible to open a depository account as a BSDA, the account shall be opened as a BSDA.

I/We also understand that in case, I/We at any point of time do not meet the eligibility criteria as a BSDA holder, my / our demat account is liable to be converted to regular account.

I/We also state that if at any time choose to opt out of BSDA i.e. avail the facility of regular account the same will be communicated to the Participant from Sole / First Holder registered email ID.



First Holder Signature/ Auth. Signatory (ies)



2nd Holder Signature/Auth. Signatory(ies)



3rd Holder Signature/Auth. Signatory(ies)

Annexure-A

Nomination for Demat Account and MF Folios

Mandatory Details

1. I / We wish to make nomination [as per details given below]

(You can nominate upto 3 Persons)

	Details	1st Nominee	2nd Nominee	3rd Nominee
1	Name of the nominee*			
2	Relationship with the Applicant			
3	Date of Birth (to be provided in case the nominee is a minor)			

2. I want the following nomination details to be printed in the account / holding statements (tick one of the boxes below):

- ☐ Name of the Nominee(s)
- ☐ Whether nomination given: Yes / No (not name of the nominee)

3. Optional details of nomination:

	Details	1st Nominee	2nd Nominee	3rd Nominee
a)	% Share of nominee** (equal share if % is not specified)			
b)	Mobile of nominee*** (Please note that the DP / MF RTA will be able to reach out to your nominee if you provide the contact details)			
c)	Email ID of nominee*** (Please note that the DP / MF RTA will be able to reach out to your nominee if you provide the contact details)			
d)	Specify Personal identifier document • Aadhaar (last four digit), PAN, Driving Licence, Passport ***			
Any odd lot after division shall be transferred to the first nominee mentioned in the form. * The aforesaid details shall be optionally provided for the Guardian, in case of nominee is a minor.				

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

****If nomination is submitted:

- **Online:** validate through Digital Signature Certificate or Aadhaar-based e-sign or by using any other e-sign facility recognized under Information Technology Act, 2000 or two factor authentication (2FA) in which one of the factors shall be a One-Time Password (OTP) sent to the registered mobile number and email address.
- **Physical / offline:** wet signature (signature of witness shall not be required). However, if thumb impression (instead of wet signature) is affixed, then the same shall be witnessed by two persons and details of such witnesses (name and address) shall be duly provided in this form.

Annexure-B

Declaration for Opting out of Nomination

I hereby confirm that I do not wish to appoint any nominee(s) to my demat account/ mutual fund folio at this point of time.

I understand that –

- (i) The nomination helps to quickly identify the person for transfer of securities and helps in faster and smoother transmission of my securities to my legal heir(s) after my demise.
- (ii) In the absence of a nomination, my legal heir(s) may require the submission of certain additional legal or court-issued documents which may delay the process of transmission of securities to my legal heir(s).
- (iii) If no claim is made on the account / folio for a prolonged period after my demise, the holdings may be treated as unclaimed assets, and they may be transferred to Investor Education and Protection Fund Authority (IEPF) in accordance with the applicable regulatory framework.

I confirm that I have understood the above implications and that my decision to opt out of nomination is voluntary.

Name and Signature of Holder

 First Holder Signature/ Auth. Signatory (ies)	 2nd Holder Signature/Auth. Signatory(ies)	 3rd Holder Signature/Auth. Signatory(ies)
Holder Name	Holder Name	Holder Name

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.

 Clients Signature/Auth. Signatory (ies)

PART-B

VOLUNTARY DOCUMENTS

Demat Debit and Pledge Instruction

DP ID: _____
 Client ID: _____
 Client Name: _____
 Date: _____

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/ Authorised Signatory	2nd Holder/ Authorised Signatory	3rd Holder/ Authorised Signatory
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/ Authorised Signatory	2nd Holder/ Authorised Signatory	3rd Holder/ Authorised Signatory
3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms			
		1st Holder/ Authorised Signatory	2nd Holder/ Authorised Signatory	3rd Holder/ Authorised Signatory
4.	Tendering shares in open offers through Stock Exchange platforms			
		1st Holder/ Authorised Signatory	2nd Holder/ Authorised Signatory	3rd Holder/ Authorised Signatory

* the same may be signed physically against each purpose of DDPI. The same may also be eSigned. In case of eSign, client shall be given an option for choosing the specific purpose(s) of DDPI.

Terms and Conditions

1. The Client shall maintain such Margin as may be stipulated by Centricity Securities Private Limited ("CSPL") or prescribed by authorities from time to time. In case the Client does not provide the required Margin within the time frame stipulated by CSPL, then CSPL shall take such other action as it may think fit and proper. CSPL may require the Client to pay additional Margin immediately in case of high volatility.
2. The Client undertakes to monitor the adequacy of the collateral on a continuous basis.
3. The Client shall monitor margin shortfall as required from time to time, and whether or not any margin call is made or such other separate communication to that effect is sent by CSPL to the Client and /or whether or not such communication is received by the Client to avoid any liquidation.
4. The Client agrees that CSPL may at its discretion, in accordance with its risk management policy, disable trading in certain securities or square off all open positions in such scrip which are not converted to delivery irrespective of margin availability. Client agrees that CSPL cannot be held liable for any losses arising out of such disablement or squaring off of such security.
5. CSPL as a risk containment measure shall have the discretion to square off/sell all or some of the client positions/ collaterals/securities, without any notice to the client.
6. The Client is responsible for all orders, including any orders that may be executed without the required Margin in the Client's account.
7. CSPL shall have the discretion to allow or disallow trading by the client in certain scrips / contracts /products / services.
8. No transaction request shall be assumed to be executed / modified until a confirmation from CSPL is received by the Client.
9. The client authorizes CSPL to close out the transactions in case the Client fails to make full payment to CSPL or if there is debit in client's account with CSPL. Also, may square off open client's margin/ leveraged positions in case the scrip price is nearing its daily price band or due to any adverse development concerning the client's position or scrip.
10. The client agrees that CSPL shall not be liable for non-execution or delay in the execution of any order due to system/network issue or due to any reason beyond the control of CSPL.
11. The client shall pay to CSPL outstanding debit balance if any in their account from time to time without any delay. In case of delay, interest on delayed payment shall be charged on outstanding amount including on interest amount already charged as per rates mentioned in Tariff Sheet for Trading and Demat.
12. The losses incurred on client's account will be to the account of the client only. Neither CSPL nor any of its employees/agents shall in any circumstances be liable for any loss, lost profits, cost, liability, expense or damage occurred to the client.
13. The client authorize CSPL to obtain details in relation to the transactions and balances in respect of the securities held in their demat account for the purpose of collating and displaying details under "Portfolio" Section. The client acknowledges that the Portfolio service is being provided as an add on facility and for client convenience/ Information only and CSPL shall not be liable for any inaccurate display of data due to any unintended error etc.
14. The client authorizes CSPL to deposit/pledge or repledge from time to time client's collateral and deposits with the Exchanges/Clearing Corporation for meeting client's margin requirements and other obligations.
15. The client authorizes CSPL to provide the communications through SMS/WhatsApp and/or telephone calls on the registered mobile number(s), even if the clients contact number is registered with the National Do Not Call Registry ("NDNC") etc. The client confirms that they shall not make any complaint to the TRAI/ Service provider in relation to any call/communications received from CSPL and shall not hold CSPL liable.
16. The client authorizes CSPL to provide the communications through SMS/WhatsApp and/or telephone calls on the registered mobile number(s), even if the clients contact number is registered with the National Do Not Call Registry ("NDNC") etc. The client confirms that they shall not make any complaint to the TRAI/ Service provider in relation to any call/communications received from CSPL and shall not hold CSPL liable.

Terms and Conditions

17. The client authorizes CSPL to set off outstanding in any of the account of the client against credits available or arising in any other accounts segments/exchanges maintained with CSPL.
18. The client authorizes CSPL to use the client account details/KYC details/ registered telephone numbers/TIN etc. as method of verification of the client's identity as the caller and then take orders, instructions from the caller over the phone. All such orders, instructions etc. shall be deemed to have been placed by the client and binding on the client.
19. The Client acknowledges that they are fully aware of and understands the risks associated with availing of the services for routing orders over the telephone including the risk of misuse and unauthorized use of their details and/or username and/or TPIN by a third party. The Client agrees that they shall be fully liable and responsible for any and all unauthorized transactions and unauthorized use of the above.
20. The client agrees that non-receipt of bounced mail notification by CSPL shall amount to delivery of the contract note at the email ID of the client.'
21. The Trading Member may keep the unutilized margin deposits of the client in bank deposits in accordance with regulatory guidelines issued from time to time. However, no interest shall be passed on to the client earned for such deposits.
22. Without prejudice to other rights and obligations of the parties, the client understand and agrees that CSPL may levy additional charges including Annual Maintenance charges and all charges with respect to Client Demat account for any service rendered by CSPL and as may be required by the client and recover from the client at all reasonable costs, as may be incidental or consequential for rendering the said services. The said charges will be debited to the clients Trading Ledger account with CSPL and it shall be binding on the client.
23. Aadhaar and Digi Locker Authorization: The Client agree to submit their Aadhaar number and voluntarily provide their consent as under: The Client hereby authorizes CSPL to use their Aadhaar Number and fetch data from UIDAI for verification. Further on, the client's Aadhaar Number is to be updated for their Trading / Demat account with CSPL. The client also authorize CSPL to link their Aadhaar number to their Trading / Demat Account, Biometric and/or One Time Pin (OTP) data (and/or any similar authentication mechanism) for Aadhaar based authentication for availing CSPL services. The client understand that CSPL will use Demographic Authentication service provided by UIDAI in authenticating the customer where CSPL doesn't take physical copy of the Aadhaar letter. The client hereby give their consent to CSPL for sharing their Aadhaar number mapped to their accounts with government agencies/Stock Exchanges/ Depositories/ Clearing Corporation/ Registrars & Transter Agents after authentication. The client hereby agree to carry out online KYC including Re KYC for opening or maintenance of their trading and demat account and hereby give their consent to CSPL to share their details and records with DigiLocker for enabling retrieval of Officially valid Documents from Digilocker as required for Online KYC/ReKYC.
24. CSPL may undertake Trading on Exchanges, in its Own / Proprietary Account in addition to Client Based Trading
25. The client is aware and agrees that CSPL may tape record the telephonic conversation between Client/Client's representative and CSPL as per regulatory guidelines of SEBI and Exchanges. CSPL may produce before the competent authorities voluntarily or on such production being required by such authorities. Recorded conversations or transcript there of or both as valid evidence of the content of the conversations so recorded.
26. CSPL may disclose the client information to any person entity as required under law or regulatory direction or to any brokers association in case of any dispute to take any informed decision. The client hereby agrees and give its consents for disclosure by CSPL to any person or entity including but not limited to any independent third parties/ Service Providers or group entities of CSPL , whether within India or Outside India (subject to permitted laws) of any data and information relating to client trading and demat account for the purposes of or in connection with any present or proposed initiatives. Business proposals. activities. facilities or services availed of or to be availed by the client in future.
27. In case of dealings in Listed securities of Stock Exchanges and Depositories by the client, the client agrees to comply with Fit and proper norms as prescribed by SEBI from time to time.

Terms and Conditions

28. The client understands, agree and confirm that if the Exchange/regulatory authority charges any penalty/fine or charge for any noncompliance on their part including but not limited to non-payment/ shortfall of in margin then such fine/charge/penalty shall be debited to the ledger account of the client and the client shall be obliged to make payment for the same.
29. The client hereby undertakes not to execute any trade 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, synchronized trades, cross trades etc. or which could be termed as manipulative or fraudulent trades by SEBI or Stock Exchanges. In case the client is found to be indulging in such activities, CSPL has right to inform the Stock Exchanges/SEBI/other regulatory authority and suspend/close the trading account of the Client.
30. The client hereby indemnify and hold CSPL, its directors, employees harmless from and against all trades related claims, demands, actions, proceedings, damages, liabilities, charges and/or expenses that are occasioned or may be occasioned to CSPL directly or indirectly, relating to bad delivery of shares/securities and/or third party delivery, whether authorized or unauthorized and fake/forged shares/securities/transfer documents introduced or that may be introduced by or through the client during the course of their dealings/operations on the Exchanges and/or proof of address, identity or any other document provided by the client at time of registration and/or subsequently.
31. The client understand and agree that CSPL does not give any guarantee or assurance as to returns or profits or capital appreciation or protection. The client understand that the past performance is not a necessarily guide to future performance. The client also understands that there is no fixed return in equities, derivatives, currencies or any other asset class or segment traded on the exchange. The principal or initial investment in cash or collateral or any other asset class can also be lost fully and losses can be higher than client initial investment.
32. The client gives their consent to CSPL to access their credit information from Credit Information Companies in order to understand their creditworthiness, as may be required by CSPL for carrying out due-diligence or its internal evaluation.

1st Holder/Auth. Signatory (ies)  _____

RUNNING ACCOUNT AUTHORISATION

**To Centricity Securities Pvt Ltd.
Unit 207A and 207B, Tower-B,
Global Business Park, M G Road
Gurugram HR-122002.**

Date : _____

Sub : Running Account Authorisation

Dear Sir,

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

I/We authorize you as under:

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) of any segment(s) of any or all the Exchange(s)/Clearing Corporation unless I/We instruct you otherwise.
2. I/We request you to settlement of my fund ☐ Monthly ☐ Quarterly
3. 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 fund expected to be required to meet margin obligations as per the regulation, calculated in the manner specified by the exchange from time to time.
4. I/We confirm you that I will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 7 working days from the date of receipt of funds or securities or statement of account or statement related to it, as the case may be at your registered office.
5. I/We confirms you that I can revoked the above mentioned authority at any time by sending signed physical letter of revocation through post/courier at your above mentioned address.
6. The running account authorization would continue until it is revoked by me.

Thanking You.

Yours faithfully,

 1st Holder/Auth. Signatory (ies)

LETTER OF AUTHORITY

To,
Centricity Securities Pvt. Ltd.
Unit 207A & 207B, Tower-B, Global
business Park, Gurgaon Hr-122002

Date : _____

Sub : Letter of Authority

I/We am/are dealing in shares/securities/commodities with you in various exchange segments and in order to facilitate ease of operations. We authorize you as under :

1. Delivery of order/trade confirmation/cancellation :

I/We hereby authorize you not to provide me / us order confirmation / Modification / Cancellation Slips and Trade Confirmation slips to avoid unnecessary paper work. I/we shall get the required details from contract notes and confirmation issued by you.

2. Telephonic Conversation :

I/We request you to consider my/our telephonic instructions for order placing/order modification/order cancellation as a written instruction and give us all the confirmation on telephone unless instructed otherwise in writing. I/We am/are getting required details from contracts issued by you.

3. Set off of outstanding:

I/We authorize you to set off outstanding in any of my / our accounts against credits available or arising in any other accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the Exchange and / or against the value of cash margin or collateral shares provided to you by me / us. I further authorise you to debit the financial charges @ 18% per annum of the outstanding debit balance, if any, in my account and not settled as per the exchange requirement.

4. Pledge Authorisation :

I/We hereby authorise you to pledge/deposit my/our securities whether deposited as collateral/margin or permitted by us to be retained in the running account etc. by you with any person(s) including but not limited to anyone or more bank(s) and/or stock exchange(s) and/or clearing corporation(s) /clearing house(s) or any other person. You may at your absolute discretion raise funds, obtain bank guarantee(s) and FDRs etc, against such deposit' pledge. I/ we authorise you to do in my/our name and on my/our behalf all such acts, deeds and things as may be necessary and expedient for placing pledging / depositing my/our securities with a person of your choice. If for any reason the pledgee sells /liquidates these securities we shall not dispute or contest the acts of pledgee in any manner what so ever. Please treat this authorization as written ratification of my /our verbal directions/authorizations given and carried out by you earlier. I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my / our directions given above.

5. Charges & Balance Maintenance :

I/We have a Trading As well as depository relationship with Centricity Securities Pvt Ltd. Please debit the charges relevant with depository services from my/our trading account on monthly basis. I/We also agree to maintain the adequate balance in my/our trading account / pay adequate advance fee for the said reason.

6. Authority for intimation

I/ we shall authorise you to send SMS and email to registered email/ mobile no. in respect of my Trading and Demat account.

For and On Behalf of Constituent

Thanking you,

Yours faithfully

 Clients Signature/Auth. Signatory (ies)

ELECTRONIC CONTRACT NOTE (ECN) DECLARATION**Appendix-A**

To,
Centricity Securities Private Limited
Unit 207A & 207B, Tower -B, Global
Park, Gurugram haryana 122002

Date _____

Dear Sir,

I/We _____ a client with member M/s. Cenricity Securities Private Limited of NSE, Bombay Stock Exchange undertakes as follows:

- I/We am/are aware that the member has to provide physical contract note in respect of all the trades placed by me/us unless I/We myself want the same in the electronic form.
- I/We am/are aware that the member has to provide electronic contract note for my/our convenience on my/our request only.
- Though the member is required to deliver physical contract note, I/We find that it is inconvenient for me/us to receive physical contract notes. Therefore , I/We am/are voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out/ ordered by me/us.
- I/We have access to a computer and am/are a regular internet user, having sufficient knowledge of handling the email operation.
- My/our email id is* _____.
This has been created by me/us and not by someone else.
- I/We am/are aware that this declaration form should be in English or in any other Indian language known to me/us.
- I/We am/are aware that non-receipt of bounced mail notification by the member shall amount to delivery of the contract note at the above e-mail ID.

The above declaration and the guidelines on ECN given in the Annexure have been read and understood by me/us. I/We am/are aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same.

*(The email id must be written in own handwriting of the client)

 Clients Signature/Auth. Signatory (ies)

FACILITY FOR VOLUNTARY FREEZING/BLOCKING OF ONLINE ACCESS OF THE TRADING ACCOUNT

The framework of this policy is to provide the facility of voluntary freezing/blocking the online access of the trading account to the client on account of suspicious activities in their trading account.

In case of any suspicious activities found by the client in their Trading account, they can avail the facility of voluntary freezing/blocking of their Trading account by reaching to us through the following modes.

- Email from registered e-mail ID - stoptrade@centricity.co.in
- Dedicated Telephone Number – 9217056633

The request received from the client shall be validated and the timeline for freezing/ blocking of the Online access of the clients' Trading account will be as under: -

Scenario	Timelines for issuing acknowledgement as well as freezing / blocking of the online access of the trading account.
Request received during the trading hours and within 15 minutes before the start of trading.	Within 15 minutes
Request received after the trading hours and 15 minutes before the start	Before the start of next trading session

The online access of the Trading account will be frozen/ blocked and all the pending orders in the Trading account, if any, will be cancelled. Post freezing/blocking the Trading account, a communication will be sent to the registered email ID of the client, stating the online access to the Trading account has been frozen/blocked along with the details of open positions (if any).

Further, the request to re-enable the online access of the trading account can be made by sending an email to stocktrade@centricity.co.in stating the Trading account details (i.e. UCC, PAN and Name) from the registered email ID of the client and the same will be processed after carrying out necessary due diligence including validating the client request.

Client Name	
Signature of Client	

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

Dated: _____

To,
 Centricity Securities Private Limited
 Unit 207A and 207B, Tower - B Global Business
 Park Gurugram Haryana 122002

Dear Sir/Madam,

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

List of Family Members							
S. No.	Name of the Co-parceners (Including Minor also)	Relationship with Karta	Gender	Address (if other than Karta's address)	Date of Birth	Whether Co-Parceners/Member (Please Specify)	Signature
1.							
2.							
3							
4							
5							
6							

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

Name of the HUF _____

Signature of Karta with Rubber Stamp



Date: _____ Place: _____

DECLARATION FOR COMMON MOBILE NUMBER AND EMAIL ID FOR DEMAT AND TRADING ACCOUNT

To,
 Centricity Securities Private Limited
 Unit 207A and 207B, Tower B, Global
 Park M G Road Gurgaon Haryana-122002.

Date : _____

Subject : Common Mobile Number/Email Id for Demat and Trading Accounts

Dear Sir,

Mr./Mrs. _____ would like to confirm that the Mobile Number _____
 E-mail Id _____ is registered in my name. I am enclosing self
 attested copy of latest paid bill of your information and record. I am your registered client having trading code _____
 as, and demat account.

Upon understanding from you that my mobile number/emailed if registered with some of the clients who have trading
 and/or demat accounts with you. I have to state that this is in my full knowledge and I have consented to the below clients whi
 is/are my relatives/ to state my mobile number/email id in their KYC's to which I have no objection. All the transactions in
 their accounts are not only done as per their respective instructions bu they are well conveyed by me of all the SMS/Email
 belonging to them which are sent by you to me on my above mobile number/email id.

All these below clients also do not have any objection to the same, in consent they have also signed :

S.No.	Client Name	Trading Code	Demat A/c	Relation	Signature

However, in case of any further regulatory requirements, I under take to abide upon hearing from you.

Thanking You,

Name : _____

Address : _____

 (Client Signature)

DECLARATION, INDEMNITY CUM UNDERTAKING FOR NAME DISCREPANCY IN PAN CARD, BANK PROOF & ADDRESS PROOF
Centricity Securities Private Limited

Date _____

Regd. Office : 207 A & 207B, Tower-B, Global
 Business Park, Gurugram-Haryana-122002

I/We _____ s/o, w/o, d/o _____

 _____, refer to my/our Trading
 Account _____ with Centricity Securities Pvt. Ltd. do hereby affirm, declare and
 undertake that

1. That my/our name as it appears on my/our Pan Card is _____
2. That my/our name as it appears on the Income Tax website is _____
3. Additional ID Proof _____
4. That my/our name as it appears on the Address proof is _____
5. That my/our name as it appears on the Bank Proof is _____
6. That above mentioned names, on Trading account, Tax website, Address proof, PAN Card No. _____
 and Bank account bearing no. _____ are mine alone.
7. That I/We hereby request CSPL to maintain my/our name in Demat and Trading account as per the name appearing on
 the website / PAN card.
8. That I/We promise and undertake to get my/our PAN card altered in accordance with my/our name as appearing on the
 Income tax within stipulated time from the date of signing this undertaking. CSPL may, at its sole discretion,
 terminate my/our trading and demat account in the event of me/us not getting my/our name altered within 45 days of
 signing this undertaking.
9. That I/We further undertake to open a bank account in accordance with the name as appearing on the Income Tax website
 week from the date of signing this undertaking.
10. I/We further undertake that in case my/our name has been changed after approval from government authorities and notification
 gazette. I/We shall get the name change effected in PAN, Bank account etc. and furnish immediately to CSPL.
11. That I/We further declare that I/We am/are responsible and I/We shall indemnify & keep indemnified CSPL, its directors, officers,
 employees, agents from and against any and all losses, claims, liabilities, obligations, damages, deficiencies, judgements, action
 proceedings arising out or in relation to corporate benefits, IPO refund, Foreign Exchange Management Act (FEMA) transfer,
 dematerialization of securities, rematerialization of securities, dividends, interest etc., that may arise out Declaration-cum-
 undertaking and/or acting on this basis.

That the contents of this declaration, Indemnity-cum-undertaking have been explained to me/us in vernacular and I/We have
 understood before signing it. That this declaration, Indemnity-cum-undertaking given by me/us to CSPL is by my/our absolute free will
 and not by coercion, undue influence, pressure etc., and at present I/We am/are having sound health and mind.



 Client Signature

DP ID									Client Id								
-------	--	--	--	--	--	--	--	--	-----------	--	--	--	--	--	--	--	--

To Centricity Securities Private Limited.

Unit no 207A & 207B Tower-B Global Business Park

Gurugram M.G Road Haryana 122002

Dear Sir / Madam,

I / We hereby state that:

[Select one of the options given below]

☐ **OPTION 1 :**

I / We request you to issue Delivery Instruction Slip (DIS) booklet to me / us on immediately on opening my / our NSDL/CDSL account through registered for DDPI for executing delivery instructions for setting stock exchange trade.

OR

☐ **OPTION 2:**

I/We do not require the Delivery Instruction Slip (DIS) booklet for the time being, since. / We have issued a DDPI in favour of Centricity Securities Private Limited for executing the delivery instructions for setting stock exchanges trades [settlement related transactions] effected through DDPI. However, the Delivery Instruction Slip (DIS) booklet should be issued to me/us immediately on my/ our request at any later date.

Yours faithfully

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

CLIENTS OPTION FOR RECEIVING DOCUMENTS

To,
Centricity Securities Private Limited
Unit 207A and 207B, Tower B, Global
Business Park Gurugram Haryana 122002

Dated _____

Dear Sir/ Madam,
I hereby opt to get the document listed below in -

☐ Electronic Form ☐ Physical Form

1. All Standard Documents of demat and trading
2. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us.
Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully,

First / Sole Holder Signature	Second Joint Holder Signature (only for DP account)	Third Joint Holder Signature (only for DP account)
		

ACKNOWLEDGEMENT FROM CLIENT FOR RECEIPT OF PHYSICAL DOCUMENTS

To,
Centricity Securities Private Limited
Unit 207A and 207B, Tower B, Global
Business Park Gurugram Haryana 122002

Dated _____

Dear Sir/ Madam,
I/We hereby acknowledge receipt of the following documents

1. All Standard Documents of demat and trading
2. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us.
Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully

First / Sole Holder Signature	Second Joint Holder Signature (only for DP account)	Third Joint Holder Signature (only for DP account)
		

THANK YOU

SEBI Registration No : INZ000323234

Registered Address : 207A & 207B, Tower-B, Global Business Park, Gurugram, Haryana-122002