



S.No.:
Version: 4.12

Grow with SMC

BROKING: Equity, Commodity, Currency, Depository | **DISTRIBUTION:** IPOs, Mutual Funds, Bonds, Fixed Deposits, Insurance (Life & General)
ADVISORY: Wealth Management, Real Estate Advisory, Investment Banking, Research, Fixed Income Securities
OTHERS: Financing, Clearing Services, Institutional Broking, NRI & FPI Services

CLIENT REGISTRATION FORM

(EQ- CASH, F&O, CURRENCY, COMMODITY & DEMAT)

INDIVIDUAL/ HUF/ PARTNERSHIP FIRM/ CORPORATE

Client Name : _____

Client Code (UCC) : _____

DP Client ID : _____

DP Control No. : _____

STAMP OF SB / AP / BRANCH WITH NAME & ADDRESS

Group 2

Group 3



Moneywise. Be wise.



GENERAL INSTRUCTIONS TO FILL THE FORM

A.	FILL IN BLOCK LETTERS WITH BLACK/BLUE PEN. + All correction / overwriting should be counter signed by client.	<input type="checkbox"/>
B.	PROVIDE ALL NECESSARY DOCUMENTARY PROOFS (AS PER DOCUMENT CHECKLIST) + Name of client on all documents should match with name in KYC Form on page A1/A3 - (For minor difference, fill declaration on page C14)	<input type="checkbox"/>
C.	CLIENT SIGNATURES	
	INDIVIDUAL	NON-INDIVIDUAL
On Documentary Proofs	All documentary proofs should be self-attested (signed) by Individual.	All documentary proofs should be signed by authorised signatory(ies) / Karta / Partner with rubber stamp
On KYC Form: marked as	Individual should sign at 28 places	Karta / Partners / All authorised signatory(ies) should sign with rubber stamp
<input type="checkbox"/> Sole / First Holder <input checked="" type="checkbox"/> Second Holder <input checked="" type="checkbox"/> Third Holder		
+ Client signatures should match with sign on PAN card / DL / Passport (in case of individual) OR account opening payment cheque. + In case of any mismatch provide declaration on page C14		<input type="checkbox"/>
D.	REGISTERED Sub-Broker / AP/ RM signature with stamp	
	INDIVIDUAL / NON INDIVIDUAL	<input type="checkbox"/>
	In Person Verification (IPV) on Page A2	<input type="checkbox"/>
	On all copies of client documents	<input type="checkbox"/>
E.	Fill Brokerage and choose ANYONE account opening scheme from Tariff Sheet on Page A11 Approval is provided (if required)	<input type="checkbox"/>
F.	Provide unique Email ID & Mobile Number on Page A2/A3 <i>Note: Provide your mobile number & E-mail ID to receive information of your transactions directly from Exchange & Depository on your mobile / E-mail at the end of the day. If Mobile No. is of Spouse/Dependent Children or Parents, please sign declaration on Page C14</i>	<input type="checkbox"/>

Proof of Identity

Copy of PAN Card

Proof of Address (Anyone)

For Individuals (Client / Karta / Partners / Directors / Promoters / Trustee / Authorised signatory)	Aadhaar / Passport / Voters ID Card/ Driving License (Documents having an expiry date should be valid on the date of submission)
For Non Individuals (Corporate / Partnership / Trust etc.)	Telephone Bill (only land line) / Electricity bill / Gas bill / Bank Account Statement (Not more than 3 months old) Registered Lease or Sale Agreement

Bank Account Proof (Anyone)

Copy of cancelled cheque leaf with pre-printed name / pass book / Latest bank statement specifying name of the constituent, MICR Code and IFSC of the bank should be submitted

Additional documents in case of trading in derivatives segments (Anyone)

Copy of latest Income Tax Return	Latest Net worth certificate
Last month Salary Slip or Copy of Form 16 (for salaried persons)	Copy of demat account holding statement with value
Bank account statement for last 6 months	Copy of Annual Accounts

Demat Account Proof (For clients having demat account outside SMC)

Demat client master or recent holding statement issued by DP bearing name & PAN of the client

DOCUMENTS REQUIRED - CHECKLIST

FOR INDIVIDUAL

DOCUMENTS OF INDIVIDUAL

- PoI PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c
(Provide any one proof of each, as per table)
- Photograph pasted on page A1 & signed across

DOCUMENTS OF NOMINEE (required, if nomination facility is chosen)

- Photograph pasted on page A9

FOR HUF

DOCUMENTS OF HUF

- PoI PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c
(Provide any one proof of each, as per table)

DOCUMENTS OF KARTA (Individual member in whose name HUF is formed)

- Photograph pasted on page A4
- PoI PoA (Provide any one proof of each, as per table)

SIGNATURES OF ALL COPARCENERS (family members other than Karta)

- Signatures on page A10 / Deed of declaration of HUF (any one)
- Signatures of all major coparceners on DDPI on page C3

FOR CORPORATE

DOCUMENTS OF CORPORATE

- PoI PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c
(Provide any one proof of each, as per table)
- Board Resolution for investment in stocks market with name of authorised signatory(ies) and mode of operations (jointly or severally)
- + On Letter head of Company and should be certified by two directors
+ download format from www.smctradeonline.com/download.aspx
- Articles & Memorandum of Association (Along with Certificate of Incorporation)
- Latest shareholding pattern
- + Including list of all those holding control, either directly or indirectly, in the company in terms of SEBI Takeover Regulations, duly certified by the company secretary / WTD / MD (to be submitted every year)
- + In case corporate shareholder holding more than 10% shares, shareholding pattern of that corporate is also required
- Balance Sheets for last 2 financial years (to be submitted every year)

DOCUMENTS OF ALL WHOLE TIME DIRECTORS (WTD) / TWO DIRECTORS IN CHARGE OF DAY TO DAY OPERATION

- Photograph pasted on page A4
- PoI PoA (Provide any one proof of each, as per table)

DOCUMENTS / SIGN OF ALL AUTHORISED SIGNATORY(IES)

- Photographs & Signatures on letterhead of company
+ www.smctradeonline.com/download.aspx

DOCUMENTS OF ALL INDIVIDUAL PROMOTERS HOLDING CONTROL EITHER DIRECTLY OR INDIRECTLY

- Photograph pasted on page A4
- PoI PoA (Provide any one proof of each, as per table)

FOR PARTNERSHIP FIRM

DOCUMENTS OF PARTNERSHIP FIRM

- PoI PoA Bank & MICR/IFSC Proof Income Proof Proof of Demat A/c
(Provide any one proof of each, as per table)
- Certificate of Registration (in case of registered Partnership Firms Only)
- Partnership Deed
- Authority letter (+ download format from www.smctradeonline.com/download.aspx)
- Balance Sheet for last 2 financial years (to be submitted every year)

DOCUMENTS OF ALL PARTNERS

- KYC of all partners (Download from www.smctradeonline.com/download.aspx)
+ Demat A/c will be opened in the name of partners
- Photograph pasted on page A4
- PoI PoA (Provide any one proof of each, as per table)

DOCUMENTS & SIGN OF ALL AUTHORISED SIGNATORY(IES)

- Photographs & Signatures on letterhead of company
+ www.smctradeonline.com/download.aspx

SOLE PROPRIETOR

- Sole Proprietor must make the application in his INDIVIDUAL name & capacity only
- + If you are submitting bank details of Proprietorship firm as bank / income proof, please provide letter from bank certifying name of individual proprietor

Please ensure

1. Proof of Identity (PoI)	! If Name/Photo/Signature on PAN Card is not clear, then submit additional PoI ! Copy of PAN Card is mandatory for all applicants (except for applicants residing in state of Sikkim)
2. Proof of Address (PoA)	! If correspondence & permanent addresses are different, then proofs for both could be submitted ! Address in proof should match with address in KYC form
3. Bank + MICR/IFS Code Proof	! Proof should contain IFS Code (11 digits) / MICR Code (9 digits) of Bank ! If name is not pre-printed on cheque - then submit additional proof containing the Bank A/c number and Name of Client
4. Income Proof	! Mandatory if you wish to trade in Derivatives (F&O/Currency/Commodity) segments
5. Demat A/c Proof	! Latest client master or Transaction / Holding statement (with name, PAN, DP & client ID).

* Documents should not be more than 3 months old

** Documents having expiry date should be valid on the date of submission

INDEX

S.No.	Name of the Document	Brief Significance of the Document	Page No.
Mandatory Documents as prescribed by SEBI & Exchanges			
1.	Account Opening Form	A. KYC form - Document captures the basic information about the constituent. B. Document captures the additional information about the constituent relevant to trading account.	A1 – A6
2.	Nomination Form	Nomination form for Demat and Trading Account.	A9
3.	Disclosure	Disclosure information for pro - account trading.	A10
4.	Tariff Sheet	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s).	A11
5.	MITC	Most Important Terms and Conditions.	A12
Rights & Obligations, Risk Disclosure Document (RDD), Guidance note, Policies & Procedures			
1.	Rights and obligations (Trading)	Document stating the Right & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet / wireless technology based trading).	B1 – B4
2.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in stock market (Securities & Commodities).	B5 – B10
3.	Guidance note	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	B11 – B12
4.	Policies and Procedures	Document describing significant policies and procedures of the stock broker.	B13 – B17
5.	Policies and Procedures (MTF)	Document describing significant policies and procedures of the stock broker related to Margin Trading Facility (MTF).	B18 – B20
6.	Rights and obligations (DP)	Rights and Obligations of beneficial owner and Depository Participant as prescribed by SEBI and Depositories	B21 – B22
Demat Account opening form and Voluntary Documents as provided by the Stock Broker			
1.	Demat Account Opening Form (CDSL/NSDL)	A. Demat Account opening Form – Document captures the basic and additional information about the constituent(s). B. Schedule of Demat charges – Document detailing the charges levied on the client for transacting in Demat account .	A7 – A8 A11
2.	NACH Mandate	National Automated Clearing House (NACH) Mandate form for direct debit of Demat charges.	C1 – C2
3.	DDPI	Demat debit and pledge instruction (DDPI)	C3
4.	Request for trading in commodity forward contracts / commodity derivatives and form for registration of mobile and email ID for exchange alerts	Request from client for trading in commodity forward contract/commodity derivatives as prescribed by NCDEX. And registration form for registration of mobile and email ID for exchange alerts.	C5
5.	Running A/c Authorisation	Authorisation by constituent to stock broker for maintaining fund and stocks on running account basis.	C6
6.	Sanction of trading limit	Sanction of trading limit on the security of collaterals	C6
7.	Authority letter	1. Adjustment of account between exchanges and segments 2. Authorization to debit Demat Account charges 3. Authorization For Communication of Financial Products 4. Authorization for verification of information from independent agency(ies) 5. Authorization for not Providing Confirmation Slips	C7
8.	Authority Letter to Send Documents Electronically	Authorisation to send Contract Note, Statement of funds & Stocks, Client registration documents etc. electronically.	C7
9.	Intraday / High Multiplier Facility	Facility to Client allowing leverage for intra-day trading on available margin/security/collateral	C8
10.	Letter of authority	Letter of authority authorizing relative for trading	C9
11.	Consent for MTF	Client consent for availing Margin Trading facility (MTF)	C9
12.	FATCA & CRS Declaration	FATCA, CRS & Ultimate Beneficial Ownership (UBO) self certification form (Mandatory for Non-Individuals)	C10 -C11
13.	Mutual Fund Service System Facility	Terms & Conditions for availing Mutual Fund services of BSE STAR / NSE MFSS facility.	C12
14.	Electronic Contract Note Declaration	Authority to provide contract note electronically through e-mail	C13

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS *

Same as Current / Permanent / Overseas Address details

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

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

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

Line 1*
Line 2
Line 3 City /Town / Village*
State* ZIP/ Post Code* Country

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID)

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

6. DETAILS OF RELATED PERSON

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

Related Person Type* Guardian of Minor Assignee Authorized Representative
Prefix First Name Middle Name Last Name
Name*
(If KYC number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY [PoI] OF RELATED PERSON*

A- Passport Number Passport Expiry Date
 B- Voter ID Card
 C- PAN Card
 D- Driving Licence Driving Licence Expiry Date
 E- UID (Aadhaar)
 F- NREGA Job Card
 Z- Others (any document notified by the central government) Identification Number
 S- Simplified Measures Account - Document Type Identification Number

7. REMARKS (If any)

8. APPLICANT DECLARATION

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

• I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : -- Place :



9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY

Name **SMC GLOBAL SECURITIES LTD.** Code **IN1100**
Date --
Emp. Name
Emp. Code
Emp. Designation
Emp. Branch

[Employee Signature]

IN-PERSON VERIFICATION (IPV)
 DOCUMENTS VERIFIED WITH ORIGINALS
 CLIENT INTERVIEWED BY
Date: //
Employee/Sub-Broker/AP Details:
Name: _____
Code: _____
Designation: _____
Signature: _____

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

Name of Applicant _____ PAN of the Applicant _____

Sr. No.	PAN	Name	DIN (For Directors) / UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph

(2) 

Name & Signature of the Authorised Signatory(ies)

Date / /



TRADING & DEMAT ACCOUNT RELATED ADDITIONAL DETAILS

BANK ACCOUNT DETAILS

(Through which transactions will generally be routed)

Primary Bank Details (for DP and Trading) :

Bank Name :

Account No. : Branch :

Address :

11 Digit RTGS / NEFT / IFS Code : 0 9 Digit MICR Code :

Virtual Payment Address (VPA)

Account Type : Savings Current Others : (Please Specify)

Pay-Out Option : As Per Group Cheque Online Transfer / NEFT / RTGS

Bank/MICR/IFSC proof submitted : Cancelled Cheque (with **Client Name** & A/c No. **pre-printed**)

Bank Passbook* (If hand written, then with stamp of Bank) Bank Verification Letter* (with Rubber Stamp & Sign of Bank Manager)

Bank Statement* (Either on Bank Stationary or with rubber stamp & sign of Bank Manager) *Documents should not be more than 3 months old

Secondary Bank Details (for Trading, if any) :

Bank Name :

Account No. : Branch :

Address :

11 Digit RTGS / NEFT / IFS Code : 0 9 Digit MICR Code :

Virtual Payment Address (VPA)

Account Type : Savings Current Others : (Please Specify)

In case of multiple banks, please provide proof of all banks.

DEPOSITORY ACCOUNT DETAILS

(Through which transactions will generally be routed)

I/We want to open New Demat A/c (Please fill details on Page No. A7/A9 - ANY ONE)

I/We already have Demat A/c (Please Provide following details)

1. Depository Name : CDSL NSDL DP ID : BOID :

Name of Depository Participant :

2. Depository Name : CDSL NSDL DP ID : BOID :

Name of Depository Participant :

Demat A/c Proof submitted : Client Master Transaction or Holding statement

(with Client Name, PAN, DP & Client ID)

TRADING PREFERENCE

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

Exchanges	NSE, BSE & MSEI				MCX, NCDEX, BSE & NSE
All Segments	Cash/ Mutual Fund	Future & Options (F&O)	Currency	Debt	Commodity Derivatives
(3a) ✍	(3b) ✍	(3c) ✍	(3d) ✍	(3e) ✍	(3f) ✍

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

* If you wish to trade in derivatives (F&O/Currency/Commodity) segments, submit income proof (Mandatory)

FACILITIES

SMS and E-mail alerts from stock exchanges : SMS Alert E-mail Alert Both None

+ Please mention Mobile & E-mail ID in KYC form (Page A1 - Individual / A3 - Non-Individual)

Whether you wish to receive Contract Note: Electronic Physical

Whether you wish to receive Standard documents*: Electronic Physical

*Standard Documents –Rights & Obligations, Risk Disclosure Document, Guidance Note and Policies & Procedures

+ Please mention E-mail ID in KYC form (Page A1 - Individual / A3 - Non-Individual)

I/We wish to avail facility of internet trading / wireless technology : Yes No

TRADING HISTORY

Trading Experience / Number of Years of Investment

___ Years in Equities ___ Years in Derivatives ___ Years in other Investment related fields No Prior Experience

Stock Profile : Nil < 5 Lac Rs. 5 - 25 Lac Rs. 25 - 50 Lac Rs. 50 - 1 Crore Above 1 Crore

If you are dealing with any other stock broker, please provide following detail

Name of the stock broker

Name of AP (If any)

Client Code (UCC)

Exchange

NSE

BSE

MCX

NCDEX

ICEX

Details of disputes / dues pending from / to such stock broker / AP

+ In case dealing with multiple stock brokers, please provide details of all. (Please Specify)

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 / authorised persons in charge of dealing in securities & commodities during last 3 years.

(Please Specify)

INCOME, EDUCATION & OTHER DETAILS

Gross Annual Income Detail Below 1 Lac 1 - 5 Lac 5 - 10 Lac Rs. 10 - 25 Lac 25 Lac - 1 Crore > 1 Crore

Net-worth in ₹. (*Net worth should not be older than 1 year) ___ as on (date) | D | D | M | M | 2 | 0 | Y | Y | (Mandatory for Non-Individual Client)

Occupation Private Sector Service Public Sector Government Service Business Professional Agriculturist

Retired Housewife Student Forex Dealer Other (Please Specify)

Educational Details : High School Graduate Post-Graduate Doctorate Professional Degree

Under High School Illiterate Other (Please Specify)

Client

Category for

Commodities

Derivatives

Non-commercial participant (financial participant/ trader/ arbitrageur)

Commercial participant (value chain participant/ exporter/importer/hedger)

Farmers/FPOs

Value Chain Participants (VCPs)

Other (Please Specify)

(Please select anyone. if not selected, default option will be 'Other'. In case of any change in category, inform us immediately in writing)

Please tick, if applicable Politically Exposed Person

Related to a Politically Exposed Person

+ In case of Non-Individual, provide held details as page A11

Is the entity involved providing any of the following services

- For Foreign Exchange / Money Changer Services Yes No

- Gaming / Gambling / Lottery Services (e.g. casinos, betting syndicates) Yes No

- Money Lending / Pawning Yes No

In case of Non-Individual, provide details of persons authorised to deal in stocks of behalf of the company / Firm/ others in

Annexure A on page A 11.

Any other information :

GOODS & SERVICE TAX (GST) DETAILS (If applicable)

If you are registered for GST, kindly provide copy of registration certificate

GSTIN

DEMAT ACCOUNT OPENING FORM - CDSL (DPID 12019101/12019103/12027000)

TYPE OF ACCOUNT (Please ✓ whichever is applicable)

STATUS	SUB-STATUS		
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual HUF / AOP	<input type="checkbox"/> Minor <input type="checkbox"/> Other _____ (Please Specify)
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National - Depository Receipts	
<input type="checkbox"/> Non - Individual	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Trust	<input type="checkbox"/> OCB <input type="checkbox"/> Bank <input type="checkbox"/> Other _____ (Please Specify) To be filled by the DP

+ In case of Sole Proprietor / Partnership Firm / Unregistered Trust, Demat account should be opened in the name of Proprietor / Partners / Trustees.

ACCOUNT HOLDERS DETAILS

Name of sole/1st Holder (Mr. / Ms. / M/s.) : _____ PAN : _____

Name of 2nd Holder (Mr. / Ms. / M/s.) : _____ PAN : _____

Name of 3rd Holder (Mr. / Ms. / M/s.) : _____ PAN : _____

+ Provide KYC Application Form for all Joint Holders (Download additional KYC form from www.smctradeonline.com/download.aspx)

Name* : _____

*Name of the Sole Proprietor / Partnership Firm / Unregistered Trust should be mentioned above.

Nationality : Indian Other _____ (Please Specify)

DETAILS OF GUARDIAN

In case the account holder is minor

Name of Guardian (Mr. / Mrs / Ms.) : _____

Relationship : _____ PAN : _____ P

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 Yes No
+ Please mention E-mail ID in KYC form (Page A1-Individual / A3-Non-Individual)

SMS Alert Facility on Mobile Number as given in KYC Form Yes No
Refer to T&C given in Annexure 'CDSL SMS Alert facility' on our website under download section.
(Mandatory, If you have given DDPI. If DDPI 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') Yes No

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

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

Mode of Operation Jointly Any of the holders or survivors

+ To register for easi, please visit website www.cdslindia.com [easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.]

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. I / We request to open a Depository Account in my / our name as per the above details.

	Sole / First Holder/ Authorised Signatory	Second Holder/ Authorised Signatory	Third Holder/ Authorised Signatory
Signature	(4) _____	(1) _____	(1) _____

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

DEMAT ACCOUNT OPENING FORM - NSDL (DPID IN303655)

TYPE OF ACCOUNT (Please ✓ whichever is applicable)

STATUS	SUB-STATUS		
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual HUF / AOP	<input type="checkbox"/> Minor <input type="checkbox"/> Other <small>(Please Specify)</small>
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National - Depository Receipts	
<input type="checkbox"/> Non - Individual	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Trust	<input type="checkbox"/> OCB <input type="checkbox"/> Bank <input type="checkbox"/> Other <small>(Please Specify)</small> To be filled by the DP

+ In case of Sole Proprietor / Partnership Firm / Unregistered Trust, Demat account should be opened in the name of Proprietor / Partners / Trustees.

ACCOUNT HOLDERS DETAILS

Name of sole/1st Holder (Mr. / Ms. / M/s.) : _____ PAN : _____

Name of 2nd Holder (Mr. / Ms. / M/s.) : _____ PAN : _____

Name of 3rd Holder (Mr. / Ms. / M/s.) : _____ PAN : _____

+ Provide KYC Application Form for all Joint Holders (Download additional KYC form from www.smctradeonline.com/download.aspx)

Name* : _____ PAN : _____

*For HUF, 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 HUF, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.

Nationality : Indian Other (Please Specify)

DETAILS OF GUARDIAN

In case the account holder is minor

Name of Guardian (Mr. / Mrs / Ms.) : _____ PAN : _____ P

Relationship : _____

ADDITIONAL DETAILS

I/We authorise you to receive credits automatically into my / our account Yes No

Account to be operated through Demat Debit & Pledge Instructions (DDPI) Yes No

I/We request you to send Electronic Transaction-Cum-Holding Statement through E-mail Yes No

+ Please mention E-mail ID in KYC form (Page A1-Individual / A3-Non-Individual)

SMS Alert Facility on Mobile Number as given in KYC Form <small>(Mandatory, If you have given DDPI.)</small>	Sole / Ist Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	IInd Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	IIIRD Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Mode of receiving statement of account (Tick any one) Electronic Physical

Mode of Operation Jointly Any of the holders or survivors

DECLARATION

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. 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 acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant. I/ We request to open a Depository Account in my / our name as per the above details.

	Sole / First Holder / Authorised Signatory	Second Holder / Authorised Signatory	Third Holder / Authorised Signatory
Signature	(5)	(2)	(2)

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

Please visit download section of our website www.smctradeonline.com for 'Notes and Instruction' to fill demat account opening and nomination form

NOMINATION FORM
FOR INDIVIDUAL ONLY
Nomination Details

I/We wish to make a nomination. [As per details given below] I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.

Nomination can be made upto three nominees in the account.		Details of 1 st Nominee	Details of 2 nd Nominee	Details of 3 rd Nominee
1	Name of the nominee(s) (Mr./Ms.)			
2	Share of each Nominee Equally <input type="checkbox"/> [If not equally, specify %]	%	%	%
<i>Any odd lot after division shall be transferred to the first nominee mentioned in the form.</i>				
3	Relationship With the Applicant (If Any)			
4	Address of Nominee(s) City / Place: State & Country: PIN Code			
5	Mobile/Telephone No. of nominee(s)			
6	Email ID of nominee(s)			
7	Nominee Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			
<i>Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:</i>				
8	Date of Birth (in case of minor nominee(s))			
9	Name of Guardian (Mr./Ms.) {in case of minor nominee(s) }			
10	Address of Guardian(s) City / Place: State & Country: PIN Code			
11	Mobile/Telephone no. of Guardian			
12	Email ID of Guardian			
13	Relationship of Guardian with nominee			
14	Guardian Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			

CLIENT SIGNATURE *

	First / Sole Holder	Second Holder	Third Holder
Sign of Client	(6)	(3) <input checked="" type="checkbox"/>	(3) <input checked="" type="checkbox"/>
Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Place :		

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

DECLARATION FORM FOR OPTING OUT OF NOMINATION
FOR INDIVIDUAL ONLY

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.

NAME AND SIGNATURE OF HOLDER(S)*

	First / Sole Holder	Second Holder	Third Holder
Name			
Sign of Client	(7)	(4) <input checked="" type="checkbox"/>	(4) <input checked="" type="checkbox"/>
Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Place :		

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

BROKERAGE STRUCTURE

SEGMENT	%	Minimum	Options		
			%	Min per lot	Max per lot
Cash (Intraday)					
Cash (Delivery)					
Cash (Trade to Trade)					
F&O					
Currency F&O					
Commodity F&O					

Note : 1. Rs. 25/- will be charged minimum per segment.

2. Securities Transaction Tax (STT) & Commodities Transaction Tax (CTT), GST, Other Charges, Stamp Duty and Other Statutory Charges will be levied separately as applicable from time to time.

3. Transaction charges will be levied extra as per Company policy as applicable from time to time.

4. The company reserves the right to review brokerage, transaction charges and other charges within limits set by SEBI, with sufficient prior notice.

TARIFF SHEET

Scheme Particulars	Regular Scheme%			LIFETIME	LIFE-D Scheme (Life Time AMC-1) ^{&}	LIFE-Q Scheme (Life Time AMC-2) [@]	Free Demat Scheme [§]		BSDA Scheme
	DDPI	NON DDPI	Corporate				DDPI	NON DDPI	
Please select ANY ONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Account Opening Charges[^]	599/-	599/-	1599/-	1499/-	Nil	1199/-	750/- (Refundable)	750/- (Refundable)	599/-
Account Maintenance Charges (AMC)	399/- p.a.	499/- p.a.	1000/- p.a.	Nil for lifetime	Nil	Nil	399/- p.a.	499/- p.a.	As per Regulation
Refundable Security Deposit	NA	NA	NA	NA	3000/-	NA	NA	NA	NA
Market Sell Transaction Charges - DDPI	0.02% subject to Min 20/- & Max 100/- per Instruction						0.03% subject to Min 30/- per Instruction		50/- per Instruction
Market Sell Transaction Charges - NON DDPI	0.03% subject to Min 25/- & Max 100/- per Instruction						0.03% subject to Min 40/- per Instruction		50/- per Instruction
Off Market Transaction Charges	0.03% subject to Min 30/- & Max 100/- per Instruction						0.03% subject to Min 40/- per Instruction		50/- per Instruction
Common Tariff applicable to all Scheme									
Dematerialisation	20/- Per Certificate (Rs. 30/- for 1st Certificate) Courier Charges Extra (Rs.25/- for Local & Rs.40/- for outstation courier)								
Rematerialisation	30/- per Certificate (1 Certificate / 100 shares) Courier Charges Extra (Rs.25/- for Local & Rs.40/- for outstation courier)								
Additional Statement Charges	5/- Per page, postal/courier charges will be extra (Applicable on daily/weekly/fortnightly statement also)								
MF Restat/Redemption Charges	25/- per Instruction			Demat Rejection/DIS Rejection Charges			25/- Per Instance		
Pledge Creation	60/- per Instruction			Pledge Closure / Invocation			30/- per Instruction		
Margin Pledge	10/- per Instruction			Margin Unpledge Charges			10/- per Instruction		
Delivery Instruction Book Charges	30/- (20 Leafs)			Delivery Instruction Slip by FAX			5/- Per Instruction		
Client Modification/CML Charges	25/- Per request			Additional Client Master Charges			25/- Per request		

TERMS & CONDITIONS:

[^] Account Opening Charges are for trading account only and inclusive of Goods and Service Tax (GST). For all remaining charges, GST will be levied separately.

[%] First year AMC is free in regular scheme accounts. From next year onwards, AMC as per schedule of charges will be levied.

[&] If account is closed within a year, AMC as per regular Scheme will be levied. Security Deposit will be refunded on account closer after deducting outstanding Charges.

[@] If there is no delivery based transaction in capital market in a Calendar Quarter, Account will be treated as Non-active and Rs 100 plus GST will be charged as idling charge for that quarter in the said account. Accordingly ODIN Diet/Application will also be deactivated and reactivation charges will be Rs. 250/-. Email ID is mandatory.

[§] Rs. 10,000 minimum cash margin is required at the time of Account Opening. Account Opening Charges of Rs. 750/- will be reversed if Gross Brokerage of Rs. 750/- is generated in 3 months.

• **Other Charges:** Cash Segment - Max of 0.02% on Transaction Value, Futures Segment - Max of 0.006% on transaction Value, Options Segment - Max of 0.01% on Transaction Value. Other Charges represents a consolidated charge towards providing various value added services such as Trade confirmation SMS, Electronic Account Access, Portfolio Tracker, access to research reports, Market News SMS and other value added services.

• The Company reserves the right to modify/add/withdraw any scheme at any time without prior notice. In case of any upward revision in charges, 30 days notice would be given by email/post shall be treated as sufficient notice.

• AMC will be charged yearly in advance. Any Service not mentioned above will be charged extra. Above charges are applicable only to resident Indian individual and domestic corporate. For NRI and Foreign Corporate Body (FCB), different charges are applicable.

• In case of non-payment of bills/ dues within 15 days of due date, the DP services are liable to be discontinued within a period of 30 days from the date of demand. The renewal charges for resuming the services will be Rs. 100/-.

• Security deposit for CDSL's 'easiest' facility (optional) is Rs. 2,500/-.

• Demat Charges for on market sale transactions will be debited directly in client's bill.

• If NOW is activated for other than NSE, then Rs. 150 plus GST per segment will be charged every month or part thereof

I/We have read the above given information and agree to pay the same. I/We authorize you to debit the trading account maintained with you for the account opening charges for trading account payable to you. Any such sum debited to my account shall be binding on me/us.




CLIENT SIGNATURE			
	First / Sole Holder	Second Holder	Third Holder
Sign of Client	(10)	(6)	(6)

Most Important Terms and Conditions (MITC)

(For non-custodial settled trading accounts)

(Reference to SEBI Circular SEBI/HO/MIRSD/MIRSD-PoD-1/P/CIR/2023/180 Dt. November 13, 2023)

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.

CLIENT SIGNATURE			
	First / Sole Holder	Second Holder	Third Holder
Sign of Client	(11) 	(7) 	(7) 
Date :	Place :		

Instructions to fill Mandate:

- | | |
|---|--|
| 1. UMRN-To be left blank | 12. Amount in words |
| 2. Date in DD/MM/YYYY format | 13. Amount in figures |
| 3. Sponsor Bank IFSC/MICR code, left padded with zeroes where necessary. (Maximum length -11 Alpha Numeric Characters). | 14. Frequency at which the debit should happen |
| 4. Utility Code: Unique code of the entity to whom mandate is being given - To be provided by the entity. | 15. Whether the amount is fixed or variable |
| 5. Name of the entity to whom the mandate is being given | 16. Reference-1 : Any details requested by the entity to whom mandate is being given |
| 6. Account type - SB /CA / CC / SB-NRE / SB-NRO / OTHER | 17. Reference - 2 : Any details requested by the entity to whom mandate is being given |
| 7. Tick - Select your appropriate Action | 18. Your phone number |
| a. Create - For New Mandate | 19. Your email id |
| b. Modify - For Changes/Amendment on existing mandate | 20. Period for which the debit mandate is valid |
| c. Cancel - For cancelling the existing registered Mandate | a. Start date |
| 8. Your Bank Account Number for debiting the amount | b. End Date |
| 9. Name of your bank and branch | c. Or until cancelled |
| 10. Your Bank branch IFSC code OR | 21. Signatures of the account holder |
| 11. Your Bank branch MICR code | 22. Name of the account holder |
-

Instructions to fill Mandate:

- | | |
|---|--|
| 1. UMRN-To be left blank | 12. Amount in words |
| 2. Date in DD/MM/YYYY format | 13. Amount in figures |
| 3. Sponsor Bank IFSC/MICR code, left padded with zeroes where necessary. (Maximum length -11 Alpha Numeric Characters). | 14. Frequency at which the debit should happen |
| 4. Utility Code: Unique code of the entity to whom mandate is being given - To be provided by the entity. | 15. Whether the amount is fixed or variable |
| 5. Name of the entity to whom the mandate is being given | 16. Reference-1 : Any details requested by the entity to whom mandate is being given |
| 6. Account type - SB /CA / CC / SB-NRE / SB-NRO / OTHER | 17. Reference - 2 : Any details requested by the entity to whom mandate is being given |
| 7. Tick - Select your appropriate Action | 18. Your phone number |
| a. Create - For New Mandate | 19. Your email id |
| b. Modify - For Changes/Amendment on existing mandate | 20. Period for which the debit mandate is valid |
| c. Cancel - For cancelling the existing registered Mandate | a. Start date |
| 8. Your Bank Account Number for debiting the amount | b. End Date |
| 9. Name of your bank and branch | c. Or until cancelled |
| 10. Your Bank branch IFSC code OR | 21. Signatures of the account holder |
| 11. Your Bank branch MICR code | 22. Name of the account holder |
-

DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI)

I/We agree to the terms and conditions of Demat Debit & Pledge Instructions (herein referred after to as DDPI) between the undersigned individual(s)/entities (hereinafter referred to as client(s)) and SMC Global Securities Limited (hereinafter referred to as SMC) a company duly incorporated under the Companies Act,1956 and having Registered Office at 11/6B, Shanti Chamber, New Delhi-110005.

Whereas SMC is a SEBI registered Stock Broker & Depository Participant and is providing stock broking and depository participant services to their registered clients. Whereas SMC has the following Principal account / Clearing Member account / Early pay-in / Pool / Margin Pledge accounts /CMBP IDs to receive securities from the clients:

12019101 00000412	CDSL BSE Pool	11000010 00013363	CDSL BSE early pay-in A/c
12019101 00000372	CDSL NSE Pool	11000011 00014914	CDSL NSE early pay-in
IN564844	NSDL NSE Pool	12019101 04319878	CDSL CM Client Securities Margin Pledge
IN655267	NSDL BSE Pool	IN303655 10227156	NSDL CM Client Securities Margin Pledge
12019101 02068772	CDSL MSEI Pool	1201910 104319903	CDSL Client securities Margin Funding
IN471837	NSDL MSEI Pool	IN303655 10229625	NSDL Client Securities Margin Funding
IN565576	NSDL NSE MF Redemption	IN620031	NSDL BSE MF Redemption

Whereas, the Client(s) are desirous of availing various broking and depository participant services offered by SMC and for the purpose of facilitating the transactions and services in broking and/or depository account(s) in a seamless manner, the Client(s) authorise SMC to execute instructions and perform severally the following acts by accessing the beneficial owner account(s) of Client(s):

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	(14) Signature of 1st / Sole Holder
		(10) <input checked="" type="checkbox"/> Signature of 2nd Holder
		(10) <input type="checkbox"/> Signature of 3rd Holder
2.	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	(15) Signature of 1st / Sole Holder
		(11) <input checked="" type="checkbox"/> Signature of 2nd Holder
		(11) <input type="checkbox"/> Signature of 3rd Holder
3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms.	(16) Signature of 1st / Sole Holder
		(12) <input checked="" type="checkbox"/> Signature of 2nd Holder
		(12) <input type="checkbox"/> Signature of 3rd Holder
4.	Tendering shares in open offers through Stock Exchange platforms.	(17) Signature of 1st / Sole Holder
		(13) <input checked="" type="checkbox"/> Signature of 2nd Holder
		(13) <input type="checkbox"/> Signature of 3rd Holder

This DDPI document is made on the date and place mentioned hereunder:

Client Name			
Demat DP ID & Client ID		Trading Code	
Date	___/___/20___	Place	

+ Signatures of all major co-parceners are required.

For HUF only (Mandatory)

	Name of major co-parceners	Signature
1.		
2.		
3.		
4.		
5.		

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**REQUEST FOR TRADING IN COMMODITY FORWARD CONTRACTS / COMMODITY DERIVATIVES
(MANDATORY FOR NCDEX CLIENTS)**

Subject: My/ Our request for trading in commodity forward contracts/ commodity derivatives on NCDEX as your client

I / We, the undersigned, have taken cognizance of circular no. NCDEX / TRADING-114 / 2006 / 247 dated September 28, 2006 issued by the National Commodity & Derivatives Exchange Limited (NCDEX) on the guidelines for calculation of net open positions permitted in any commodity and I /We hereby undertake to comply with the same.

I /We hereby declare and undertake that we will not exceed the position limits prescribed from time to time by NCDEX or Forward Markets Commission and such position limits will be calculated in accordance with the contents of above stated circular of NCDEX as modified from time to time.

I/We undertake to inform you and keep you informed if I/ any of our partners / directors / karta / trustee or any of the partnership firms / companies / HUF's / Trusts in which I or any of above such person is a partner / director / karta / trustee, takes or holds any position in any commodity forward contract / commodity derivative on NCDEX though you or through any other member(s) of NCDEX, to enable you to restrict our position limit as prescribed by the above referred circular of NCDEX as modified from time to time.

I /We confirm that you have agreed to enter orders in commodity forward contracts/ commodity derivatives for me/ us as your clients on NCDEX only on the basis of our above assurance and undertaking.

Signature of Client (18) 

**FORM FOR REGISTRATION AND VERIFICATION OF MOBILE NUMBER AND EMAIL ADDRESS
(FOR NCDEX CLIENTS)**

We/I are/ am aware that National Commodity & Derivatives Exchange Ltd (NCDEX) provides SMS/email alerts to the constituents (clients) of its member for trades executed on its platform. We/I hereby provide and confirm my/our mobile number and/or email address as stated below for the purpose of receipt of SMS/email alerts.

- I want to receive transaction alerts in SMS as well as Email from NCDEX
- I want to receive transaction alerts only in SMS from NCDEX
- I want to receive transaction alerts only in Email from NCDEX
- I do not want to receive any transaction alerts from NCDEX, _____ (specify reason)

The alerts should be sent on Mobile Number and/or Email ID given in KYC:

We/I agree to the terms and condition specified by the Exchange in its circular no. NCDEX/COMPLIANCE-007/2012/093 as modified from time to time. We/I are/am aware that the receipt of SMS/Email alerts on the above mobile number and/or email address can be stopped only on our/my written request.


Signature of Client (19) 

**CONSENT FORM FOR RECEIVING TRADE ALERT THROUGH SMS AND / OR E-MAIL
(FOR MCX CLIENTS)**

I/We, _____, a client with SMC Global Securities Limited (Member ID 10515) of MCX undertake as follows:

1. I/We are aware that Multi Commodity Exchange (MCX) provides details of the trades executed on its trading platform to the concerned clients/constituents through SMS and E-mail alerts.
2. I/We are aware that the member has to provide the trade details through SMS/E-mail alerts for my convenience at my request only.
3. I/We hereby confirm that I/we wish to receive trade alerts through:
 - a. SMS
 - b. E-mail
 - c. SMS and E-mail
4. The alerts should be sent on Mobile Number and/or Email ID given in KYC:

I/We agree to the terms and condition specified by the Exchange vide circular No. MCX/T&S/165/2012 dated April 26, 2012 and circulars/ clarifications issued by Exchange from time to time in this regard. I/We are/am also aware that this is an additional facility provided by the exchange and I/we shall not solely rely or use such data for any purpose and, Exchange shall not be liable for any direct or indirect loss of any nature because of providing this additional facility.

Signature of Client (20) 

AUTHORITY LETTER

With respect to the client - member relationship with you, we authorize you to do the following:

- 1) **Adjustment of account between exchanges and segments** : I/we hereby inform you that I have executed/intend to execute an agreement with you for trading on different exchanges in CM, F&O, CDS and Commodity segments. I/We request you to transfer, make adjustments and/or set off a part or whole of the stocks placed as collaterals and/or any surplus funds in any of the accounts maintained with you against the outstanding dues payable if any, by me/us to any of my/our account(s) maintained with you. You will have lien on the credit balance in any of my/our account for meeting the debit or obligations in progress in any other of my/our account. Any entries passed by you in accordance with this authorization will be binding on me/us.
- 2) **Authorization to debit Demat Account charges** : I/We opened/ have a Beneficiary account with you and I/we have a trading account with you for investment and trading purpose. It will be very difficult for me/us to issue separate cheques against your depository bills. Hence, I authorize you to debit the trading account for the debit charges payable to you as Depository Participant for providing depository services. Any such sum debited to my/our account shall be binding on me/us.
- 3) **Authorization For Communication of Financial Products** : I/We have opened an account with you and am/are interested in knowing about other financial products. I/We authorize you, your group companies and associates to keep me/us informed with any financial product which SMC Global Securities Ltd., its group companies and associates presently issue, deal in, or distribute or may, from time to time, launch, issue, deal in or distribute; through E-mail, SMS, telephone, print media or otherwise. This is without legal obligation on you, your group companies and associates to so inform and you or they may, in their discretion, discontinue sending such information.
- 4) **Authorization for verification of information from independent agency(ies)** : I/We, do hereby certify that the information provided by me/us in this account opening form is true and correct in all respects and SMC Global Securities Limited (SMC) is entitled to verify this directly or through any third party agent. I/We further acknowledge the SMC's right to seek any information from any other source in this regard. I/We do understand that all the information will form the basis of any facility that SMC may decide to grant me/us at its sole discretion. I/We consent and authorize SMC to share or generate subsequently any report through CIBIL or authorized agency/bureau.
- 5) **Authorization for not Providing Confirmation Slips** : I / We 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 issued by you.

Please score out whatever not accepted/ not agreed with.

(23) 
Signature of Client

AUTHORISATION TO SEND CONTRACT NOTE, STATEMENT OF FUNDS & SECURITIES ETC. ELECTRONICALLY

I/we authorise you to issue the contract notes, statement of funds & stocks, circulars, amendments, Client Registration Documents and such other documents in electronic mode in lieu of physical mode on my E-mail ID as given in KYC form and updated from time to time. Any change in the E-mail ID shall be communicated by me / us in writing to your customer care department or through secured login available on your website.

Further, to my /our authority to you to issue Contract Notes in digital format I/we authorise you not to provide me/us Order Confirmation / Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We shall get the required details from the Contract Notes issued to us.

I/We authorize you to send periodic statements of funds and stocks & margin statement etc. in digital format at my Email address unless I/We request you in writing to send them in paper form.

I/We hereby acknowledge that all the documents as send above by SMC electronically will be considered as having delivered to me once the e-mail leaves the SMC e-mail server unless the same is rejected by client e-mail server and bounced mail notification is not received by SMC. I/We further agree that in the absence of communication from my/our end regarding non-receipt of documents through e-mail, or notification of any discrepancy within 2 days from the date of issuance of digital contract note through e-mail, SMC may construe that there is a deemed acknowledgement of the document(s) send to client electronically

(24) 
Signature of Client

I/We are registered / registering with you as a 'Client' for availing your services and have/are executing various documents such as KYC (Know Your Client Form) etc. which establish the relationship between us and determine the inter se rights and liabilities between you and me/us.

I/We desire to avail the Intraday/High Multiplier Facility from you. I/We agree that the Facility availed by me/us will always be subject to KYC Documents executed by me/us, which terms and conditions shall always be read as part and parcel of this application and its terms and conditions as specified hereunder.

TERMS AND CONDITIONS

- a) The details of the Facility as amended from time to time are / will be available on web site: www.smctradeonline.com/ www.smcindiaonline.com. I/We agree that SMC may impose additional terms other than those specified herein and/or change the existing terms of Facilities and/or withdraw the same (or the Facility) for one or more Clients without prior notice and for this no claim shall lie against SMC.
- b) The Facility may be allowed only for selective contracts as displayed on the website.
- c) In Intraday/High Multiplier Facility, the Client will be allowed leverage for intra-day trading on available margin/security/collateral. The leverage available shall be liable to change as per SMC's risk management policy.
- d) The Client can be put under square off mode for the day if once his MTM loss reaches or crosses stipulated margin percentage of available margin and all positions of Clients are liable to be automatically squared off at once even if it happens before Auto Square off Time (as defined by SMC). SMC may prescribe / change stipulated margin percentage depending upon exchanges / regulatory requirements and/or changes in the market conditions etc.
- e) Client has the sole responsibility to monitor his positions throughout the day and take necessary/ appropriate actions, for which responsibility cannot be transferred to SMC. All open positions of Client, not squared off by Client prior to designated time will be taken control off by trading system. This designated time shall generally be during the last hour of the trading hour(s) on the exchange. After taking over control trading system may attempt for Automatic Square off at market rates. This shall be done by first cancelling all unexecuted pending orders and thereafter square off the executed orders by putting counter orders at market rate. The time upon which this square off attempt may be started by the trading system shall be the "Auto Square off Time". However there is no surety that square off by trading system will be successful partially/fully. This can happen due to various factors such as market volatility or connectivity related issues etc. Therefore Client should not leave square off of open positions on the trading system but to square off open positions by their own efforts.

DECLARATION

I/We hereby declare that the decision to register / enroll under the Intraday/High Multiplier Facility and for making all trades thereby is/ shall be entirely mine/ours and I/we have neither been given nor have been in any way influenced by you/your officers with any financial or other advice regarding the suitability or profitability of availing the Intraday/High Multiplier Facility as stated above or making any trades thereby. I/We may suffer losses on account of square off/non-square off by SMC within or at the end of the day and I agree to bear such losses without protest or claim against SMC.


I/We have read and accepted all terms and conditions specified herein above including those in paragraphs 1 to 5, their sub-paragraphs above and further declare that by clicking on submit button I / we agree to be bound by all of them.

Signature of Client

(25) 

LETTER OF AUTHORISATION - AUTHORISED TRADING BY RELATIVE

1. I, the undersigned write to notify you that I have appointed Mr./Ms. _____
[having residential address _____
Phone No. _____ Mobile No. _____ Email address _____] (hereinafter called the 'Agent') who is my Father/ Mother/ Son/ Daughter/ Spouse* to act on my behalf to give buy or sell instructions on all exchanges and give trade confirmation of every type and description including but not limited to Cash, Futures, Options, Currency and Commodity Segments. (*score out the inapplicable and attach proof of relationship e.g. Ration card/ marriage certificate/ Voter ID)
2. I ACKNOWLEDGE THAT PRIOR TO COMPLETING AND EXECUTING THIS LETTER I HAVE READ AND UNDERSTOOD THE DISCLOSURE STATEMENT PRINTED BELOW.
3. I further declare and agree that:-
 - (a) my agent shall have power as my agent to act as fully and effectually for the purpose(s) as I could do personally;
 - (b) all acts and matters previously done by my Agent in respect of my account(s) opened and maintained with you are hereby deemed ratified and confirmed; and
 - (c) notwithstanding the authorisation given to my Agent above, I may still communicate instructions to you personally. However, in the event of any inconsistency between instructions communicated by my Agent and instructions communicated by me personally, you shall have the absolute discretion (but shall not be obliged) to act upon the instructions communicated last in time and in your sole opinion considered capable of being acted upon, and in so acting you shall not be liable for any loss whatsoever and howsoever arising.
4. I further acknowledge that my appointment of my Agent is made by me of my own free will and as a result of my own judgment and deliberations. You shall accordingly be under no liability whatsoever in respect of any loss or damage which I may suffer or incur as a result of the acts or omissions of my Agent (including any acts involving dishonesty, criminal breach of trust, theft or other criminal offences). I further agree to be fully responsible for such acts or omissions of my Agent and shall indemnify and hold you harmless from any and all claims, liabilities, penalties, adverse consequences, losses, damages, costs or expenses (including legal fees on a full indemnity basis) which you may incur, be subjected to or suffer, arising out of, in relation to or in connection with, your relying on or acting in accordance with acts and /or omissions of my Agent within the scope of my Agent's ostensible authority. I also acknowledge that you are not obliged to ascertain or enquire into the terms and conditions on which my Agent was appointed, the context or circumstances in which any decision was taken by my Agent, the soundness of such decision or the purpose for which any of the decisions were taken.
5. The appointment of my Agent and authority conferred shall continue until written notice of revocation by me is received by you. I undertake to ratify and confirm all acts and things done by my Agent on my behalf until your receipt of such notification.
6. I acknowledge that I have received a copy of the following Risk Disclosure and understand its contents. I am signing this letter of authorisation after having reviewed the risks pointed out to me and am willing to accept the same and I am signing this letter of authorisation voluntarily.

(26) 
Signature of Client

Specimen Signature of
Authorised Relative

DISCLOSURE STATEMENT


PLEASE DO NOT SIGN THIS LETTER OF AUTHORISATION IF YOU DO NOT FULLY UNDERSTAND THE CONSEQUENCES OF SIGNING IT. This letter of authorisation is an IMPORTANT DOCUMENT. By signing it, you are authorising your Agent to enter into trading transactions on your behalf. You should know that your Agent will be acting as your agent. We will therefore not be responsible for any acts or omissions of your Agent in respect of any acts and/or things which may be done by him or her in exercise of authority you have given by signing this letter. In particular, we will not be responsible for any theft, misappropriation or other criminal, fraudulent or negligent acts of your Agent with respect to your share transactions or any loss due to his/her incompetence, inexperience or negligence. Please also particularly note that in granting this discretionary trading authority your Agent may affect trading transactions without reference to you.

CONSENT FOR AVAILING MARGIN TRADING FACILITY (MTF)

I/We wish to avail the Margin Trading Facility (MTF) on the platform of National Stock Exchange of India Limited and BSE Limited as per the framework prescribed by SEBI vide its' circular No. CIR/MRD/DP/54/2017 dated Jun 13, 2017.

Further, I/We have read and understood "Rights and Obligation of Stock Brokers & Client for Margin Trading Facility (MTF)" as prescribed by NSE vide its Circular No. NSE/COMP/35260 dated June 30, 2017 and BSE vide its Circular No. 20170619-26 dated June 19, 2017.

I/We have read & understood the "Policies & Procedures for MTF" as specified by SMC Global Securities Limited regarding terms and conditions of Margin Trading Facility, method of communication for confirmation of orders/trades, margin calls and calls for liquidation of collateral/security/positions etc and agreed to abide by the clauses mentioned therein all the times. Further, I/we will refer to SMC's website from time to time for any updation w.r.t policies & procedures.

(27) 
Signature of Client

FATCA, CRS & ULTIMATE BENEFICIAL OWNERSHIP (UBO) SELF CERTIFICATION FORM FOR NON-INDIVIDUALS

(Please consult your professional tax advisor for further guidance on FATCA & CRS classification)
(For FATCA Instruction & Definitions, please visit <http://www.smctradeonline.com/download.aspx>)

FATCA & CRS Declaration

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India Yes No
(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

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

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

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

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

<p>1. We are a, Financial institution <input type="checkbox"/> (Refer Instruction 1 of Part C) or Direct reporting NFE <input type="checkbox"/> (Refer Instruction 3(vii) of Part C) (please tick as appropriate)</p>	<p>GIIN <input style="width: 80%;" type="text"/></p> <p>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</p> <p>Name of sponsoring entity _____</p>
<p>GIIN not available (please tick as applicable)</p>	<p><input type="checkbox"/> Applied for <input type="checkbox"/> Not obtained – Non-participating FI</p> <p><input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <input style="width: 20px;" type="text"/> (Refer Instruction 1 A of Part C)</p>

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

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

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

Category (Please tick applicable category):

<input type="checkbox"/> Unincorporated association / body of individuals	<input type="checkbox"/> Unlisted Company	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Limited Liability Partnership Company
<input type="checkbox"/> Others (please specify _____)	<input type="checkbox"/> Public Charitable Trust	<input type="checkbox"/> Religious Trust	<input type="checkbox"/> 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 (Refer 3(vi) of Part C)

Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer Instruction 3(iv) (A) of Part (C))			
Country of Tax residency*			
PAN*			
Address	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____	
Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office
Tax ID [§]			
Tax ID Type			
City of Birth			
Country of Birth			
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____
Nationality			
Father's Name			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Holding (%) [§]			

* To include US, where controlling person is a US citizen or green card holder
 #If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.
 %In case Tax Identification Number is not available, kindly provide functional equivalent
 \$Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary

FATCA - CRS Terms and Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which require Indian financial institutions to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with us or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

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

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Certification

I/We have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read alongwith the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby agree and confirm to inform SMC for any modification to this information promptly. I/We further agree to abide by the provisions of the Scheme related documents inter alia provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI)'.

	First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Designation			
Signature	(28)	(14)	(14)

I/We _____ am/are registered as your client with Client Code No. _____ and have entered into Trading Member and Client Relationship for the purpose of trading in the Capital Market segment of Bombay Stock Exchange Ltd./ National Stock Exchange of India Ltd. (Exchange).

I/We am/are interested in availing the BSE StAR MF/MFSS facility of the Exchange for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the BSE StAR MF/ MFSS of the Exchange.

For the purpose of availing the BSE StAR MF/ MFSS facility, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of BSE StAR MF/ MFSS and I/we further confirm that the details contained in same remain unchanged as on date.

I/We are willing to abide by the terms and conditions as mentioned in the Circular dated 24, November 2009 & 2, December, 2009 for NSE & BSE Respectively and as may be specified by the Exchanges from time to time in this regard.

I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India and Association of Mutual Funds of India (AMFI).

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

I/We therefore request you to register me/us as your client for participating in the MFSS/ BSE StAR MF.

Details of terms & conditions for the Investor / Client for using New BSE StAR MF / MFSS facility

1. Pre-requisites for becoming Investor / Client for the BSE StAR MF/MFSS facility

- 1.1. The client who is desirous of investing in units of mutual fund schemes through the New BSE StAR MF/MFSS.
- 1.2. The Client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the Participant of the New BSE StAR MF/MFSS.
- 1.3. The client has satisfied itself of the capacity of the Participant to deal in Mutual Fund units and wishes to execute its instruction through the Participant and the client shall from time to time continue to satisfy itself of such capability of the Participant before executing transacting through the Participant.
- 1.4. The Client has approached to the Participant with the application for availing the New BSE StAR MF/MFSS facility.
- 1.5. The client has submitted relevant KYC (Know Your Client) details to the Participants

2. Terms and Conditions

- 2.1. The client shall be bound by circulars issued by BSE/NSEIL, Rules, Regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
- 2.2. The client shall notify the Participant in writing if there is any change in the information in the 'client registration form' provided by the client to the Participant at the time registering as a client for participating in the New BSE StAR MF/MFSS or at any time thereafter.

- 2.3. The client shall submit to the Participant a completed application form in the manner prescribed format for the purpose of placing a subscription order with the Participant.
- 2.4. The client has read and understood the risks involved in investing in Mutual Fund Schemes.
- 2.5. The client shall be wholly responsible for all his investment decisions and instruction.
- 2.6. The client shall ensure continuous compliance with the requirements of the BSE, NSEIL, SEBI and AMFI.
- 2.7. The Client shall pay to the Participant fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant renders to the Client.
- 2.8. The client will furnish information to the Participant in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
- 2.9. In the event of non-performance of the obligation by the Participant, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of BSE or BOISL / NSEIL or NSCCL.
- 2.10. In case of any dispute between the Participants and the investors arising out of the BSE StAR MF Fund / MFSS facility, BSE and /or BOISL and NSEIL and / or NSCCL agrees to extend the necessary support for the speedy redressal of the disputes.

(29) 

Signature of Client

**ELECTRONIC CONTRACT NOTE [ECN] - DECLARATION
(VOLUNTARY)**

SMC GLOBAL SECURITIES LTD.

11/6B, Shanti Chamber, Pusa Road,
New Delhi-110005

Dear Sir,

I, _____ a client with M/s. SMC Global Securities Ltd. member of NCDEX, MCX & ICEX Exchange undertake as follows:

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

Name of Client : _____

PAN : _____


Unique Client Code : _____

Signature of Client (30) 

Date :

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


Place : _____

For SMC use	
Verification of the client Signature done by	
Name	
Signature	
Date	

DECLARATION FOR PROVIDING SMS/E-MAIL ALERTS AND OTHER REPORTS ON RELATIVE EMAIL/MOBILE

I hereby declare that the Mobile Number and/or Email ID given in the account opening form are of my relative. He / She already has a trading account with SMC Global Securities Limited under the below mentioned PAN or UCC.

"I request you to please accept his/her mobile number and/or E-mail ID for the purpose of sending SMS/Email alerts/ ECN and/or any other reports by the Stock Exchange/Depository/SMC to me."

	First / Sole Holder	Second Holder	Third Holder
Relationship with the person whose Mobile /E-mail Id is provided	<input type="checkbox"/> Spouse <input type="checkbox"/> Dependent parent <input type="checkbox"/> Dependent child <input type="checkbox"/> Karta/Authorized Signatory	<input type="checkbox"/> Spouse <input type="checkbox"/> Dependent parent <input type="checkbox"/> Dependent child <input type="checkbox"/> Karta/Authorized Signatory	<input type="checkbox"/> Spouse <input type="checkbox"/> Dependent parent <input type="checkbox"/> Dependent child <input type="checkbox"/> Karta/Authorized Signatory
PAN/UCC/Demat of relative			
Signature of Client		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

DECLARATION FOR NAME MISMATCH
(To be filled if the name on documents is different)

This is to bring to your notice that my name is spelt differently in my Identity proof, Address proof and Bank proof. Please find below the names as spelt in respective proofs:

Name as per PAN CARD _____

Name as per Address Proof _____

Name as per Bank Proof _____

I hereby confirm that all the said names belong to me. I hereby state and confirm that what is stated above is true and correct information.

I agree to indemnify and keep SMC indemnified at all times from and against all costs, charges, damages, penalties (including reasonable attorney fees) suffered and/or incurred by SMC for any act done or omitted to be done on the above declaration.

Signature of Client

DECLARATION FOR SIGNATURE MISMATCH
(To be filled if client's signature is mismatched from PAN Card and Bank)

This is to bring into your notice that my signature on PAN Card / Bank and account opening form are as follows:

Signature as per Bank

Signature as per Account Opening Form

Signature as per PAN Card

I hereby confirm that all the above signatures are mine. I hereby state and confirm that what is stated above is true and correct information.

I agree to indemnify and keep SMC indemnified at all times from and against all costs, charges, damages, penalties (including reasonable attorney fees) suffered and/or incurred by SMC for any act done or omitted to be done on the above declaration.

Name of the Applicant : _____

FOR OFFICE USE ONLYUCC :

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

FOR & ON BEHALF OF SMC GLOBAL SECURITIES LIMITEDName :

Signature :

Signature of the Authorised Signatory

Date :

(Seal / Stamp of SMC Global Securities Ltd.)

DETAIL OF INTRODUCER AND SMC SUB-BROKER / AP

- Authorised Person Registration No.
- Sub-Broker Registration No.
- Remisier / BDR Code :
- RM Emp. Code :
- Existing Client UCC :
- Others _____ (Please Specify)

Signature of the Introducer

Name : PAN : Address : Pin : State : Phone / Fax : E-mail / Website : **FOR BRANCH PURPOSE ONLY**

	Name	Employee/BDR Code	Signature
Introducer / BDR			
Relationship Manager			
Dealer			

BROKERAGE APPROVAL (if required)Name of Approving Officer : Designation : Branch / Location : Date : Signature of Branch Head /
Zonal Head / Director**CHEQUE DETAILS**

	Towards	Amount	Cheque No.	Date	Bank Name and Branch
<input type="checkbox"/> Y <input type="checkbox"/> N	Account opening Fee (For Trading Account)				
<input type="checkbox"/> Y <input type="checkbox"/> N	Margin Amount				

CVL NDML DOTEX CAMS KARVY

NEW KRA KYC

MODIFY KRA KYC WITH DOCUMENTS

MODIFY KRA KYC WITHOUT DOCUMENTS

VERIFICATION CALL TO CLIENT

Date	Time	Remarks

Activity	Name
Form Verified by	
Data punched by (2520)	
Data punched by (2522)	
Code generated by (378)	
DP Verified by	
Brokerage punched by	



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EMAIL INFO@SMCINDIAONLINE.COM

VISIT WWW.SMCINDIAONLINE.COM

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SMC Global Securities Ltd. 11/6B, Shanti Chamber, Pusa Road, Delhi-110005. CIN : L74899DL1994PLC063609 Tel +91-11-30111000, SEBI Regn. No. INZ000199438, Member: BSE (470), NSE (07714) & MSEI (1002), NCDEX (00021), MCX (8200) & ICEX (1010). DP SEBI Regn. No. CDSL/NSDL-IN-DP-130-2015, Mutual Funds Distributor ARN No. 29345, Research Analyst Regn. No. INH100001849, Investment Adviser Reg. No. INA100012491, Portfolio Manager Regn. No. INP000006703.

Business Excellence Award (Order of Merit) 2019 Source Skoch Corporate Excellence Awards 2019 • Broking House Non Agricultural Commodities of The Year 2019 Source MCX Awards 2019 • Premier Depository Participant in Gold Category 2019 Source CDSL Awards 2019 • Fastest Growing MFI North in BSE Star MF Online 2019 Source BSE Star MF Awards 2019 • Best Performer in Account Growth Rate (Rising DPs - 1st Position) 2018 Source NSDL star performer award 2018 • Best Performing Retail Broker (Northern Region) Source 2018 National Stock Exchange (NSE) Awards • Company of the year (Financial Services) 2018 Source Zee Business Awards 2018 • Best Broker with In-house Research in Bullion 2018 Source ASSOCHAM Excellence Awards • Franchisor of the year - Business services 2018 Source 16th Franchise & Star Retailer Awards, 2018 • Corporate Brokerage House of the Year 2018 Source MCX Awards 2018 • Best Fastest Growing Commercial NBFC 2018 Source BFSI Leadership Awards 2018



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