



FAIR INTERMEDIATE INVESTMENT PVT. LTD.

SEBI REGISTRATION NUMBER: INZ000185032 (NSE, BSE)
SEBI REGISTRATION NUMBER: IN-DP-CDSL-81-2015 (CDSL)

Corporate Member:

**National Stock Exchange of India Ltd (NSE)
Bombay Stock Exchange Ltd (BSE)
Central Depository Services India Ltd (CDSL)**

Receipt by Branch: _____ Date When forwarded by Branch: _____
Date when received at H.O.: _____ H.O. Inward No. _____
Group: _____ Location: _____
Date of Activation: _____
Name of Applicant: _____
Trading Code: _____ Demat A/c. No. 12039800 _____

CLIENT REGISTRATION FORM – NSE/BSE & D.P.

=====INDIVIDUAL / HUF / PROPRIETORSHIP FIRM/CORPORATE/FIRM/NRI=====

**PLEASE READ THIS DOCUMENT CAREFULLY BEFORE AGREEING TO ITS
CONTENTS & ENSURE ALL THE DETAILS PROVIDED ARE CORRECT.**

**Regd. Office: 2nd Floor, Shukla Palace, Sapru Marg, Lucknow – 226 001
Telephone: 0522-4052800, 4052803, 4052806, 4052824 Fax No.: 0522-4052820
Visit us at: www.fairinvest.co.in, e-mail: support@fairinvest.co.in
For any type of grievances kindly mail us on compliance@fairinvest.co.in**



DEAR INVESTOR,

Subject: Prevention of Money Laundering

Money laundering is a process of making dirty money clean. Money is moved around the financial system again and again in such manner that its origin gets hidden.

It involves complex chain of activities whereby huge amount of money generated from illegitimate activities viz. selling of narcotic drugs, extortion, corruption, illicit dealing in weapons, human trafficking etc. Is put through a series of process so that it comes out at the other end as clean and legal money. Terrorist organization encourage money laundering to support their illegal acts.

It is important to note that due to increased vigilance in the wake of emanating from increasing terrorism, any failure on our part to discharge the duties cast on under the applicable laws or we becoming an instrumental or a part of the chain, even if unknowingly, may invite the trouble.

In order to fight against the money laundering and terrorist financing the Prevention of Money Laundering Act (PMLA) was brought into force w.e.f July 1, 2005 in India. Guidelines were also issued in the context of the recommendations made by the financial Action Task Force on antimoney laundering standards. Compliance with these standards has become imperative for international financial relations.

PMLA is applicable to every Intermediary registered with Securities & Exchange Board of India (SEBI), which includes a stockbroker, depository participant, portfolio manager, sub-broker and any other intermediary associated with securities market.

As per provisions PMLA, the Intermediaries are required to comply with Your Client (KYC) norms, conduct on ongoing client due diligence to ensure that the activity being conducted in any accounts is consistent with the Intermediary's knowledge of the client, its business and risk profile.

In light of the above, you are requested to provide the information or documents evidencing source of funds, income tax returns, bank records, demat holding etc, at the time of registration as a client with us or subsequent whenever asked for during the course of your dealings with us.

GRIEVANCE / OTHER ISSUES & COMPLAINTS

For any grievance/dispute please contact **FAIR INTERMEDIATE INVESTMENT PVT. LTD.** at our email id- **grievance@fairinvest.co.in** & phone no. **0522-4052806**. In case not satisfied with the response, please contact the concerned exchanges (NSE) **ignse@nse.co.in** Contact No. **18002660058** (BSE) **dis@bseindia.com** Contact No. **022-22728517** & Depository (CDSL) **complaints@cdslindia.com** Contact No. **022-22723333**.

**FIPL****TO BE FILLED BY INTERMEDIARY / EMPLOYEE**

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 Fair Intermediate Investment Pvt. Ltd.

Authorised Signatory / Director

 Date:

D	D	M	M	Y	Y	Y	Y
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INTRODUCER DETAILS

Name of Introducer: _____

Status of the Introducer:

 Sub-broker
 Remisier
 Authorized Person
 Existing Client
 Others:

(Please Specify Others)

Address of the Introducer: _____

Employee Code:		Employee E-mail :	
Mobile No.:		Phone (With STD Code)	

Signature of the Introducer: _____

REGISTERED & CORPORATE OFFICE ADDRESS**Fair Intermediate Investment Private Ltd**

2nd Floor, Shukla Palace, Sapru Marg, Lucknow-226001
 Tel No: 0522- 4052800, 4052802, 4052803, 4052806 , 4052824
 Website: www.fairinvest.co.in Email : support@fairinvest.co.in

COMPLIANCE OFFICER & CEO

Name: Nalin Rastogi
 Tel No. : 0522-4052806 Mail Id: compliance@fairinvest.co.in

CORPORATE MEMBER

NSE (NATIONAL STOCK EXCHANGE OF INDIA LTD.)		Member ID : 12098
	<i>SEBI Registration No.</i>	<i>Registration Date</i>
Cash Segment	: INZ000185032	13/08/2004
Future & Option Segment	: INZ000185032	14/10/2004
Currency Derivative Segment	: INZ000185032	28/08/2008
BSE (BOMBAY STOCK EXCHANGE LTD.)		Member ID :3131
	<i>SEBI Registration No.</i>	<i>Registration Date</i>
Cash Segment	: INZ000185032	29/03/2006
Future & Option Segment	: INZ000185032	22/02/2008
Currency Derivative Segment	: INZ000185032	20/03/2015
CDSL (CENTRAL DEPOSITORY SERVICES LTD.)		DP ID : 39800
Registration No.	: IN-DP-CDSL-81-2015	
Registration Date	: 02/06/2015	

**INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM**

(For Individuals /Sole Prop. Firm/Partnership Firm/AOP/HUF)

A. IMPORTANT POINTS:

1. Self-attested copy of PAN card & Aadhaar card is mandatory for all clients, including Promoters/Partners/Karta/Trustees and whole time directors and persons authorized to deal in securities on behalf of company/firm/others.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

B. PROOF OF IDENTITY (POI): - List of documents admissible as Proof of Identity:

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

C. PROOF OF ADDRESS (POA): - List of documents admissible as Proof of Address:

*(*Documents having an expiry date should be valid on the date of submission.)*

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

D. EXEMPTIONS/CLARIFICATIONS TO PAN (*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. .SIP of Mutual Funds Up-to Rs.50,000/- p.a.
5. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. LIST OF PEOPLE AUTHORIZED TO ATTEST THE DOCUMENTS:

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

F. ADDITIONAL DOCUMENTS TO BE OBTAINED FROM NON-INDIVIDUALS, OVER & ABOVE THE POI , POA, AS MENTIONED BELOW:

Types Of Entity	Documentary Requirements
Corporate	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI • takeover Regulations, duly certified by the company secretary/Whole time director/MD(to be submitted every year) • Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations • Photograph, POI, POA, PAN of individual promoters holding control – either directly or indirectly • Copies of the Memorandum and Articles of Association and certificate of incorporation • Copy of the Board Resolution for investment in securities market • Authorised signatories list with specimen signatures
Partnership Firm	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Certificate of registration (for registered partnership firms only) • Copy of partnership deed • Authorised signatories list with specimen signatures • Photograph, POI, POA, PAN of Partners
Trust	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Certificate of registration (for registered trust only).Copy of Trust deed • List of trustees certified by managing trustees/CA • Photograph, POI, POA, PAN of Trustees
HUF	<ul style="list-style-type: none"> • PAN of HUF • Deed of declaration of HUF/List of coparceners • Bank pass-book/bank statement in the name of HUF • Photograph, POI, POA, PAN of Karta
Unincorporated Association or a body of Individuals	<ul style="list-style-type: none"> • Proof of Existence/Constitution document • Resolution of the managing body & Power of Attorney granted to transact business on its behalf • Authorized signatories list with specimen signatures
Banks/Financial Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years • Authorized signatories list with specimen signatures
Foreign Institutional Investor(FII)	<ul style="list-style-type: none"> • Copy of SEBI registration certificate • Authorized signatories list with specimen signatures
Army/Government Bodies	<ul style="list-style-type: none"> • Self-certification on letterhead • Authorized signatories list with specimen signatures
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Societies Registration Act • List of Managing Committee members • Committee resolution for persons authorised to act as authorised signatories with specimen signatures • True copy of Society Rules and Bye Laws certified by the Chairman/Secretary



FIPL Disclosure Pursuant to SEBI Circular No.CIR/MIRSD/16/2011 DT. 22 August 2011
Read with SEBI circular bearing Reference No. MIRSTD/SE/CIR-19/2009 Dt. 03 December 2009

INDEX OF DOCUMENTS

ANNEXURE – 1

Sr. No.	Name of the Document	Brief Significance of the Document	Page No.
MANDATORY DOCUMENTS As Prescribe By Depositories, Exchanges & SEBI			
1.	Account Opening Form- Checklist & Instructions	The Document provides instructions & Checklist relevant to opening of trading & demat account. (Individuals & Non-individuals)	5
2.	Know Your Client (KYC) Application Form - For Individual	This Document capture the basic information about the client / joint Holders for Trading & Demat Account respectively	6
3.	Account Opening Form for Trading & Depository (For Individual)	This Document captures the additional information about the client relevant for opening Trading & Demat Account	7
4.	Nomination Form	This document captures the details of nominee(s) w.r.t. the trading & / or demat account/Mutual Fund and the details of guardian in case of minor nominee(s)	8-9
5.	Know Your Client (KYC) Application Form - For Non-Individual	This Document capture the basic information about the client for Trading & Demat Account respectively	10-11
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7.	Trading Account Related Details	Additional information about the client	13
8.	Tariff Sheet	Document detailing the rate/amount of brokerage, Demat account transaction & other charges levied on the client for trading on the stock exchanges(s) (to be added by the stock broker).	14
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12	Disclosure of proprietary trading by broker to client & General Authorisation by client	Disclosure of Proprietary Trading by broker to client & Verbal order acceptance authorisation by client	19
13.	Letter of Authority to Trade	Where the client wishes to authorize other person to operate his account	20
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19.	BSDA	Declaration for availing of Basis Services Demat Account (BSDA)	32



Please fill in ENGLISH and BLOCK LETTERS with black ink

KYC Number of Applicant: _____

A. IDENTITY DETAIL

1.	Name Of the Applicant													
	Name of Father/Spouse													
	Mother Name													
2.	A. Gender	<input type="checkbox"/> M <input type="checkbox"/> F	B. Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married	C.DOB	D	D	M	M	Y	Y	y	y	
3.	A. Nationality / Citizenship	<input type="checkbox"/> Indian <input type="checkbox"/> Other _____	B. Status	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non-Resident Individual <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin										
4.	PAN No.													Please enclosed a duly attested copy of your PAN Card
5.	Specify the proof of Identity Submitted													

PHOTOGRAPH
Please affix your recent passport size photograph and sign across

B. ADDRESS DETAILS

1.	Correspondence Address													
		City/Town/Village								Pin Code				
		State								Country				
2.	Proof of Correspondence Address													
3.	Contact details	Telephone(Office)						Telephone(Res.)						
	Mobile No.						Fax. No.							
	Mobile given by me belongs to	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent children <input type="checkbox"/> Dependent Parent												
	Email ID													
	Email Id given by me belongs to	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent children <input type="checkbox"/> Dependent Parent												
	No E-mail/Mobile Declaration	I hereby declare that I do not have any Email Id/Mobile No. <input type="checkbox"/>												
4.	Permanent Address (if differ from above)													
		City/Town/Village								Pin Code				
		State								Country				
5.	Proof of Permanent Address													

C. Fatca & CRS Detail **Nationality/Tax Residency/Citizen ship Other than India** No Yes

Country of Birth		Place/City of Birth												
Country of Citizenship /Nationality		Country of Tax Residency (Other Than India)												
Tax Payer Identification Number (Other than India)														
2.	Occupation(Please Tick any one)	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Government Service	<input type="checkbox"/> Others(Please specify) _____			
3.	Please tick, if Applicable	<input type="checkbox"/> Politically Exposed Person <input type="checkbox"/> Related to a Political Person												

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.

Place:		
Date : ___/___/___	Signatures of Applicant	Sign

FOR OFFICE USE ONLY

<input type="checkbox"/> (Original Verified)Self Certified Documents Copies Received	IPV Done <input type="checkbox"/> on ___/___/___
<input type="checkbox"/> (Attested) True copies of Documents Received	Name: _____
Intermediary name Or Code:-	Designation: _____ Seal/Stamp of the Intermediary



FIPL PART II – ACCOUNT OPENING FORM (FOR INDIVIDUALS) DP ID:12039800

DP ID	CLIENT ID	Date
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I/We request you to open a depository in my/our name as per following details:(Please fill all the details in CAPITAL/BLOCK LETTERS only)

A. TYPE OF ACCOUNT (Please tick whichever is applicable)

<input type="checkbox"/> Ordinary Resident	<input type="checkbox"/> NRI-Repatriable	<input type="checkbox"/> Margin	<input type="checkbox"/> Promoter	<input type="checkbox"/> HUF	<input type="checkbox"/> Qualified Foreign Investor
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Directors Relative	<input type="checkbox"/> NRI-Non Repatriable	<input type="checkbox"/> Others(Specify).....		

B.DETAILS OF ACCONT HOLDER (S)

Account Holder(s)	Sole/First Holder	Second Holder	Third Holder
Name			
PAN			
Date of Birth			
Occupation (Please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> NGO <input type="checkbox"/> Agriculturist <input type="checkbox"/> Public Sector <input type="checkbox"/> Statutory Body <input type="checkbox"/> Professional <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Others (specify)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> NGO <input type="checkbox"/> Agriculturist <input type="checkbox"/> Public Sector <input type="checkbox"/> Statutory Body <input type="checkbox"/> Professional <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Others (specify)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> NGO <input type="checkbox"/> Agriculturist <input type="checkbox"/> Public Sector <input type="checkbox"/> Statutory Body <input type="checkbox"/> Professional <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Others (specify)
Mobile No.			
Family Flag for Mobile	<input type="checkbox"/> Self <input type="checkbox"/> Depended Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Depended Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Depended Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children
Email ID			
Family Flag for E-mail	<input type="checkbox"/> Self <input type="checkbox"/> Depended Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Depended Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Depended Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children
Brief Details			

C.	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 below:	
	NAME	PAN

D. Standing Instructions

I/We instruct the DP to receive each and every credit in my/our account	(Automatic credit) <input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly (Default option is monthly)
I/We request you to send Electronic Transaction-cum-Holding Statement at Sole/First Holders Email ID stated in the Account Opening Form or at _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you wish to receive dividend / interest directly in to your bank account through ECS ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
I would like to share the email ID with RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I would like to instruct the DP to accept all the pledge instruction in my account without and other further instruction from my end (If not marked, the default option would be “No”)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account to be opened through Power of Attorney (POA)	<input type="checkbox"/> Yes <input type="checkbox"/> No
I would like to received the Annual Report (Tick the applicable box. If not marked the default option would be in Physical)	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical & Electronic
RGESS FLAG	<input type="checkbox"/> Yes <input type="checkbox"/> No
Transaction Using Secured Texting Facility (TRUST) Refer to Terms and conditions on our Website	I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I have read and understood the Terms and Conditions prescribed by CDSL for the same. I wish to register the following clearing member IDs under my below mentioned BO ID registered for TRUST Stock Exchange Name/ID: _____ Clearing Member Name : _____ Clearing Member ID(Optional): _____
SMS Alert Facility	<input type="checkbox"/> Yes <input type="checkbox"/> No Mobile No. +91 _____ Refer to Terms & Conditions given as Annexure 2.4
Easi	<input type="checkbox"/> Yes if yes, please contact your DP for details (Facility through CDSL,s website: www.cdslindia.com wherein a BO can view his ISIN balances, transactions and value of the portfolio online.) <input type="checkbox"/> No
Basic service Demat A/c facility	<input type="checkbox"/> Avail <input type="checkbox"/> Not Avail

E. GURDIAN DETAILS (WHERE SOLE HOLDER IS A MINOR):

(For account of a minor, two KYC/KRA Application Form must be filled i.e. one for the guardian and another for the minor (to be signed by guardian))

Guardian Name			
PAN		Date of Birth	
Relationship of Guardian with Minor			

F. In case of NRIs/Foreign Nationals

RBI Approval Reference Number		RBI Approval Date	
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**FIPL****NOMINATION OPTION (For DP & Trading Both)**

Nomination Registration No. _____

Registration Date: _____

- I/We wish to make a nomination. (As per details given below):
- I/We wish to cancel the nomination made by me/us earlier and consequently all right and liabilities in respect of beneficiary ownership in the securities held by me / us in the said account shall vest in me / us. (Strike off the nomination details below.)

NOMINATION DETAILS


- I/We wish to make a nomination and do hereby nominate the following person (s) who shall received all securities held in the Depository by me/us in the said beneficiary owner account in the event of my / our death.

Nomination can be made upto three nominee in the account.		Details of 1 st Nominee	Details of 2 nd Nominee	Details of 3 rd Nominee
Name of the nominee(s) (Mr./Ms.)				
Father Name/Husband Name				
Share of each Nominee	Equally <input type="checkbox"/> (if not equally, (please specify percentage)	%	%	%
Relationship with BO (if Any)				
Address of Nominee(s)				
PIN Code				
Mobile/telephone No. of Nominee(s)				
Email ID of Nominee(s)				
Nominee Identification details: (Please tick any one of following and provide details of same) <input type="checkbox"/> Photograph & Signature		Photograph of 1 st Nominee	Photograph of 2 nd Nominee	Photograph of 3 rd Nominee
Signature of Nominee across photograph		Sign ✍	Sign ✍	Sign ✍
PAN No.				
Aadhaar				
Saving Bank Account No.				
Proof of Identity				
Demat Account Id				

Should be Filled only if nominee (s) is a minor:			
Date of Birth(in case of minor nominee(s))			
Name of Guardian (Mr./Mrs.) (in case of minor nominee(s))			
Address of Guardian			
PIN Code			

Mobile/telephone No. of Guardian			
E-mail ID of Guardian			
Relationship of Guardian with Nominee			
Guardian Identification details: (Please tick any one of following and provide details of same) <input type="checkbox"/> Photograph & Signature	Photograph of 1 st Guardian	Photograph of 2 nd Guardian	Photograph of 3 rd Guardian
Signature of Guardian across photograph	Sign ✍	Sign ✍	Sign ✍
PAN			
Aadhar			
Saving Bank Account			
Proof of Identity			
Demat Account ID			

Note: Two witnesses shall attest signature(s) / Thumb Impression(s). Details of the Witness

	First Witness	Second Witness
Name of witness		
Address of witness		
Signature of witness 	Sign ✍	Sign ✍

Notes: 1. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non-individuals including society, trust, body corporate and partnership firm, Karta of HUF, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.

2. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.

3. The Nominee(s) shall not be a trust, society, body corporate, partnership firm, Karta of HUF or a POA holder. A non-resident Indian can be a Nominee, subject to the exchange/depository controls in force, from time to time.

4. Transfer of securities in favor of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.


5. Nomination can be made up-to three nominees in a demat account, in case of multiple nominees, the Client specify the percentage of share for each nominee that shall total up-to hundred percent, in the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.

6. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favor of the Nominee(s).

7. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominee as mentioned at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.

DECLARATION

I/We acknowledge the receipt of copy of document, "Right and Obligations of the Beneficial Owner and Depository Participant". The rules and regulations of the Depository and Depository Participants pertaining to an account 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.

Sole / First Holder / Guardian (in case of Minor)	Second Holder	Third Holder
Name		
Signature 	Sign ✍	Sign ✍

**FIPL****KYC-Application Form(For Non-Individuals Only)**

Please fill in ENGLISH and BLOCK LETTERS with black ink

KYC Number of Applicant: _____

A. IDENTITY DETAIL

1.	Name Of the Applicant											
2.	Date of Incorporation				Place of Incorporation							
3.	Business Commencement Date				Registration No.(eg. CIN)							
4.	PAN No.				Please enclosed a duly attested copy of your PAN Card							
5.	Status (Please Tick any one)		<input type="checkbox"/> Private Ltd. Co.		<input type="checkbox"/> HUF		<input type="checkbox"/> AOP		<input type="checkbox"/> FI			
			<input type="checkbox"/> Public Ltd. Co.		<input type="checkbox"/> Trust/Charities/NGOs		<input type="checkbox"/> Bank					
			<input type="checkbox"/> Body Corporate		<input type="checkbox"/> Defence establishment		<input type="checkbox"/> Government Body					
			<input type="checkbox"/> Partnership		<input type="checkbox"/> FII		<input type="checkbox"/> Non-Government Organisation					
			<input type="checkbox"/> LLP		<input type="checkbox"/> Society		<input type="checkbox"/> Others					

PHOTOGRAPH
Please affix your recent passport size photograph and sign

B. ADDRESS DETAILS

1.	Correspondence Address											
			City/Town/Village		Pin Code							
			State		Country							
2.	Correspondence Address Submitted											
3.	Contact details		Telephone(Office)			Telephone(Res.)						
			Mobile No.			Fax. No.						
			Email ID									
4.	Registered Address (if differ from above)											
			City/Town/Village		Pin Code							
			State		Country							
5.	Proof of address to be provided by Applicant, Please submit ANY One of the following valid documents & Tick () against the document attached.		<input type="checkbox"/> Latest Telephone Bill(only Land Line) <input type="checkbox"/> Latest Electricity Bill <input type="checkbox"/> Latest Bank Account Statement <input type="checkbox"/> Registered Lease / Sale Agreement of Office Premises <input type="checkbox"/> Any Other proof of address document (as listed overleaf)									

C. OTHER DETAILS

1.	Name, PAN, residential address and photographs of Promoters/Partners/Karta/Trustees and whole time directors: _____ (Please use the Annexure to fill in the details)	
2.	a) DIN of whole time directors: _____	
	b) Aadhaar number of Promoters/Partners/Karta: _____	

DECLARATION

I/We 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.

Place :	Name & Signatures(s) of Authorised Person(s)	Sign
Date : __/__/__		

FOR OFFICE USE ONLY

<input type="checkbox"/> (Original Verified)Self Certified Documents Copies Received	IPV Done <input type="checkbox"/> or <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> (Attested) True copies of Documents Received	Name: _____
	Designation: _____ Seal/Stamp of the Intermediary

**FIIP****Name, Pan, Residential Address and Photographs of Promoters/Karta/Trustees and whole time Directors/Other Directors:**

1. Name		Pan No.		Photographs of Promoters/Partners/Karta /Trustees / Wholetime/Other Directors & authorized signatories
Date of Birth		Status		
Residential Address				
DIN		UID		

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Wholetime/Other Directors:
 Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not a Politically Exposed Person (PEP)
 Not Related to a Politically Exposed Person (PEP)

2. Name		Pan No.		Photographs of Promoters/Partners/Karta /Trustees / Whole time/Other Directors & authorized signatories
Date of Birth		Status		
Residential Address				
DIN		UID		

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Whole time/Other Directors:
 Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not a Politically Exposed Person (PEP)
 Not Related to a Politically Exposed Person (PEP)

3. Name		Pan No.		Photographs of Promoters/Partners/Karta /Trustees / Whole time/Other Directors & authorized signatories
Date of Birth		Status		
Residential Address				
DIN		UID		

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Whole time/Other Directors:
 Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not a Politically Exposed Person (PEP)
 Not Related to a Politically Exposed Person (PEP)

4. Name		Pan No.		Photographs of Promoters/Partners/Karta /Trustees / Whole time/Other Directors & authorized signatories
Date of Birth		Status		
Residential Address				
DIN		UID		

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Whole time/Other Directors:
 Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not a Politically Exposed Person (PEP)
 Not Related to a Politically Exposed Person (PEP)

5. Name		Pan No.		Photographs of Promoters/Partners/Karta /Trustees / Whole time/Other Directors & authorized signatories
Date of Birth		Status		
Residential Address				
DIN		UID		

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/Whole time/Other Directors:
 Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not a Politically Exposed Person (PEP)
 Not Related to a Politically Exposed Person (PEP)

Place :	Name & Signatures(s) of Authorised Person(s)	Sign
Date : _/_/___		



FIPL PART II – ACCOUNT OPENING FORM (FOR NON- INDIVIDUALS) DP ID:12039800

DP ID	CLIENT ID	Date
-------	-----------	------

I/We request you to open a depository in my/our name as per following details:
(Please fill all the details in CAPITAL/BLOCK LETTERS only)

A. TYPE OF ACCOUNT (Please tick whichever is applicable)

<input type="checkbox"/> Body Corporate	<input type="checkbox"/> FI	<input type="checkbox"/> FII	<input type="checkbox"/> Mutual Fund	<input type="checkbox"/> Qualified Foreign Investor
<input type="checkbox"/> Trust	<input type="checkbox"/> Bank	<input type="checkbox"/> CM	<input type="checkbox"/> Others(Specify).....	

B.DETAILS OF ACCONT HOLDER (S)

Account Holder(s)	Sole/First Holder	Second Holder	Third Holder
Name			
PAN			
Date of Incorporation			

C. 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 Person of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned below:

NAME	PAN
------	-----

D. In Case of FIIs/Others (as may be applicable)

RBI Approval Reference Number	RBI Approval Date
SEBI Registration Number (For FIIs)	

E. STANDING INSTRUCTIIONS

1.	We authorize you to receive credits automatically in to our account	<input type="checkbox"/> YES <input type="checkbox"/> NO
2.	Receive Annual Reports, AGM, notices and other communication from Issuer & RTA in Physical Form	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.	Account to be operated through Power of Attorney (POA)	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.	SMS Alert Facility:	<input type="checkbox"/> YES <input type="checkbox"/> NO
	Sr.No. Holder	<input type="checkbox"/> YES <input type="checkbox"/> NO
	1. Sole / First Holder	<input type="checkbox"/> YES <input type="checkbox"/> NO
	2. Second Holder	<input type="checkbox"/> YES <input type="checkbox"/> NO
	3. Third Holder	<input type="checkbox"/> YES <input type="checkbox"/> NO
5.	Mode of Operation for Sole/ First Holder (In case of joint holding, all the holders must sigh)	

Any One singly Jointly by As per resolution Other (Please Specify).....

6.	Account Statement Requirement	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly (Default option is monthly)
7.	I/We request you to send Electronic Transaction-cum-Holding Statement at Sole / First Holders Email ID stated in the Account Opening Form or at _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Do you wish to receive dividend / interest directly in to your bank account through ECS ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	I would like to share the email ID with RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.	I would like to instruct the DP to accept all the pledge instruction in my account without and other further instruction from my end (If not marked, the default option would be “No”)	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.	Easi <input type="checkbox"/> Yes if yes, please contact your DP for details (Facility through CDSL,s website: www.cdslindia.com wherein a BO can view his ISIN balances, transactions and value of the portfolio online.)	<input type="checkbox"/> No

DECLARATIION

I/We acknowledge the receipt of copy of document, “Right and Obligations of the Beneficial Owner and Depository Participant”. The rules and regulations of the Depository and Depository Participants pertaining to an account 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.

Authorised Signatories (Enclose a Board Resolution for Authorised Signatories)

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature	Sign	Sign	Sign

**FIPL****Clearing Member details (to be filled by clearing members only-non-individual DEMAT Account)**

1.Name of Stock Exchange		2.Name of Clg.Corporn./Clg. House	
3.Clearing Member Id		4. SEBI Regn. No.	
5.Trade Name			
6.CM-BP ID (To be filled by DP)		7.TM ID (To be filled by DP)	

TRADING AND DEMAT ACCOUNT RELATED DETAILS For Both Individual & Non-Individual**A. BANK ACCOUNT (S) DETAILS****I. PRIMARY BANK ACCOUNT DETAILS FOR TRADING & DEMAT ACCOUNT (MANDATORY)**

Bank Name	Branch Address	Bank Account No.	Account Type: Saving / Current / Others In case of NRI/NRE/NRO
MICR No.		ISFC Code	

II. SECONDARY BANK ACCOUNT DETAILS FOR TRADING

Bank Name	Branch Address	Bank Account No.	Account Type: Saving / Current / Others In case of NRI/NRE/NRO
MICR No.		ISFC Code	

B. DEPOSITORY ACCOUNT DETAILS

Depository Participant Name			
Depository Name	CDSL	NSDL	DP ID
Beneficiary name		BO ID	

C. TRADING PREFERENCE (For Trading Account)

Please Sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off.

	NSE	BSE	NSE Mutual Fund
Cash Market	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Futures & Options	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BSE Mutual Fund
Currency Derivatives	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>


If, in future, the client wants to trade on any new segment / new exchange, separate authorization/ letter should be taken from the client by the stock broker.

D. ADDITIONAL DETAILS

Whether you wish to receive physical contract note or ECN (please specify)	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic
Specify your Email Id, if applicable	
Whether you wish to avail of the facility of Internet trading/ Wireless technology (please specify)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of years of Investment/Trading Experience	<input type="radio"/> No prior experience _____ Year dealing in securities _____ Years in Derivatives _____ Year in any other investment related field
In case of non- individuals, name, Designation, PAN,UID, signature, Residential address & photograph of Persons authorized to deal in securities on behalf of company/ firm /others	



E. OTHER DETAILS

Gross Annual Income Details: Income range per annum Below Rs.1 Lac Rs.1 Lac to 5 Lac
(Please tick ) Rs.5 Lac to 10 Lac Rs.10 Lac to 25 Lac Rs.25 Lac to 1 Crore > 1 Crore

Net Worth (Net worth should not be older than 1 year) **Amount Rs.**

Is the entity involved/providing any of the following services	<input type="checkbox"/> YES <input type="checkbox"/> NO
For Foreign Exchange/Money Changer Services	<input type="checkbox"/> YES <input type="checkbox"/> NO
Gaming/Gambling/Lottery Services (e.g. casinos, betting syndicated)	<input type="checkbox"/> YES <input type="checkbox"/> NO
Money Lending / Pawning	<input type="checkbox"/> YES <input type="checkbox"/> NO

Please tick, if Applicable (Note: In case of Non-individuals please tick, if applicable for any of your authorized signatories/ Promoters/Partners/Karta/Trustees/Whole time directors):

Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)

Any Other information:

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 three years): _____

G. DEALINGS THROUGH SUB BROKERS AND OTHER STOCK BROKERS

If client is dealing through the Sub broker provide the following details:

Name of the Sub Broker : _____	Address: _____
SEBI Registration No. : _____	_____

Whether dealing with any other Stock Broker / Sub broker (if case dealing with multiple stock broker, provide details of all)

Name of the Stock Broker : _____ Name of the Sub Broker, if any: _____
Client Code : _____ Exchange Name _____
Details of disputes/dues pending from/to such stock broker/sub broker : _____

DECLARATION

- I/We hereby declare that the details furnished above are true and correct to the best of my / our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
- I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
- I/We further confirm having read and understood the contents of the 'Rights & Obligations' document(s)/ *Policy and Procedures*, *tariff sheet and all the non-mandatory documents* . I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for information on stock broker's designated website, if any.

FOR OFFICE USE ONLY

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

Signature of the Client/ (all) Authorised Signatory (ies):



Seal/Stamp of the stock broker

SEHEDULE OF BROKERAGE AND OTHER CHARGES

Brokerage Slab	CASH SEGMENT		F&O & CDS SEGMENT	
	Percentage	Minimum	Percentage	Minimum
Delivery /Carry Forward				
Intraday/Square Off				
Trade for Trade and Z group scrip/Others Segment				
Options Segment	NA	NA		
Mutual Fund			N.A.	N.A.

Important Note: in case of Physical Contact note or other related documents being dispatched to client, a difference of Rs.15/- in total brokerage booked on a particular contract would be charged toward minimum processing fee. Delay payment charges @2% per month would be charged for debit/shortage in pay-in/margin default, as per exchange requirements. Depository/Pledge charges for the movement of shares between pool/beneficiary/margin accounts for pay-in/payout or margin purpose will be charged. Transaction charges/Clearing Charges/other statutory charges / courier / administration/processing charges will be charged as applicable. Handling charges for issue of account statement, copy of contract note etc. will be charged as applicable.




DEPOSITORY CHARGES

Account Maintenance	1. One Year Rs.300/- (For First Quarter remaining Three Quarter FREE)
	2. Five Year Rs.900/- (For First Quarter remaining Nineteen Quarter FREE)
	3. Life Time Rs.1800/-
	4. Non-Individual Rs.900/- Per year (Applied F.Y. Basis)
Dematerialisation Charges	Rs.50/- Per Request
Rematerialisation Charges	Rs.50/- Per Request
Transaction (Debit)	POA On Market Rs.13/- Per Trade POA Off Market Rs.16/- Per Trade Non-POA All Trade Rs.26/- Per Trade Outside FIPL Rs.26/- Per Trade
Pledge Creation	Rs.25/- Per Trade
Pledge Closer	Rs.25/- Per Trade
Other Charge	Demat Rejection/Modification Rs.40/- per instance (Including Courier Charge).
Remarks	1. GST @18% will be charge on above mention DP charges. 2. On customer request or to fulfil regulatory compliances if we need to dispatch physical documents, courier charge of Rs.25/- will be charged. 3. Maintenance & KRA charges will be charged in advance at the time of opening the account

Note:

- Stamp Duty, Security Transaction Tax (STT), Transaction charges and other taxes & levies will be charged as per prevailing rates.
- All customers will get Digital Contact Notes, Physical Contact Notes on request.
- Charges/Service standards are subject to revision at sole discretion of FIPL and as informed by circulars sent by ordinary post/E-Mail.
- The penalty and charges shall be as per rates of FIPL. The above brokerage and charges are subject to change without prior notice.
- Rs.25/- will be charged to client in case of New Delivery Instruction Booklet is requested without requisition slip.
- Modification in client details, Rs.40/- per instance. (Except Mobile No. & E-mail ID)
- In case of non-payment of DP bill/dues within 30 days of due date, interest shall be charged up-to@2% per month on the outstanding dues.

I/We have understood and accepted the Schedule of charges as stated here in above:

	Sole/First Holder	Second Holder	Third holder
Signature →			

**Definitions:**

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

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
2. 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. 'BO' means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.
5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
6. The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.

7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed with out proper authorization, the BO should immediately inform the DP in writing.

Fees:

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

Disclaimer:

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

Liability and Indemnity:

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

Amendments:

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

Governing Law and Jurisdiction:

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

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below.

I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.

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

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

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

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

BOID	1	2	0	3	9	8	0	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).

	Sole/First Holder	Second holder	Third Holder
Name			
Signature			

Place: _____ Date: __/__/__



ANNEXURE-B TERMS & CONDITIONS FOR ACAILING TRANSACTION USING SERURED TEXTING (TRUST) SERVICE OFFERED BY CDSL

1. Definitions:

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

i. "Depository" means Central Depository Services (India) Limited (CDSL)

ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.

iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.

"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.

- 1 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
- 2 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.
- 3 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.
- 4 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.
- 5 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.
- 6 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.
- 7 The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.

- 9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP .
- 10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.
- 11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
- 12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP.
- 13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
- 14. The BO expressly authorised Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
- 15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
- 16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.
- 17. Indemnity:

In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

18. Disclaimer: Depository shall be absolved of any liability in case :-

- a. There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
- b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such service provider.
- c. There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.

Dear Sir/Madam, I/We wish to avail the following facility/ies provided by the depository on my/our mobile number as provided below subject to the terms and conditions as specified by CDSL.

- a. SMART -SMS alert facility
 - b. TRUST -Transaction using Secured Texting facility. (please note that SMS alert facility is mandatory if TRUST facility is opted for)
- (Please write your 8 digit DPID) (Please write your 8 digit Client ID)

BO ID	1	2	0	3	9	8	0	0	CLIENT ID									
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Sole / First Holder's Name : _____ Second Holder's Name _____

Third Holder's Name _____

(Please write only the mobile number without prefixing country code or zero) (Existing users registered for SMS alerts : Please note that if the mobile number for TRUST is different than the registered mobile number for SMS alert, the new mobile number will be updated for SMS alert also.) The mobile number is registered in the Name of : _____ Email ID : _____

(Please write only ONE valid email ID on which communications; if any, is to be sent) 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 purpose of availing the said facility.

I/We have read and understood the terms and conditions prescribed by CDSL for the said facility/ies 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.

Mobile No. on which message are to be Sent: _____

Signatures:



FIIPL

RUNNING ACCOUNT AUTHORISATION

To,

Fair Intermediate Investment Pvt. Ltd.

2nd Floor Shukla Palace,
Sapru Marg, Luck now 226 001

I/We confirm that I/We am/are desirous of regularly dealing in CM, F&O and CDS segments of the stock exchange(s). I/We request you to maintain the account for funds, with you on a running account basis. I/We also request you to consider the balances in my/our running funds account for the purpose of margins/any other of my/our obligations due to you. I/We understand and agree that no interest will be payable to me/us on the amounts so retained by you.

I/We agree and empower/authorize you

- a) to act in your discretion of merging balances kept under various accounts held with you, such as CDSL DP Account, CM Trading Account, F&O Trading Account, Currency Trading Account, Online IPO / MF Account and MFSS etc., to nullify the debit in any of my/our other account held with you without taking any further instructions from me/us;
- b) to debit my/our trading account towards depository charges payable by me/us to the designated depository participant and make onward payment to the designated depository participant upon receipt of intimation from the designated depository participant;
- c) I/We have the liberty to revoke this authorization at any time in writing with prospective effect.

While settling the account you will be sending me/us a 'statement of account', containing an extract from the client ledger for funds and an extract from the register of stocks displaying all receipts/deliveries of funds/stocks. The statement shall also explain the retention of funds/stocks. Such periodic settlement of the running account shall not be necessary when (a) I start availing margin trading facility as per SEBI circulars; or (b) The margin provided by me to you is in the form of Bank Guarantee (BG)/Fixed Deposit Receipt (FDRs).

On actual settlement date you may retain the requisite stocks/funds towards any outstanding obligation and may also retain additional margin requirement on the day of settlement to take care of my margin obligation arising in the next 5 trading days, calculated in the manner specified by respective Exchanges.

I will bring any discrepancy or dispute arising from the Statement of account so issued by you or the settlement made by you to your notice preferably within 7 working days from the date of receipt of funds / stocks or statement as the case may be at your registered office.

I/We understand that, unless otherwise required to meet my obligations for margin or on settlement you shall transfer the funds/stocks lying with you in credit of my/our account within one working day and those lying with the Clearing Member or Clearing Corporation within three working days of my request for transfer.

My/Our preference for actual settlement of funds and stocks is at least:

- Once in every calendar Quarter or Once in a calendar Month

I/We further authorize you to retain an amount of up to Rs.10,000/- (net amount across segment and across stock exchanges) in order to avoid administrative/operational difficulties in settling my/our account. The same can be release on my/our specific request.

Please score out whatever not accepted/ not agreed with.

Thanking you
Yours faithfully

Client Name : _____

Sign here: 😊 _____

Client Code : _____

Date: _____



FIIPL DISCLOSURE OF PROPRIETARY TRADING BY BROKER TO CLIENT

To,
FAIR INTERMEDIARIE INVESTMENT PVT. LTD
2nd Floor Shukla Palace,
Sapru Marg, Lucknow 226 001

Date: __/__/____

Dear Client,

With reference to the SEBI Circular No. SEBI/MRD/SE/Cir-42/2003 dated Nov. 19, 2003 intended to increase the transparency in the dealing between the trading member and their clients, all trading members are required to disclose to its/their clients whether they do client based business or proprietary as well. Pursuant to the above, we wish to inform you that Fair Intermediate Investment Pvt. Ltd. at present does trade/does not trade on proprietary account in the cash and Derivatives segment at NSE & BSE.

Ihaving client codewith Fair Intermediate Investment Pvt. Ltd. Acknowledge receipt and understanding of the above.

Client Name		Sign.	
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VERBAL ORDER ACCEPTANCE AUTHORISATION

I/We am dealing with you as client at NSE/BSE in Capital, Derivative & Currency Derivative Segment. At my/our broker i.e. agent I/We direct and authroze you to carry out trading / dealing on my/our behalf as per instruction given below.

I/We agree and acknowledge that it is advised by you that I/We should give instruction for order placement / modification and cancellation in writing and to avoid disputes, I/We should give instruction in exactly the format in duplicate (carbon copy/photocopy only) and take signature of at least two authorized officers at the branch along with company stamp on the carbon copy/photocopy of the instructions in acknowledgment of receipt of my our instructions.

However as I/We shall be dealing by ordering over phone and even if we visit the branch, the fluctuations in market are so rapid the it is not practical to give written instructions for order placement / modification and cancellation, I/We hereby authorize you to accept my/our authorized representative's verbal instructions for order placement/modification and cancellation in person or over phone (fixed line/mobile phone) and execute the same.

I/We understand the risk associated with verbal order and accept the same, and agree that I/We shall not be entitled to disown order s and consequent trades (if any) by shifting the burden of proof by asking you to prove the placement/modification and cancellation or orders through telephone recording or otherwise.

I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying our my/our directions given above.

Client Name		Sign.	
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To,
FAIR INTERMEDIATE INVESTMENT PVT. LTD.
2ND Floor Shukla Palace
Sapru Marg, Lucknow 226 001.

Sub: Authority to trade on my / our behalf.

Dear Sir,

I/we am/are the holder of the a trading account bearing number (hereinafter referred to as the **“Account”**) opened and maintained with you and wish to appoint/ nominate (hereinafter referred to as the **“Representative”**), s/d of....., aged about.....years, presently residing at..... to perform all or any of the following acts, deeds and things, for and on my/our behalf and in my/our interest.


- 1 To operate the Account on my/our behalf.
- 2 To issue necessary instructions to you, for purchase, sale or transfer of shares and Securities from or to the Account as per Representative own judgment, and to sign necessary documents, wherever required effectuating such instructions of purchase, sale or transfer of securities from or to the Account.
- 3 To make or cause to make payments to FAIR INTERMEDIATE INVESTMENT PVT. LTD. whenever necessary, and in accordance with my/our obligations in accordance with the terms and conditions of various agreements executed between me/us and FIIPL.
- 4 To duly honors all my/our contractual obligations under various agreements executed between me/us and FIIPL. Including but not limited to the **“Member Constituent Agreement”** and/or any other undertaking, commitment issued by my/us in favor of FIIPL.
- 5 To accept and give valid discharges for acceptance and submission of contract notes, bills, ledger statements, transaction statements and all correspondence on my behalf and report any discrepancy therein to FIIPL.
- 6 To receive & accept necessary telephonic calls pertaining to margin &/or trade confirmation or any other call including verification call from FIIPL. at designated mobile no. & undertake to update this contact detail in writing with FIIPL. in the event of any such change, taking place at any time in future.
- 7 To sincerely abide by the Statutes, Rules, Regulations and Guidelines prescribed for the purpose and in relation to the operation of the Account.

- A. I/we hereby agree and undertake that all such acts, deeds and things done by the Representative shall be deemed to be binding upon me/us as the same has been done by me/us only and I/we shall hereby ratify all and such acts, deeds, or things done by Representative in any manner whatsoever in discharge of the duties conferred upon him/her under the present instrument.
- B. I/we hereby agree and undertake to indemnify and keep FIIPL. including its directors, officers and employees indemnified against any loss, claims, liabilities, obligations, damages, deficiencies, actions, suits, or proceedings aroused / accrued or caused to the FIIPL. for any wrong act, deed or thing done by the Representative in any manner whatsoever in exercise of the powers conferred upon him.
- C. I/we further undertake and agree not to challenge any act, deed or things done by said Representative in any manner.
- D. I/we hereby agree and acknowledge that this letter of Authority shall be effective and operational until FIIPL. received and acknowledged revocation letter at its registered office.

Client Name : _____

Client Code : _____

Date : _____

Client Sign.  _____

**FIPL****PLEASE GO THROUGH THE FOLLOWING TERMS AND CONDITIONS AND SIGN AS REQUIRED**

To,
FAIR INTERMEDIATE INVESTMENT PVT.LTD.
 2ND Floor, Shukla Palace,
 Sapru Marg, Lucknow - 226 001

Date: ___/___/___

1. Authorization to Debit Demat Charges:- I/We have a Trading as well as depository relationship with Fair Intermediate Investment Pvt. Ltd. Please debit the charges relevant with depository services from my trading account on monthly basis. I also agree to maintain the adequate balance in my trading account / pay adequate advance fee for the said reason.

Yes No

Client Sign. _____

2. Authorization for Fund / Security Transfer & Maintaining the Margin:- I am operating running accounts with you in Capital market segment and F & O segments of NSE/BSE & Currency segment of NSE/MSEI, since I trade on continuous basis with you, various obligations may arise towards funds pay in, margin obligations and mark to market profit/loss. I hereby authorize FIPL to effect transfer from my Account credits balance & securities from Capital market Segment of NSE to BSE as well as to derivatives Segment of both the exchange and vice versa to meet the settlement obligations and margin requirements in my Account as and when required. Further, I hereby authorize FIPL to retain Credit balance or securities of any segment or exchange for intended future purchase by me. I would also request you to release credit balance in my account on receipt of specific instruction in writing from me. Also you may take as standing instruction to adjust my credit balance with the debit balance, if any, in my account in other segment or Exchange as and when required.

I would request you to hold back our purchased delivery in the unlikely event of continuing Debit in my account/margin requirement. I would also request you to retain my payout if any, beyond 48 hours to be adjusted against future debits unless otherwise specified in writing by me. I also hereby give the express consent to pledge my securities with NSE/BSE/NSCCL/MSEI BANK(S) or any other institution as need be for fulfilling margin requirement in my account.

In specific cases, I would also instruct you either in writing or orally to hold back our purchased deliveries in your Pool account for our intended sale.

Hope this above arrangement is convenient to both of us for our operational efficiency.

Yes No

Client Sign. _____

3. Authorization for Transfer of Securities from Margin Account to Pool Account:- This is with reference our trading account no, opened with you, for the Purposes of dealing in CM and F&O segments of securities on the Stock Exchanges. With reference to the same I/We confirm that I/We am/are desirous of regularly dealing in CM and F&O segments of NSE/BSE .During the normal course of trading, I shall be required to deliver the securities (Equity shares & Other Securities in margin to the credit of your beneficiary account.

You will appreciate that there is shortage of time between releasing and transfer of securities to my account and from there to your pool account, against my/our sale in Capital Market Segment.

So I/We request you to kindly Deliver/adjust securities, deposited with you in Margin account with you, against me/our Sale in Capital Market segment directly to your Pool account for Pay-in of securities to NSE/BSE on my/our behalf.

Yes No

Client Sign. _____

4. Authorisation for Sale of Securities in case of Default:- I/We hereby agree that if I/We fail to make payment of consideration to you in respect of any one or more securities purchased by me/us before the pay-in date notified by the exchange from time to time, you shall be at liberty to sell the securities received in pay-out, in proportion to the amount not received, after taking into account any amount lying to my/our credit, by selling equivalent securities at any time on the Exchange. I/We shall be liable for any loss arising to you on this account, till the date of sale out of securities by you in my account. I/We further agree that if I/We fail to deliver any one or more securities to your pool account in respect of the securities sold by me/us before the pay-in date notified by the exchange from time to time, such undercharged obligation in relation to delivering any one or more securities shall be deemed to have been closed out at the auction price or close out price, as may be debited to you in respect to the security for the respective settlement, to the extent traceable to me/us on my/our failure to deliver, otherwise the close out price on the date of pay-out in respect of the relevant securities, declared by the Exchange I/We further agree that the loss, if any, on account of the close out shall be to my/our account. I/We further agree that if for any reason, schedule of pay-in and pay-out is modified the aforesaid shall be made applicable reckoning the actual date of pay-in and pay-out, as the case may be.

Yes No

Client Sign. _____

Contd.....



5. Others Terms & Conditions:-

* I purchase and sales with speculative intention that is no going to result into delivery must be compulsorily squared-up before the close of market you must square up all such position at least fifteen minutes before the market closes. Any failure on your part to do so shall beat your own risk and you shall be ready to give/take deliveries and funds accordingly.

*FIPL shall not be responsible for any un-executed orders. All On-line best-Market orders should NOT to be presumed as executed unless confirmed as trade by our dealer.

*You must strictly adhere to margin norms of the BSE/NSE/F&O. Any failure on your part in timely payment of margins shall be viewed seriously and we may not allow any further position/exposure on your account, besides squaring up your existing position. Moreover, FIPL shall have the right to charge penalty up-to @2% p.m. of the margin amount in default in case there is any delay In payment of the same. Further, we may demand additional margins depending on the speculative nature of the script and market conditions in general or as applied by the respective stock exchanges. These margins would be payable as and when asked for.

*Delivery of securities will not be released unless the debit balance (if any) in your account is cleared. In case FIPL does not receive funds within 3 days from the date of purchase FIPL shall have the right to sell the shares without any further intimation to the client. The cost and consequence i.e. Demat charges will be debited for holding these shares in our DP Alc shall be borne by the client & this shall be without prejudice to our right to take any other necessary actions to recover our dues Any loss subsequent to such squaring off of the position shall be borne by the client and FIPL will not be liable for it.

*It would be presumed that the securities sold through FIPL in clients accounts are being held by the client / constituent as their legal/ beneficial owner. The client shall take the full responsibility for any dispute regarding the title of securities sold through, FIPL.

*In case you buy in one exchange and sell in another Exchange, the delivery/payment mechanism of the respective exchanged against your sale in other Exchange will not be able to take place. Any such consequences of auctions/ penalties will be levied on the client.

*FIPL will accept the Demat deliveries sold by you only from B.O. A/c mentioned in K Y.C. form till 24hours before the scheduled Pay-In day. All pending deliveries, which are not delivered, will result in auction In case of any such short sale, the client have to pay the difference between the contract price and the auction price in addition to the penalty imposed by the exchange and FIPL. Demat charges will be debited, if not paid up front incase client has Demal A/c with our DP and DP charges transaction charges will be charge up front.

*The amount of security deposit kept with FIPL will always be interest free and FIPL shall have the right to adjust the same against any outstanding dues in clients account or against the dues in its associated accounts

*All future notifications and rulings of Exchange and SEBI from time to time shall be presumed to be incorporated in this document from the date of implementation.


*In the matters where the Exchange is a party to the dispute, the Civil Courts at Mumbai shall have exclusive jurisdiction and in all other matters, Civil Courts nearest to the Regional Arbitration Centre where arbitration proceedings or appellate arbitration proceedings were conducted shall have exclusive jurisdiction.

*The client shall keep himself/herself/itself updated regarding the changes in the rules, regulations, bye- Laws of stock exchanges and guidelines issued by SEBI issued from time to time.

*The client shall keep himself updated with the information updated by Exchange through various means which includes information posted on website.

*Release of shares kept as margin shall be informed 48 hours prior to Pay-In date. The release request should be made in writing or should be sent through email to concerned department of FIPL failing which FIPL will not be liable for paying shortages.

I/we have read and understand the terms and conditions as mentioned above and agree to abide by them and any amendments thereto made by the stock exchanges from time to time.

Client Code		Client Name	
Date		Signature 	


FIPL
LETTER OF AUTHORISATION-NSE/BSE

To,
FAIR INTERMEDIATE INVESTMENT PVT.LTD.
 2ND Floor, Shukla Palace,
 Sapru Marg, Lucknow - 226 001

Dated: _____

Dear Sir,

I/We are dealing In securities with you at NSE/BSE Cash , Derivative Segment and Currency Segment of NSE/BSE, in order to facilitate ease of operations. We authorize you as under:

- A.** I/We authorize you to set off outstanding in any of 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 or in any other exchanges and/or against the value of cash margin or collateral shares provided to you by us
- B.** I/We hereby authorize you not to provide me Order Confirmation/Modification I Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. We shall get the required details from contract notes issued by you.
- C.** I/We hereby authorize you to keep all the securities which we give you in margin including the payout of securities received. to use the securities for meeting margin / other obligation In stock exchange In whatever manner which may include pledging of shares In favor of bank and / or taking loan against the same of meeting margin / pay-in obligation on our behalf or for giving the same as margin to the Stock- Exchange or otherwise.
- D.** I/We request you to retain credit balance in any of our account and to use the idle funds towards our margin/future obligations at both the exchanges unless I instruct you otherwise. I also authorize you to debit the necessary demat charged from time to time, for keeping the shares in your client demat beneficiary account on my behalf. I also authorize you to debit the financial charges up to @ 2% p.m. for the debit balances if any, in my account and not settled as per the exchange requirements.
- E.** I/We request you to consider 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 am getting required details from contracts issued by you.
- F.** Trading of NSE is in Electronic Mode, based on VSAT, leased line, ISDN. Modem and VPN, combination of technologies and computer systems to place and route orders We understand that there exists a possibility of communication failure or system problems or slow or delayed response from system or trading halt, of any such other problem/glitch whereby not being able to establish access to the trading system / network. which may be beyond your control and may result in delay in processing or not processing buy or sell Orders either in part or in full. We agree that we shall be fully liable and responsible for any such problems / glitch.
- G.** I/We confirm that we will never sublet the trading terminal on any term of connectivity from my place to any other place without your prior approval.
- H.** I/We request you to retain securities in your Demat account for our margin/future obligations at both the Exchanges, unless I/We instruct you to transfer the same to my account.

 Yes

 No

 Client Sign.  _____


FIIPL AUTHORISATION OF CONTRACT NOTES AND OTHER DOCUMENTS IN DIGITAL MODE

To,
FAIR INTERMEDIATE INVESTMENT PVT. LTD.
 2ND Floor Shukla Palace
 Sapru Marg, Lucknow 226 001

Date: ___/___/_____

Sir,
 I/We hereby consent to receive from Fair Intermediate Investment Pvt. Ltd. The digital contract notes, bills, ledgers, transaction statements, demat statement of accounts/ holding statement(s)/bills/ other statements, notices, circulars, amendments and such other correspondence documents, records by whatever name called in electronic form duly authenticated by means of a digital signature as specified in the information Technology Act 2000 and the rules made there under to my below mentioned email id (said email ID).

E-mail Id. _____

I/We further hereby agree that the Fair Intermediate Investment Pvt. Ltd. shall fulfill the legal obligation, if the above documents are sent electronically to the said e-mail id. In this regard, I/We further confirm and agree that:

1. The above is my/our personal E-mail id. I/We shall take all necessary steps to ensure confidentiality and the secrecy of the login and password of the above mentioned e-mail account. FIIPL shall not be liable to or responsible for any breach of secrecy. I/We will be solely responsible for the security of the information provided on my/our aforesaid e-mail id.
2. E-mails sent to any of the above mentioned e-mail account, which have not bounce back, shall be deemed to be duly delivered to me/us.
3. In the event any e-mail sent by FIIPL bounce back due to insufficient space in my/our inbox or in the event any network problem occurs, FIIPL shall in no way be responsible for the same.
4. FIIPL shall not take cognizance of out-of-office/our of station auto replies and I/We shall be deemed to have received electronic mails.
5. Such Statements shall be deemed to have been delivered on the day when the e-mail is sent by FIIPL.
6. FIIPL may at its discretion discontinue to send me/us the Statements in physical form.
7. FIIPL shall not be liable or responsible for any Statement received from frauds or impostors or any consequences thereof.
8. FIIPL shall not be liable for any problem, which arises at my/our computer network because of my/our receiving any Statement from FIIPL.
9. I/We shall inform FIIPL by way of a letter in writing duly signed by me or inform through internet platform if there is any change in the E-mail given above.
10. I/We undertake to check the Statement and bring the discrepancies to your notice within the time period as specified under the relevant agreements entered in to with FIIPL. My/Our non-verification or not accessing the Statement on regular basis shall not be a reason for disputing the same at any time.
 Whenever I/We want to discontinue the said facilities, I/We shall inform to FIIPL immediately in writing in prescribed format.

I/We further agree that FIIPL will not be responsible for non-receipt of documents sent via electronic delivery due to change in/incorrect e-mail address/ correspondence address as mentioned or any other reason which inter alia include technical reasons or malfunction of my/our computer system/ server / internet connection etc. Further I/We agree and undertake to indemnify FIIPL and its group companies, that they will not be held liable/ responsible for any losses, claims damages, cost and liabilities etc. caused to me/us due to misuse of this information or pursuant to any litigation cases, complaints, actions, etc. that may arise in future on account of my/our above authorization request.

I/We further agree that in case of non-received of any mail/bounced mail FIIPL may at its sole discretion provide such Contract notes & Statements in physical form.

Name of Client		Trading Code	
Sign.		Demat ID	


FIIPL

FIT AND PROPER PERSON DECLARATION

As per Regulation 19(I) of Securities Contracts (Regulation) (Stock Exchange and Clearing Corporations) Regulations, 2012 (SECC Regulations) which states that no person shall, directly or indirectly, acquire or hold equity share of a recognized Stock Exchange or recognized Clearing Corporation unless he is a fit and proper person in terms of Regulation 19 and 20 of the said SECC Regulations.

Regulation 19 and Regulation 20 as prescribed by SEBI (herein referred as "Board") are reproduced below:

Eligibility for acquiring or holding shares.

- 19 (1) No person shall, directly or indirectly, acquire or hold equity shares of a recognized stock exchange or recognized clearing corporation unless he is a fit and proper person.
- (2) Any person who, directly or indirectly, either individually or together with persons acting in concert, acquire equity shares such that his shareholding exceeds two percent of the paid up equity share capital of a recognised stock exchange or recognized clearing corporation shall seek approval of the Board within fifteen days of the acquisition.
- (3) A person eligible to acquire or hold more than five percent of the paid up equity share capital under sub-regulation (2) of regulation 17 and sub-regulation (2) of regulation 18 may acquire or hold more than five percent of the paid up capital equity share capital of a recognized exchange or a recognised clearing corporation only if he has obtained prior approval of the Board.
- (4) Any person holding more than two per cent. Of the paid up equity share capital of the recognized stock exchange or the clearing corporation on the date of commencement of these regulations, shall ensure compliance with this regulation within a period of ninety days from the date of such commencement.
- (5) If approval under sub-regulation (2) or (3) is not granted by the Board to any person, such person shall forthwith divest his excess shareholding.
- (6) Any person holding more than two per cent, of the paid up equity share capital in a recognized stock exchange or a recognised clearing corporation, as the case may be, shall file a declaration within fifteen days from the end of every financial year to the recognised stock exchange or recognized clearing corporation, as the case may be, that he complies with the fit and proper criteria provided in these regulations.

Fit and proper criteria.

- 20 (1) For the purposes of these regulations, a person shall be deemed to be a fit and proper person if-----
- (a) Such person has a general reputation and record of fairness and integrity, including but not limited to -----
- (i) Financial integrity;
 - (ii) Good reputation and character; and
 - (iii) Honesty;
- (b) Such person has not incurred any of the following disqualifications-----
- (i) The person, or any of its whole time directors or managing partners, has been convicted by a court for any offence involving moral turpitude or any economic offence or any offence against the securities laws;
 - (ii) An order for winding up has been passed against the person;
 - (iii) The person, or any of its whole time directors or managing partners, has been declared insolvent and has not been discharged;
 - (iv) An order, restraining, prohibiting or debaring the person, or any of its whole time directors or managing partners, from dealing in securities or from accessing the securities market, has been passed by the Board or any other regulatory authority, and a period of three years from the date of the expiry of the period specified in the order has not elapsed;
 - (v) Any other order against the person, or any of its whole time directors or managing partners, which has a bearing on the securities market, has been passed by the Board or any other regulatory authority, and a period of three years from the date of the order has not elapsed;
 - (vi) The person has been found to be of unsound mind by a court of competent jurisdiction and the finding is in force; and
 - (vii) The person is financially not sound.
- (2) If any question arises as to whether a person is a fit and proper person, the Board's decision on such question shall be final.

Sign. here:-



FIPL

FAIR INTERMEDIATE INVESTMENT PVT. LTD.

ANNEXURE - A

BSE STAR MF

(Letter to be provided by the investor to the MFI)

To,
Fair Intermediate Investment Pvt. Ltd.

2nd Floor Shukla Palace
Sapru Marg, Lucknow 226 001.

Sir,

Sub: BSE STAR MF

I/We, _____

am/are registered as your client with Client Code No. _____ for the Purpose of trading in the Capital Market segment of Bombay Stock Exchange Ltd. (Exchange).

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

For the purpose of availing this 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 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 December 2, 2009 and as may be specified by the exchange 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 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 BSE STARMF.

Date : _____

Thanking you,

Yours faithfully,

Name	
Code	
Sole/First Holder Signature: 	


FIIP
FAIR INTERMEDIATE INVESTMENT PVT. LTD.

ANNEXURE - A

Details of terms & conditions for the investor / client for using BSE STAR MF platform

1. Pre-requisites for becoming an investor / a client for the BSE STARMF platform

- 1.1 The client, who is desirous of investing in units of mutual fund schemes through the BSE STARMF.
- 1.2 The client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the broker who is a Mutual fund Intermediary (MFI) of the BSE STARMF platform.
- 1.3 The client has satisfied itself of the capacity of the MFI to deal in Mutual Fund units and wishes to execute its instruction through the MFI and the client shall from time to time continue to satisfy itself of such capability of the MFI before executing transaction through the MFI.
- 1.4 The client has approached the MFI with the application for availing the BSE STARMF platform.
- 1.5 The client has submitted relevant KYC (Know Your Client) details to the MFIs

2. Terms and Conditions

- 2.1 The client shall be bound by circulars issued by BSE's rules, regulations and notices/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 MFI in writing if there is any change in the information in the 'client registration form' provided by the client to the MFI at the time of registering as a client for participating in the BSE STAR MF platform or at any time thereafter.
- 2.3 The client shall submit to the MFI a completed application form in the manner prescribed format for the purpose of placing a subscription order with the MFI.
- 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, SEBI and AMFI.
- 2.7 The client shall pay to the MFI 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 MFI renders to the client.
- 2.8 The client will furnish information to the MFI 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 MFI, the client is not entitled to claim any Compensation either from the Investor Protection Fund or from any fund of BSE or its Clearing Corporation - Indian Clearing Corporation Ltd. (ICCL).
- 2.10 In case of any dispute between the MFIs and the investors arising out of the BSE STAR MF platform, BSE and / or ICCL agrees to extend the necessary support for the speedy redressal of the disputes.

Thanking you,

Yours faithfully,

Name	
Code	
Sole/First Holder Signature:	

**FIPL****FATCA & CRS DECLARATION (FOR INDIVIDUAL)**Do you have any Non-Indian Country (ies) of Birth / Citizenship / Nationality and Tax Residency ? Yes No

Sole/First Holder/Guardian <input type="checkbox"/> Yes <input type="checkbox"/> No		Second Holder <input type="checkbox"/> Yes <input type="checkbox"/> No		Third Holder <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Birth		Country of Birth		Country of Birth	
Country of Citizenship /Nationality		Country of Citizenship /Nationality		Country of Citizenship /Nationality	
Are you a US Specified Person ?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer ID	Are you US Specified Person ?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer ID	Are you a US Specified Person ?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer ID
Country of Tax Residency* (Other than India)	Taxpayer Identification No.	Country of Tax Residency* (Other than India)	Taxpayer Identification no.	Country of Tax Residency* (Other than India)	Taxpayer Identification no.
1.		1.		1.	
2.		2.		2.	
Address		Address		Address	

*Please indicate all countries in which you are a resident for tax purpose and associated Taxpayer identification number.

FATCA-CRS Terms and Conditions

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 Fair Intermediate Investment 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 on Automatic Exchange of Information (AEOI).

Signatures: Sole/First holder Signature Second Holder Signature Third Holder Signature

*For detail terms & conditions please see Client Copy

FATCA & CRS DECLARATION (FOR NON-INDIVIDUAL)

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 of Global Entity Identification Number of GIIN, etc.

In case the Entire 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)

1. We are a,
 Financial institution
 (Refer 1 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 – Non-participating FI**
 Not required to apply for - please specify 2 digits sub-category (Refer 1 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 except, a Publicly Traded Company or a related entity of Publicly Traded Company)

Category (Please tick applicable category): Unlisted Company Partnership Firm Limited Liability Partnership Company
 Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust
 Others (please specify _____)

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 W8 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 <input type="text"/>	Zip <input type="text"/>	Zip <input type="text"/>
	State: _____	State: _____	State: _____
	Country: _____	Country: _____	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			
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			
Percentage of Holding(%)			

*To include US, where controlling person is a US citizen of Green Card Holder.

If UBO is KYC compliant, KYC 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.

Attached 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 to inform Fair Intermediate Investment Pvt. Ltd. For any modification to this information promptly.

I further agree abide by the provisions of the scheme related documents inter alia provisions FATCA & CRS on Automatic Exchange of Information (AEOI).

Name : _____

Designation: _____

Signature:

Sole/First Authorised Signatory Second Authorised Signatory Third Authorised Signatory

Place: _____

Date: _____

For detail terms & conditions please see Client Copy.



To
FAIR INTERMEDIATE INVESTMENT PVT. LTD.
2ND Floor Shukla Palace,
Sapru Marg, Lucknow 226 001.

Date: _____

Dear Sir/Madam,

- 1. Whereas the Hindu Undivided Family of.....is carrying on business in the firm name and style of ator we intent to deal have or desire to have Securities Trading Account with Fair Intermediate Investment 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.
2. 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 authorize 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.
3. 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 f 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.
4. 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

Table with 7 columns: S. No., Name of the Co-parceners (Including Minor also), Relations hip with Karta, PAN No., Address (if other than Karta's address), Date of Birth, Signature. Rows 1-5 are empty.

Note : 1 or provide copy r any other ID proof (DL/Voter 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 : _____



FIIPL Declaration for availing of Basic Services Demat Account (BSDA) facility



To,

Dated: ___/___/___

Fair Intermediate Investment Pvt. Ltd.

DP ID. 39800

2nd Floor, Shukla Palace,
Sapru Marg, Lucknow - 226001.

Dear Sir/Madam,

I/We wish to avail the BSDA facility for the new account for which we have submitted my/our account form

	Name	Pan No.
Sole/First Holder		
Second Holder		
Third Holder		

I/we have read and understood the regulatory (SEBI) guidelines for opening a Basic Services Demat Account and undertake to comply with the aforesaid guidelines from time to time. I/we also undertake to comply with the guidelines issued by any such authority for BSDA facility from time to time. I/we also agree that in case our demat account opened under BSDA facility does not meet the eligibility for BSDA facility as per guideline issued by SEBI or any such authority at any point of time, my/our BSDA account will be converted to regular demat account without further reference to me/us and will be levied charges as applicable to regular accounts as informed by the DP.

I, the first/Sole holder also hereby declare that I do not have/purpose to have any other demat account across depositories as first/Sole holder.

	Name	Signature
Sole/First Holder		
Second Holder		
Third Holder		

Dear Sir,

I/We _____ (Name of the Applicant) hereby request you that I do not avail the facility for BSDA (Basic Services Demat Account) as per SEBI Circular No. CIR/MRD/DP/22/2012 dated 27/08/2012.

	Name	Signature
Sole/First Holder		
Second Holder		
Third Holder		



To

Dated: ___/___/___

Fair Intermediate Investment Pvt. Ltd.

2nd Floor, Shukla Palace,
Sapru Marg, Lucknow - 226001.

I / We hereby confirm that I/ We have read, understood, agree and received a duly executed copy of the under mentioned documents which are in accordance with the norms of the Circular No. NSE / INSP / 2009 / 85 dated 4th Dec. 2009 of National Stock Exchange of India Limited & BSE Circular No. 20091204 – 7 dated 4th Dec. 2009 of Bombay Stock Exchange Limited. & CIR/MIRSD/12/2013 dated December 04, 2013 of Central Depository Services (India) Limited.

- Copy of the Client Registration Form (KYC)
- Copy of Rights & Obligations of Stock Brokers, Sub-brokers and Clients (Trading)
- Copy of Rights & Obligations of Beneficial owner and Depository Participant (DP)
- Copy of Risk Disclosure Document for Capital Market and Derivatives Segments
- Copy of Guidance Note- Do's and Don'ts for Trading on the Exchanges(s) for Investors & Tariff Sheet & Policies
- Policies and Procedures of Fair Intermediate Investment Pvt. Ltd.
- Terms & Conditions of Basic Services Demat Account (BSDA).
- Terms & Conditions as Mutually agreed by me & FATCA & CRS Terms & Conditions.
- Other Voluntary & Undertaking Documents.

I/We am/are abiding by these terms & conditions. I/We reconfirm that I/We and stock broker shall refer any claim and/or disputes with respect to deposits, margin money, etc, to arbitrations as per the Rules, Bylaws, and Regulation of the Exchanges Where the trade is executed and circulars/notices issue there under as may be in force from time to time.

I/We reconfirm that I/we and Stock Broker shall refer all claims, differences or disputes between us arising out of or in relation to dealings, contracts and transaction made subject to the Buy-Laws, Rules and Regulations of the Exchange or with reference to anything incidental thereto or in pursuance thereof or relating to their validity, construction, interpretation, fulfillment or the rights, obligations and liabilities of the parties thereto and including any question of whether such dealings, transactions and contracts have entered into to arbitration in accordance with the provisions of these Byelaws and Regulations.

Thanks and Best regards,

For: Fair Intermediate Investment Pvt. Ltd.

Yours faithfully,

Authorised Signatory / Director

Client Code	First /Sole Holder or Guardian (In case of Minor)	Second Holder	Third Holder
	Sign.✍	Sign.✍	Sign.✍

**FIPL****(For Office Use Only)**

LETTER OF UNDERTAKING OF FIPL REPRESENTATIVE

I _____ (Client Code _____) hereby undertake that the Details of the client given in the form Login ID are complete in all respect. I hereby undertake that, I have checked the following details in the form and will be responsible for any incomplete/inappropriate details of client.

Sr. No.	PARTICULARS (STRIKE OUT WHICHEVER IS NOT APPLICABLE)	TICK (☑) COMPLIED
1.	Address proof, PAN Proof, Bank proof & ID Proof has been collected from the client as prescribed by CDSUNSDL. (In case of NRI Clients - Foreign Address Proof is obtained). In case of HUF accounts, NOC is obtained duly filled and signed by all coparceners)	<input type="checkbox"/>
2.	Personal Details of Client i.e Name, Address, PAN, Email, Mobile is correctly filled up and correct STATUS is ticked. Check the e-mail address by sending test E-mail.	<input type="checkbox"/>
3.	Proofs as per KYC is taken and is matching with Personal Details as filled up in the form.	<input type="checkbox"/>
4.	Account Details is completely filled up.	<input type="checkbox"/>
5.	Signature of the client has been taken on all designated places in the form.	<input type="checkbox"/>
6.	2 Witnesses of Clients & 2 Witness of FIPL are not same and their complete details is mentioned.	<input type="checkbox"/>
7.	FIPL undersigned official (only with "(" Code) signature is required in Agreements, Proofs and wherever DP official Signature is required.	<input type="checkbox"/>
8.	All supporting document has been verified with original and found valid in all respect. Relevant Rubber stamp is affixed on all proofs. In-person verification is done by FIPL employee only.	<input type="checkbox"/>
9.	Bank Account Details is filled up the form with MICR code. In case of NSDL form MICR number does not starts with "Zero".	<input type="checkbox"/>
10.	Organization Details/ Joint Holder's Details is filled up in the form.	<input type="checkbox"/>
11.	Guardian's Details (in case of Minor) is filled up in the form.	<input type="checkbox"/>
12.	Nomination Details is filled up in the form. If there is no nomination, relevant option is selected.	<input type="checkbox"/>
13.	Standing instructions is filled up in the form.	<input type="checkbox"/>
14.	Initial Margin Details is filled up in the form.	<input type="checkbox"/>
15.	Customer Profile & Risk Profile are mentioned and checked with relevant papers.	<input type="checkbox"/>
16.	Declaration is filled up. A photograph is pasted (not stapled) and signature across the photograph is taken.	<input type="checkbox"/>
17.	In Person Verification details are filled up in the form with signature and Rubber stamp of DP is affixed.	<input type="checkbox"/>
18.	NSE, BSE, DP Agreements is filled up in the form.	<input type="checkbox"/>
19.	Combined Risk Disclosure Document for Capital market / cash segment & futures & options Segment (BSE & NSE) is filled in the form.	<input type="checkbox"/>
20.	Authorization letter for receiving Transaction statement through Internet is filled up in the form.	<input type="checkbox"/>
21.	Power of attorney (POA) is filled up and in case of HUF all co-parcners signature is obtained	<input type="checkbox"/>
22.	Running account letter is filled up in the form and signed by Client.	<input type="checkbox"/>
23.	Instruction to send Password by SMS is filled up.	<input type="checkbox"/>
24.	Receipt of documents in Digital Mode is filled up.	<input type="checkbox"/>
25.	Schedule of Charges has been ticked.	<input type="checkbox"/>
26.	Branch Manager/ Relationship Manager have signed the Schedule of Charges Section.	<input type="checkbox"/>
27.	Complete Details of each Promoters, Directors, Key Personnel is obtained & filled up.	<input type="checkbox"/>
28.	In case of Partnership Firm, Required Declaration has been obtained on Letter Head of firm.	<input type="checkbox"/>
29.	In case of Sub-broker Client, Tripartite Agreement is attached.	<input type="checkbox"/>
30.	Signature of the Client is taken on the Acknowledgement slip after giving Client Copy of AOF To the Customer.	<input type="checkbox"/>

I have read and understood that if any of the requirements is not fulfilled then a penalty Of RS.200/- would be charged to me or any other action may be taken as deemed fit by the Management for non-compliance from my end.

Name		Signature	
-------------	--	------------------	--

**Portfolio Advisors &
A Full-Service Brokerage House For
Equity, Derivatives & Commodities**

Corporate Member:

National Stock Exchange of India Ltd (NSE)
Bombay Stock Exchange Ltd (BSE)
Central Depository Services India Ltd (CDSL)



FAIR INTERMEDIATE INVESTMENT PVT. LTD

Regd. Office:

2nd Floor, Shukla Palace, Sapru Marg, Lucknow - 226 001
Ph.: 0522-4052803, 4052806, 4052825 Fax: 0522-4052820

Visit us at: www.fairinvest.co.in E-mail: fair_invest@rediffmail.com

**FIPL****OPTION FORM FOR ISSUE OF DIS BOOKLET****WHERE LIMITED-PURPOSE POWER OF ATTORNEY HAS BEEN GIVEN**

DATE										
------	--	--	--	--	--	--	--	--	--	--

DP ID	1	2	0	3	9	8	0	0	Client ID	0	0						
First Holder Name																	
Second Holder Name																	
Third Holder Name																	

To,
Fair Intermediate Investment Pvt. Ltd.
2nd Floor Shukla Palace Sapru Marg,
Lucknow 226 001.

D.P. I.D. 12039800
 SEBI Reg. No. : IN-DP-CDSL-81-2015

Dear Sir/ Madam,

I/We hereby state that : (Select one of the options given below)

OPTION 1 :

I/We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my/our CDSL account though I/we have issue a Power of Attorney (POA) in favor of **M/S Fair Intermediate Investment Pvt. Ltd.** For executing instructions for settling stock exchange trades effected through such Clearing Member.

Thanking you,
 Yours faithfully,

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

===== (Please Tear here) =====

OR**OPITION 2 :**

I/We do not require the Delivery Instruction Slip (DIS) for the time being, since I/we have issued a POA in favor of Fair Intermediate Investment Pvt. Ltd. For executing delivery instructions for settling stock exchange trades effected through such Clearing Member, However, the Delivery Instruction Slip (DIS) booklet should be issued to me/us immediately on my/our request at any later date.

Thanking you,
 Yours faithfully,

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

===== (Please Tear here) =====

Received Option Form for Issue/Non-Issue of DIS Booklet From:

DP ID	1	2	0	3	9	8	0	0	Client ID	0	0						
First Holder Name																	
Second Holder Name																	
Third Holder Name																	

For: Fair Intermediate Investment Pvt. Ltd.