

CLIENT REGISTRATION FORM

Form No.

- INDIVIDUAL
- NRI
- CORPORATE
- PARTNERSHIP FIRM



RAMESHWARAM CAPITAL MARKET

Member : National Stock Exchange of India Ltd.
Bombay Stock Exchange Ltd.

Client Name _____

Client Code _____

Date of Registration _____



RAMESHWARAM CAPITAL MARKET

Member : National Stock Exchange of India Ltd. (Cash and F&O Segment)

Member : Bombay Stock Exchange Ltd. (Cash and F&O Segment)

SEBI Regn. No. : INZ000224114

CONTACT DETAILS	
Proprietor & Compliance Officer Details	Mr. Mahesh Kumar Gupta Ph.: 9810038255 E-mail : ramesh_waram@rediffmail.com
Office Address :	95, Navyug Market, 1st Floor, Ghaziabad - 201001 (U.P.) Phone: +91-120-2790738, 2793446 E-mail : ramesh_waram@rediffmail.com Website: www.rameshwaram.biz

For any grievance/dispute please contact RAMESHWARAM CAPITAL MARKET at the above address or email id- info@rameshwaram.biz and Phone No. +91-120-2790738. In case not satisfied with the response, please contact the concerned exchange(s) at :

Exchange Name

National Stock Exchange of India Ltd.

Bombay Stock Exchange Ltd.

E-mail ID

ignse@nse.co.in

is@bseindia.com

Phone No.

022-26598190, 18002660058

022-22728097

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

- Self attested copy of PAN card is mandatory for all clients.
- 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.
- If any proof of identity or address is in a foreign language, then translation into English is required.
- Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- If correspondence & permanent address are different, then proofs for both have to be submitted.
- Sole proprietor must make the application in his individual name & capacity.
- 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.
- For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
- In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 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.
- 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:

- PAN card with photograph. This is mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D)
- Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
- 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.)

- Passport/ Voters Identity Card/ Ration Card/ Registered Lease or Sale Agreement of Residence/ Driving License/ Flat Maintenance bill/ Insurance Copy.
- Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
- Bank Account Statement/Passbook - Not more than 3 months old.
- Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- 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.
- 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.
- 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.
- The proof of address in the name of the spouse shall be acceptable, subject to the submission of proof of relationship alongwith the same.

D. Exemptions/clarifications to PAN

(*Sufficient documentary evidence in support of such claims to be collected.)

- 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.
- Investors residing in the state of Sikkim.
- UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
- SIP of Mutual Funds upto Rs 50, 000/- p.a.

- 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:

- 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).
- 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. In case of Non Individuals 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/ 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 Investors (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.

INSTRUCTIONS / CHECK LIST (for filling additional information related to trading account)

- Additional documents in case of trading in derivatives segments - illustrative list :

<ul style="list-style-type: none"> Copy of ITR Acknowledgement Copy of Annual Accounts In case of salary income - Salary Slip, Copy of Form 16 	<ul style="list-style-type: none"> Net Worth Certificate Copy of Demat account holding statement. Bank account statement for last 6 months 	<ul style="list-style-type: none"> Any other relevant documents substantiating ownership of assets. Self declaration with relevant supporting documents.
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- Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.

- Demat master or recent holding statement issued by DP bearing name of the client.

- For individuals:

- Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office.
- In case of non-resident clients, employees at the stock broker's local office, overseas can do 'in-person' verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.

- For non-individuals:

- Form need to be initialized by all the authorized signatories.
- Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.

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

General Instructions:

- 1 Fields marked with '*' are mandatory fields.
- 2 Tick '✓' wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- 6 Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of 'Small Account type' only personal details at section number 1 and 2, photograph, signature and self-certification required.

A Clarification / Guidelines on filling 'Personal Details' section

- 1 **Name:** Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either **father's name or spouse's** name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

- 1 **Tax identification Number (TIN):** TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

C Clarification / Guidelines on filling 'Proof of Identity [Pol]' section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code	Description
01	Identity card with applicant's photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
02	Letter issued by a gazetted officer, with a duly attested photograph of the person.

D Clarification / Guidelines on filling 'Proof of Address [PoA] - Current / Permanent / Overseas Address details' section

- 1 PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
- 2 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3 In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal Tax receipt.
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

E Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

- 1 To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2 In case of multiple correspondence / local addresses, Please fill 'Annexure A1'

F Clarification / Guidelines on filling 'Contact details' section

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

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

- 1 Provide KYC number of related person if available.

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

- 1 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

ANNEXURE - 1
ACCOUNT OPENING KIT

INDEX OF DOCUMENTS

MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES

S.No.	Name of the Document	Brief Significance of the Document	Page No.
1.	Account Opening Form	A. KYC Form - Document captures the basic information about the constituent, FATCA & CRS Declaration.	1-10
		C. Document captures the additional information about the constituent relevant to trading account.	11-16
2.	Tariff Sheet	Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock exchange(s)	17
3.	Rights and Obligations	Document stating the Rights & Obligations of Stock Broker/Trading Member, Authorised Person and Client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	Given to Client with Welcome Kit
4.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities/ commodities market.	
5.	Guidance Note	Documents detailing do's and don'ts for trading on exchange, for the education of the investors.	
6.	Policies and Procedures	Document describing significant policies and procedure of the Stock Broker.	

VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER

S.No.	Name of the Document	Brief Significance of the Document	Page No.
1.	Authorisation for Electronic Communication	For authorising the trading member to send Electronic Contract Notes.	18
2.	Running Account Authorisation	Helps the client to enjoy exposures linked to the credit in the trading account.	19
3.	Letter of Authority	Authorisation for smooth functioning of Trading A/c	20
4.	Declaration by HUF	Declaration by HUF	21
5.	Declaration for Name Discrepancy in PAN Card, Bank Proof & Address Proof	Declaration	22
6.	Addendum to the Client Registration Form Key Information	Addendum to the Client Registration Form Key Information	23

Note : You may also download KYC form & other formats from our website www.rameshwaram.biz

CLIENTS OPTION FOR RECEIVING DOCUMENTS

To,

RAMESHWARAM CAPITAL MARKET

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

Dated _____

Dear Sir/ Madam,

I hereby opt to get the document listed below in -

☐ Electronic Form ☐ Physical Form

1. Rights and Obligations of Stock Brokers, Authorised Person, and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
2. Risk Disclosure Document for Capital Market, Derivatives & Commodity Derivatives Segments.
3. Guidance Note - Do's and Don'ts for Trading on the Exchange(s) for Investors.
4. Policies and Procedures Document pursuant to the SEBI circular dated December 03, 2009.
5. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us. Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully,

 1

(Client Signature)

ACKNOWLEDGEMENT FROM CLIENT FOR RECEIPT OF PHYSICAL DOCUMENTS

To,

RAMESHWARAM CAPITAL MARKET

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

Dated _____

Dear Sir/ Madam,

I hereby opt to get the document listed below in -

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1. Rights and Obligations of Stock Brokers, Authorised Person, and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
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3. Guidance Note - Do's and Don'ts for Trading on the Exchange(s) for Investors.
4. Policies and Procedures Document pursuant to the SEBI circular dated December 03, 2009.
5. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us. Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully,

 2

(Client Signature)

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

Important Instructions:

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



RAMESHWARAM CAPITAL MARKET

For office use only

(To be filled by financial institution)

Application Type*

☐ New☐ Update

KYC Number

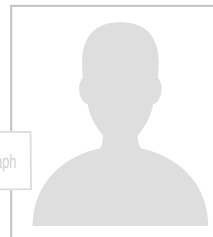
(Mandatory for KYC update request)

Account Type*

☐ Normal☐ Minor☐ Aadhaar OTP based E-KYC (in non-face to face mode)☐ 1. PERSONAL DETAILS (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
PAN*	<input type="text"/>	<input type="checkbox"/> Form 60 furnished		
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/>)		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian		
	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin		
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector)	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector)	
	<input type="checkbox"/> O-Others (<input type="checkbox"/> Professional)	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife
	<input type="checkbox"/> B-Business	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> X- Not Categorised	<input type="checkbox"/> Forex Dealer
	<input type="checkbox"/> Others (Pl. Specify)			

PHOTO



Sign Across the photograph

☐ 2. TICK IF APPLICABLE ☐ RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

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 purpose & the associated tax id no. below.

ISO 3166 Country Code of Jurisdiction of Residence* Tax Identification Number or equivalent (If issued by jurisdiction)* Place / City of Birth* ISO 3166 Country Code of Birth* ☐ 3. PROOF OF IDENTITY AND ADDRESS* (Please refer instruction B at the end)

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

- ☐ A- Passport Number
- ☐ B- Voter ID Card
- ☐ C- Driving Licence
- ☐ D- NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F- Proof of possession of Aadhaar

II. ☐ E- KYC Authentication III. ☐ Offline verification of Aadhaar

Address

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

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

- | | | | | | | | | | | | | | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <input type="checkbox"/> | A- Passport Number | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | B- Voter ID Card | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | C- Driving Licence | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | D- NREGA Job Card | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | E- National Population Register Letter | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | F- Proof of possession of Aadhaar | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | |
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II. ☐ E- KYC Authentication

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III. ☐ Offline verification of Aadhaar

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IV. ☐ Deemed Proof of Address - Document type Code

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[illegible][illegible]

- I hereby declare that the KYC details furnished by me are true and correct to the best of my knowledge and belief and I under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I hereby consent to receiving information from KRA/CERSAI (CKYC) through SMS/Email on the above registered number/Email address.
- I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

 3

Signature / Thumb Impression of Applicant

[illegible]

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline Verification ☐ Digital KYC Process
☐ Equivalent e-document ☐ Video Based KYC ☐ Digilocker Verified

Date	D	D	M	M	Y	Y	Y	Y
Emp. Name								
Emp. Code								
Emp. Designation								
Emp. Branch								

Name **RAMESHWARAM CAPITAL MARKET**
Code

[illegible]

- 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/we am/are aware that I/we may be held liable for it.
- I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

 4

Signature / Thumb Impression of Applicant

Date : - - [illegible]

Documents Received ☐ Certified Copy ☐ Equivalent e-document

[illegible]

Name **RAMESHWARAM CAPITAL MARKET**
Code

**Details of Promoters / Partners / Karta / Trustees and Whole Time Directors
forming a part of Know Your Client (KYC) Application Form for Non-Individuals**

Sr. No.	Name	Relationship with Applicant (i.e. promoters, whole time directors etc.)	PAN	Whether Politically Exposed	Residential / Registered Address	DIN of whole time directors / Aadhaar number of Promoters / Partners / Karta	Photograph
1.				<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO		DIN : UID :	
2.				<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO		DIN : UID :	
3.				<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO		DIN : UID :	
4.				<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO		DIN : UID :	
5.				<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO		DIN : UID :	

PEP: Politically Exposed Person RPEP: Related to Politically Exposed Person



Name & Signature of the Authorised Signatory(ies)

Date :

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



RAMESHWARAM CAPITAL MARKET

Application No. :

Please fill in ENGLISH and in BLOCK LETTERS with black ink

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (As appearing in supporting identification document).

Name

Father's/Spouse Name

2. Gender ☐ Male ☐ Female B. Marital status ☐ Single ☐ Married C. Date of Birth d d / m m / y y y y

3. Nationality ☐ Indian ☐ Other (Please specify)

4. Status Please tick (✓) ☐ Resident Individual ☐ Non Resident ☐ Foreign National (Passport Copy Mandatory for NRIs & Foreign Nationals)

5. PAN Please enclose a duly attested copy of your PAN Card

Unique Identification Number (UID)/Aadhaar, if any:

6. Proof of Identity submitted for PAN exempt cases Please Tick (✓)

☐ UID (Aadhaar) ☐ Passport ☐ Voter ID ☐ Driving Licence ☐ Others

PHOTOGRAPH

Please affix
the recent passport
size photograph and
sign across it

(Please see guideline 'D' overleaf)

B. Address Details (please see guidelines overleaf)

1. Address for Correspondence

City / Town / Village State Country Pin Code

2. Contact Details

Tel. (Off.) (ISD) (STD) Tel. (Res.) (ISD) (STD) Mobile (ISD) (STD) Fax (ISD) (STD)

Mobile is given by me belongs to ☐ Me ☐ Spouse ☐ Dependent Children ☐ Dependent Parents

E-Mail Id.

E-mail ID is given by me belongs to ☐ Me ☐ Spouse ☐ Dependent Children ☐ Dependent Parents

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

☐ Passport ☐ Ration Card ☐ Registered Lease/Sale Agreement of Residence ☐ Driving License ☐ Voter Identity Card ☐ *Latest Bank A/c Statement/Passbook
☐ *Latest Telephone Bill (only Land Line) ☐ *Latest Electricity Bill ☐ *Latest Gas Bill ☐ Others (Please specify)

*Not more than 3 Months old. Validity/Expiry date of proof of address submitted d d / m m / y y y y

4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant

City / Town / Village State Country Pin Code

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

☐ Passport ☐ Ration Card ☐ Registered Lease/Sale Agreement of Residence ☐ Driving License ☐ Voter Identity Card ☐ *Latest Bank A/c Statement/Passbook
☐ *Latest Telephone Bill (only Land Line) ☐ *Latest Electricity Bill ☐ *Latest Gas Bill ☐ Others (Please specify)

*Not more than 3 Months old. Validity/Expiry date of proof of address submitted d d / m m / y y y y

C. Other Details (please see guidelines overleaf)

1. Gross Annual Income Details (Please tick (✓): ☐ Below 1 Lac ☐ 1-5 Lac ☐ 5-10 Lac ☐ 10-25 Lac ☐ > 25 Lacs

OR

Net-worth in ₹. (*Net worth should not be older than 1 year) as on (date) d d / m m / y y y y

2. Occupation (Please tick (✓) any one and give brief details):

☐ Private Sector Service ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired
☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (Please specify)

3. Please tick, if applicable: ☐ Politically Exposed Person ☐ Related to a Politically Exposed Person

For definition of PEP, please refer guideline overleaf

4. Any other information:

DECLARATION

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

Place:

Date:

SIGNATURE OF APPLICANT

5

FOR OFFICE USE ONLY

IPV Done ☐ on d d / m m / y y y y

AMC/Intermediary name OR code

☐ (Originals Verified) Self Certified Document copies received

☐ (Attested) True copies of documents received

Main Intermediary

Seal/Stamp of the intermediary should contain

Staff Name

Designation

Name of the Organization

Signature

Date

Seal/Stamp of the intermediary should contain

Staff Name

Designation

Name of the Organization

Signature

Date

"Please note that the KYC Application Form and overleaf instructions should be printed on the same page (back to back), if printed separately then both the pages should be attached and signed by the applicant."

FATCA & CRS Declaration - Individual

Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance

Name																		
Place of Birth																		
Country of Birth																		
Nationality																		
Constitute	<input type="checkbox"/> Individual <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others (Pl. Specify) _____																	

Are you a tax resident of any country other than India - ☐ Yes ☐ No

If Yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

S.No.	Country [#]	Tax Identification Number [%]	Identification Type (TIN or other, please specify)
1.			
2.			
3.			

[#] To also include USA, where the individual is a citizen / green card holder of the USA

[%] In case Tax Identification Number is not available, kindly provide its functional equivalent \$

CERTIFICATION

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

FATCA & CRS - TERMS & CONDITIONS

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


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

It is important that you respond to our request, even if you believe you have already supplied any previously requested information.

Date :

Place :

Signature

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"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____		
Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office		
Tax ID %					
Tax ID Type					
City of Birth					
Country of birth					
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____		
Nationality					
Father's Name					
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others		
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY		
Percentage of Holding (%) §					
* To include US, where controlling person is a US citizen or green card holder * If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable. * In case Tax Identification Number is not available, kindly provide functional equivalent § Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary					
DECLARATION					
I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform RAMESHWARAM CAPITAL MARKET 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).					
Name					
Designation					
Client Signature			Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Place : <input type="text"/>		
For Investor convenience, RAMESHWARAM CAPITAL MARKET collecting this mandatory information for updating across all Group Companies of RAMESHWARAM CAPITAL MARKET whether you are already an investor or would become an investor in future. Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest RAMESHWARAM CAPITAL MARKET branch or you can dispatch the hard copy to- RAMESHWARAM CAPITAL MARKET 95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)					
• For Detail Terms & Conditions please visit www.rameshwaram.biz					

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





Bank Name	Branch Address	Account Number	Account Type	MICR Number	IFSC Code
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others - in case of NRI / NRE / NRO		

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

Depository Participant Name	Name of Depository	Beneficiary Name	DP ID	Beneficiary ID (BO ID)
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			

C. TRADING PREFERENCES

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

Exchanges	NSE & BSE			
All Segments	Cash	F&O	Currency	Commodity Derivatives
	 9(a)	 9(b)	 9(c)	 9(d)

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

ONLINE / OFFLINE PREFERENCES

Capital, F&O, Currency (NSE, BSE) Capital, F&O (BSE)	<input type="checkbox"/> Offline <input type="checkbox"/> Online  10
---	---

D. FINANCIAL DETAILS & OCCUPATION DETAILS

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

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

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

☐ Please tick, if applicable (Note : In case of Non-individuals please tick, if applicable for any of your authorised signatories/
Promoters/Partners/Karta/Trustees/whole time directors) :
☐ Politically Exposed Person (PEP) ☐ Related to Politically Exposed Person (RPEP)

☐ Any other information :

E. DEALING THROUGH AUTHORISED PERSON AND OTHER STOCK BROKERS

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

Name of the Authorised Person :

Authorised Person SEBI Regn. No. :

Authorised Person's Address :

Authorised Person's Phone/Fax No. :

Authorised Person's Website :

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

Name of the stock broker :

Name of Authorised Person (If any) :

Client Code (UCC) :

Exchange :

Details of disputes / dues pending from / to such stock broker / Authorised Person

(Please Specify)

F. ADDITIONAL DETAILS

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

.....

Specify your Email id, if applicable :

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

.....

Number of years of Investment/Trading Experience : ☐ 0 ☐ 1-3 ☐ 3-5 ☐ 5-10 ☐ >10

In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorised to deal in securities on behalf of company/firm/others:

PHOTOGRAPH

Sign across the
Photograph

PHOTOGRAPH

Sign across the
Photograph

Name.....

Designation.....

PAN.....

UID.....

Residential Address.....

.....

.....

Signature.....

Name.....

Designation.....

PAN.....

UID.....

Residential Address.....

.....

.....

Signature.....

Any other information :

.....

G. PAST ACTIONS

Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years :

.....

.....

H. GST DETAILS (As applicable, Statewise)

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

I. INTRODUCER DETAILS

Name of the Introducer :

(Surname) (Name) (Middle Name)

Status of the Introducer : ☐ Sub Broker ☐ Remisier ☐ Auth. Person ☐ Existing Client ☐ Others _____

Address and Ph. No. of the Introducer :

.....Sign. of the Introducer.....

Sub-broker's Name :

SEBI Registration number :

DECLARATION

1. 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.
2. 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.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website www.rameshwaram.biz

Place _____

Date _____

 11

Signature of Client

NOMINATION FORM

DATE	D	D	M	M	Y	Y	Y	Y	UCC							
DP ID									Client ID							

☐ I/We wish to make a nomination.
[As per details given below]

Nomination Registration No.	Dated

NOMINATION DETAILS


I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive 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 nominees in the account		Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1.	Name of the nominee(s) Mr./Ms.)			
2.	Share of each Nominee Equally [If not equally, please specify percentage]	%	%	%
Any odd lot after division shall be transferred to the first nominee mentioned in the form.				
3.	Relationship with the Applicant (if any)			
4.	Address of Nominee(s) City / Place State / Country PIN Code			
5.	Mobile/Telephone No. of Nominee(s)			
6.	Email ID of nominee(s)			
7.	Nominee Identification details - [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> AADHAAR <input type="checkbox"/> Saving Bank A/c No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			

Sr. Nos. 8-14 should be filled only if nominee(s) is a minor :

8.	Date of Birth {in case of minor nominee(s)}			
9.	Name of Guardian (Mr./Ms.) {in case of minor nominee(s)}			
10.	Address of Guardian(s) City / Place State / Country PIN Code			
11.	Mobile/Telephone No. of Guardian			
12.	Email ID of nominee(s)			
13.	Relationship of Guardian with nominee			

14.	Guardian Identification details - [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> AADHAAR <input type="checkbox"/> Saving Bank A/c No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			
-----	---	--	--	--

Holder	Name	Signature
Sole / First Holder / Guardian (Mr./Ms.) (in case of Minor)		 12
Second Holder		
Third Holder		

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

Note :

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

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

DECLARATION FORM FOR OPTING OUT OF NOMINATION

To,

RAMESHWARAM CAPITAL MARKET

Dated _____

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

UCC								
DP ID								
Client ID (Only for Demat Account)								
Sole/First Holder Name								
Second Holder Name								
Third Holder Name								

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

 13

First/Sole Holder Signature

Second Holder Signature

Third Holder Signature

FOR OFFICE USE ONLY

UCC Code allotted to the Client : _____

	Document verified with Originals	Client Interviewed By	In-Person Verification Done by
Name of the Employee			
Employee Code			
Designation of the Employee			
Date			
Signature			

I / We undertake that 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.

Signature of the Authorised Signatory

Date _____

Seal / Stamp of the Stock Broker

TARIFF SHEET**(BROKERAGE CHARGES)****CASH SEGMENT - NSE**

Brokerage Slab	Slab in %	Minimum per Share
Delivery Based		
Square off		

F & O SEGMENT - NSE

Brokerage Slab	Slab in %	Minimum per Lot
Futures		
Options		

CASH SEGMENT - BSE

Brokerage Slab	Slab in %	Minimum per Share
Delivery Based		
Square off		

F & O SEGMENT - BSE

Brokerage Slab	Slab in %	Minimum per Lot
Futures		
Options		

Note:

1. Transaction & Clearing Charges, Stamp duty, GST, SEBI Fee, STT and all legal levies as may applicable from time to time shall be charged separately in addition to the brokerage.
2. Late payment penalty @18% p.a. calculated on daily overdue balance shall be charged till actual realisation.
3. In case an internet trading terminal is provided, connectivity charges @Rs. _____/- per month or _____% of turn over shall be charged separately.
4. Charges/ service standards are subject to revision at sole discretion of RAMESHWARAM CAPITAL MARKET.
5. Charges quoted above are for the services listed. Any service not quoted above will be charged separately.

 14

(Client Signature)

DISCLOSURE REGARDING PROPRIETARY TRADING**SUBJECT : DISCLOSURE REGARDING PROPRIETARY TRADING**

Date : _____

As required under Circular No. SEBI / MRD / SE / Cir-42 / 2003 dated 19.11.2003 issued by the Securities and Exchange Board of India; I/We hereby disclose that in addition to client-based business, I/We am/are also doing proprietary trading.

☐ I/we acknowledge the above information.
For RAMESHWARAM CAPITAL MARKET
 15

(Client Signature)

Authorised Signatory**PMLA DECLARATION**

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

 16

(Client Signature)

Risk Category : ☐ Low ☐ Medium ☐ High

ELECTRONIC CONTRACT NOTE (ECN) DECLARATION

To,

RAMESHWARAM CAPITAL MARKET

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

Dear Sir,

I _____ a client code _____ with member M/S. RAMESHWARAM CAPITAL MARKET of NSE & BSE Exchange undertakes as follows:

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

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

 17

(Client Signature)

Date : _____ Place: _____

RUNNING ACCOUNT AUTHORISATION

To,

RAMESHWARAM CAPITAL MARKET

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

Date : _____

Sub : Running Account Authorisation

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

I/We authorize you as under:

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) of any segment(s) of any or all the Exchange(s)/Clearing Corporation unless I/We instruct you otherwise.
2. I/We request you to settlement of my fund after making necessary retention as per frequency option given below:-
☐ Once in a calender Month ☐ Once in every calender Quarter
except the funds given towards collaterals/margin in form of Bank Guarantee and/or Fixed Deposit Receipt.
3. I/We confirm you that I/We shall bring to your notice any dispute arising from the statement of account or settlement so made in writing preferably within 7 working days from the date of receipt of funds/securities or statement of account or statement related to it, as the case may be at your registered office.
4. This Running account authorization would continue until it is revoked by me by giving a notice in writing.

 18

(Client Signature)

LETTER OF AUTHORITY

To,
RAMESHWARAM CAPITAL MARKET

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

Date : _____

Sub : Letter of Authority

Dear Sir/Madam,

I hereby authorise Mr/Ms. _____ S/d of _____
having PAN _____ UID No _____ & Mobile No. _____ is
my husband/wife/son/daughter/brother/sister/parents/other (Please Specify) _____ to trade on my behalf in my
trading A/c No. _____ and to perform all or any of the following acts, deeds and things for and on my /our
behalf and in my/our interest.

I/we confirm that the aforementioned Authorised Person is well aware of risks associated with trading.

1. Delivery of order/trade confirmation/cancellation :

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

2. Telephonic Conversation :

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

3. Set off of outstanding:

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

4. Charges & Balance Maintenance :

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

5. Authority for intimation

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

6. Facsimile Authorisation

During the operation of my trading I may require to place order instructions through Fax/Scan, I therefore authorise you to honor the instruction and orders send through Fax/Scan copy send by me/ us.

7. I/We have been explained that I/We may not opt to give any of the above authorisation and that the above authorisations are voluntary on my/our part and that I/We can revoke this authorisation at any point of time during the operation of my/our trading account with you by giving you a notice in writing.

For and On Behalf of Constituent

Thanking you,

Yours faithfully

Authorised Person Name _____

Authorised Person Signature _____

 19

(Client Signature)

DECLARATION BY HUF

To,

RAMESHWARAM CAPITAL MARKET

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

Date: _____

As our HUF firm wishes to open an account with you in the said name.....
 we beg to say that the first signatory to this letter, i.e.,is the Karta of
 the Joint Family and other signatories are the adult co-parceners of the said family.

We further confirm that the business of the said joint family is carried on mainly by the said Karta as also by the other signatories hereto in the interest and for the benefit of the entire body of co-parceners of the joint family. We all undertake that claims due to you from the said family shall be recoverable personally from all or any of us and also for the entire family properties of which the first signatory is the Karta, including the share of minor co-parceners. In view of the fact that ours is not a firm governed by the Indian Partnership Act of 1952, we have not got our said firm registered under the said Act.

We hereby undertake to inform you of the death or birth of a co-parcener of any change occurring at any time in the membership of our joint family during the currency of the account.

This is to certify that following are the family members under _____ (HUF)												
S. No.	Name	Gender (Male/Female)	Relationship with Karta	Signature	Date of Birth							
1.					D	D	M	M	Y	Y	Y	Y
2.					D	D	M	M	Y	Y	Y	Y
3.					D	D	M	M	Y	Y	Y	Y
4.					D	D	M	M	Y	Y	Y	Y
5.					D	D	M	M	Y	Y	Y	Y
6.					D	D	M	M	Y	Y	Y	Y
7.					D	D	M	M	Y	Y	Y	Y

For _____ (HUF)

* Please stamp and sign.

 20

Client Signature (Karta)

DECLARATION, INDEMNITY CUM UNDERTAKING FOR NAME DISCREPANCY IN PAN CARD, BANK PROOF & ADDRESS PROOF

To,

RAMESHWARAM CAPITAL MARKET

Member : NSE & BSE

95, Navyug Market, 1st Floor, Ghaziabad-201001 (U.P.)

I _____ s/o, w/o, d/o _____
 _____, refer to my Trading Account
 _____ with Rameshwaram Capital Market (RCM) do hereby affirm, declare and undertake that

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

That the contents of this declaration, Indemnity-cum-undertaking have been explained to me in vernacular and I have understood before signing it. That this declaration, Indemnity-cum-undertaking given by me to RCM is by my absolute free will and coercion, undue influence, pressure etc., and at present I am having sound health and mind.

 21

(Client Signature)

(Client Name) _____

ADDENDUM TO THE CLIENT REGISTRATION FORM / KEY INFORMATION

Date _____

In compliance with the provisions of Prevention of Money Laundering Act, 2002 and subsequent circulars issued by SEBI thereto, we hereby obliged to consider it as a part of client registration document: -

PREVENTION OF MONEY LAUNDERING

Prevention of Money Laundering Act, 2002 (herein refer to an "Act") came into affect July 1, 2005 vide notification No. GRE 436(E) dated July 1, 2005 issued by Department of Revenue, Ministry of Finance, Govt. of India. Further SEBI vide Circular reference number ISD/CIR/RR/AML/1/06 dated January 18, 2006 mandated that all the Stock Brokers should formulate and implement a proper policy framework as per the guidelines on anti money laundering measures and also to adopt a Know Your Client (KYC) policy. SEBI also issued another circular reference number ISD/CIR/RR/AML/2/06 dated March 23, 2006 advising all the Stock Broker to take necessary steps to ensure compliance with the requirement of Sec 12 of the Act inter-alia, maintenance and preservation of records and reporting of information relating to cash and suspicious transactions to Financial Intelligence Unit-India (FIU-IND), New Delhi.

The constituents should ensure that the amount invested in the securities is through legitimate sources only and does not involve and is not designated for the purpose of contravention or evasion of the provision of the Income Tax Act, Prevention of Money Laundering Act, Prevention of corruption Act and/or any other law for the time being in force enacted by Govt. of India from time to time or any rules and regulations, notifications or directions issued there under.

To ensure appropriate identification of the constituents under its KYC policy and with view to monitor the transactions for the prevention of anti money laundering, the company has reserve the right to seek information, record constituents telephonic calls and/or obtained or retained documentation for establishing the identity of the constituents, proof of residence, source of funds, etc. It may re-verify identity and obtain any incomplete or additional information for this purpose.

The constituents or their attorney, if any, shall produce independent source documents, such as photographs, certified copies of ration card/passport/pan card/driving license or such other documents or produce such information as may be required from time to time for verification of the identity, residential address, financial information of the constituents by the company.

If the constituents refuses/fails to produce the required documents and information with in the period specified in the communication sent by company to the constituents, then the company after applying due diligence measures believes that the transaction is suspicious in nature within the purview of the Act and SEBI circulars issued from time to time or on account of deficiencies in the documentation shall have absolute discretion to report suspicious transaction to FIU-IND or to reject the application or to freeze the account of constituent. Thus the KYC documentation shall comply by all the constituents in its true spirit and word.

The Company, its Directors, its Employees and agents shall not be liable in any manner for any claim arising whatsoever on account of freezing of account or on rejection of application etc. due to noncompliance of the provisions of the Act, SEBI circulars and KYC policy and or where company believes that transaction is suspicious in nature within the purview of the Act or SEBI circulars and reporting the same to FIU-IND.

This document form an integral part of the client registration form as addendum or key information memorandum and will be subject to amendments from time to time.



(Client Signature)

CHECK LIST FOR CLIENT REGISTRATION FORM

FORM RECEIVING DATE : ACCOUNT OPENING DATE : TM DP	BRANCH CODE : RL/TL SUB BRANCH CODE :	CLIENT CODE TM : DP :
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I.	CHECKING DETAILS	YES	REMARKS
a)	Name as it appears on the ID & Address Proof (in capital letter)		
b)	Signature of Client on all pages and wherever necessary (Witness wherever required) <input type="checkbox"/>		
c)	Signature Checked and Verified.		
d)	Photograph (duly signed) <input type="checkbox"/>		
e)	A copy of PAN Card (Self Attested) <input type="checkbox"/>		
f)	Address Proof (Self Attested) <input type="checkbox"/>		
g)	Bank Proof containing Client Name (Self Attested) <input type="checkbox"/>		
h)	Demat Account Proof (Self Attested) <input type="checkbox"/>		
i)	Stamp Paper : <input type="checkbox"/>		
j)	Exchange given : <input type="checkbox"/> NSE CM <input type="checkbox"/> NSE F&O <input type="checkbox"/> BSE CM <input type="checkbox"/> BSE F&O		
2.	Telephonic confirmation of Particulars done by _____ Date _____ Time _____ On Phone No. _____		
3.	Details Punched in Computer by _____		
4.	Cross Checking done by _____		
5.	<div style="display: flex; justify-content: space-between;"> <div> UCC UPLOADED : <input type="checkbox"/> NSE <input type="checkbox"/> BSE </div> <div> <input type="checkbox"/> ENTERED IN FORM DATA </div> </div>		
6.	BACK OFFICE WEB LOGIN User Name ID _____ Password _____		
7.	DP WEB LOGIN User Name ID _____ Password _____		
8.	Form sent to Surveillance by _____ Date : _____ Time : _____		
9.	Client ID Mapping done by _____ Branch ID _____ User ID: _____ Dealer ID : _____		
10.	INTERNET TRADING <input type="checkbox"/> Odin Diet <input type="checkbox"/> I-Net User ID _____ Password _____		
11.	Client Account Status Report issued by _____		
12.	Form Returned to Compliance by _____ Date : _____ Time : _____		
13.	Kit Dispatched on _____ (Date) _____ Pod No. _____		



RAMESHWARAM CAPITAL MARKET

Member : National Stock Exchange of India Ltd. (Cash and F&O Segment)

Member : Bombay Stock Exchange Ltd. (Cash and F&O Segment)

SEBI Regn. No. : INZ000224114

95, Navyug Market, 1st Floor, Ghaziabad - 201001 (U.P.)

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E-mail : ramesh_waram@rediffmail.com

Website: www.rameshwaram.biz