

Client Registration Kit

Broking & Depository Services
(Individual & Non Individual)



Moneypalm

NAME OF CLIENT : _____

UNIQUE CLIENT CODE : _____

CDSL - CLIENT ID : _____

BRANCH : _____

RM / CRM EXECUTIVE / REMISER NAME : _____



Moneypalm Brokers Private Limited

CONTACT DETAILS

Compliance Officer Details	Mr. Mohit Gupta Ph.: +91-124-4342014, E-mail : mohitgupta@moneypalm.in
CEO Details	Mr. Nirdosh Gaur Ph.: +91-124-4342000, E-mail : ceo@moneypalm.in
Registered Office :	401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002 Phone: +91-124- 4342000 Fax : +91-124-4342028 Email: info@moneypalm.in Website: www.moneypalm.in
Corporate Office :	401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002 Phone: +91-124- 4342000 Fax : +91-124-4342028 Email: info@moneypalm.in Website: www.moneypalm.in

Exchange / Depository	Segment	SEBI Regn. No.	Date
NSE	Cash	INZ000238435	30.07.2012
NSE	F&O (TM)	INZ000238435	30.07.2012
NSE	Currency Derivatives (TM)	INZ000238435	30.07.2012
BSE	Cash	INZ000238435	16.08.2012
BSE	F&O (TM)	INZ000238435	16.08.2012
CDSL	Depository	IN-DP-CDSL-667-2012	15.11.2012

For any grievance/dispute please contact MONEYPALM BROKERS PRIVATE LIMITED at the above address or email id-complaint@moneypalm.in and Phone No. +91-124-4342000. In case not satisfied with the response, please contact the concerned exchange(s) at:

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

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

- Register on SCORES portal
- Mandatory details for filing complaints on SCORES: i.e. Name, Pan, Address, Mobile Number, Email ID
- Benefits:
 - Effective communication
 - Speedy redressal of the grievances

ANNEXURE - I
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.	1-5
		B. FATCA & CRS Declaration	6-8
		C. Document captures the additional information about the constituent relevant to trading account.	9-11
2.	Tariff Sheet	Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock exchange(s)	12
3.	Rights and Obligations	Document stating the Rights & Obligations of Stock Broker/ Commodity Broker/Depository Participant/TradingMember, 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 / Commodity 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.	13
2.	Running Account Authorisation	Helps the client to enjoy exposures linked to the credit in the trading account.	14
3.	Letter of Authority	Authorisation for smooth functioning of Trading A/c	15
4.	Request for Activation in MCX Option	Request for Activation in MCX Option	16
5.	Categorization of Participants in Commodity Derivatives Market	Categorization of Participants in Commodity Derivatives Market	17
6.	Applicable Only for Commodities	Applicable Only for Commodities	18
7.	Declaration for Name Discrepancy in PAN Card, Bank Proof & Address Proof	Declaration	19
1.	CDSL Form (Individual)	Where the client wishes to open a demat account with us as CDSL DP	20-34

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

CLIENTS OPTION FOR RECEIVING DOCUMENTS

To,

Moneypalm Brokers Private Limited

Dated _____

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002




Dear Sir/ Madam,

I hereby opt to get the document listed below in -

Electronic Form Physical Form

1. Rights and Obligations of Stock Brokers, Sub-brokers and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
2. Risk Disclosure Document for Capital Market and 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. Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI & Depositories.
6. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us. Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully,

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

ACKNOWLEDGEMENT FROM CLIENT FOR RECEIPT OF PHYSICAL DOCUMENTS

To,

Moneypalm Brokers Private Limited

Dated _____




401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Dear Sir/ Madam,

I/We hereby acknowledge receipt of the following documents

1. Rights and Obligations of Stock Brokers, Sub-brokers and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
2. Risk Disclosure Document for Capital Market and 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. Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI & Depositories.
6. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us. Further I confirmed that the documents for KYC submitted by me are true and correct.

Yours faithfully,

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

4. CURRENT ADDRESS DETAILS (Please refer instruction **B** at the end)

- Same as above mentioned address (in such cases address details as below need not to be provided)
- I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)
- A- Passport Number
 - B- Voter ID Card
 - C- Driving Licence
 - D- NREGA Job Card
 - E- National Population Register Letter
 - F- Proof of possession of Aadhaar
- II. E- KYC Authentication
- III. Offline verification of Aadhaar
- IV. Deemed Proof of Address - Document type Code

Address

Line 1*

Line 2

Line 3 City / Town / Village*

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

 5. CONTACT DETAILS (All communications will be sent to Mobile number / Email-ID provided) (Please refer instruction **C** at the end)

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

Email ID

 6. REMARKS (If any)**7. APPLICANT DECLARATION**

- 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.



Signature / Thumb Impression of Applicant

Date : -- Place :

8. ATTESTATION / FOR OFFICE USE ONLY

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

KYC VERIFICATION CARRIED OUT BY

Date

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

INSTITUTION DETAILS

Name **MONEYPALM BROKERS PRIVATE LIMITED**
 Code

[Institution Stamp]

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

Important Instructions:

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



For office use only

(To be filled by financial institution)

Application Type*

New Update

KYC Number

(Mandatory for KYC update request)

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

Name*

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

Date of Incorporation / Formation* DD - MM - YY YY Date of Commencement of Business DD - MM - YY YY

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

PAN* Form 60 furnished

TIN / GST Registration Number

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

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

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

Memorandum and Articles of Association Partnership Deed Trust Deed

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

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

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

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

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

Line 1*

Line 2

Line 3 City / Town / Village*

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

3.1 Registered Office Address / Place of Business*

Line 1*

Line 2

Line 3 City / Town / Village*

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

4. CONTACT DETAILS (All communication will be sent to Mobile number / E-mail ID provided may be used) (Please refer instruction **D** at the end)

Tel. (Off) - FAX -

Mobile - Email ID

Mobile - Email ID

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

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	Residential / Registered Address	DIN of whole time directors / Aadhaar number of Promoters / Partners / Karta	Photograph
1.					DIN : UID :	
2.					DIN : UID :	
3.					DIN : UID :	
4.					DIN : UID :	
5.					DIN : UID :	



Name & Signature of the Authorised Signatory(ies)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

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 <i>(TIN or other, please specify)</i>
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

Moneypalm Brokers Private Limited	FATCA & CRS Declaration - Non Individual
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PAN <input style="width:90%;" type="text"/>	Trading Code <input style="width:90%;" type="text"/>	DP Code <input style="width:90%;" type="text"/>
Name <input style="width:95%;" type="text"/>		

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 ⁶	Identification Type (TIN or Other ⁷ , please specify)
1.			
2.			
3.			

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

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

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

1. We are a, Financial institution <input type="checkbox"/> (Refer 1 of Part C) or Direct reporting NFE <input type="checkbox"/> (Refer 3(vii) of Part C) (please tick as appropriate)	GIIN <input style="width:80%;" type="text"/> 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 _____ _____ <input type="checkbox"/> Applied for <input type="checkbox"/> Not obtained – Non-participating FI <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <input style="width:20px;" type="text"/> (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 <input type="checkbox"/> (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 <input type="checkbox"/> (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: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company Name of stock exchange _____
3. Is the Entity an active NFE (Refer 2c of Part C)	Yes <input type="checkbox"/> Nature of Business _____ Please specify the sub-category of Active NFE <input style="width:20px;" type="text"/> (Mention code – refer 2c of Part C)
4. Is the Entity a passive NFE (Refer 3(ii) of Part C)	Yes <input type="checkbox"/> 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):

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

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). *(Please attach additional sheets if necessary)*
 Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details 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"/> 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 Moneypalm Brokers Private Limited 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 :

Place :

For Investor convenience, Moneypalm Brokers Private Limited collecting this mandatory information for updating across all Group Companies of Moneypalm Brokers Private Limited 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 Moneypalm Brokers Private Limited branch or you can dispatch the hard copy to-

Moneypalm Brokers Private Limited
401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

• For Detail Terms & Conditions please visit www.moneypalm.in

ANNEXURE - 3

TRADING ACCOUNT RELATED DETAILS FOR INDIVIDUAL & NON-INDIVIDUAL

A. BANK ACCOUNT(S) DETAILS (Through which transactions shall generally be routed)

Bank Name	Branch Address	Account Number	Account Type	MICR Number	IFSC Code
			<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			MCX BSE & NSE
All Segments	Cash	F&O	Currency	Commodity Derivatives
	<input checked="" type="checkbox"/> 7a	<input checked="" type="checkbox"/> 7b	<input checked="" type="checkbox"/> 7c	<input checked="" type="checkbox"/> 7d

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 <input checked="" type="checkbox"/> Online
---	---

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 : Private Sector Public Sector Government Service Business Professional
one and give brief details) 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.....

.....

.....

Name.....

Designation.....

PAN.....

UID.....

Residential Address.....

.....

.....

Signature.....

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.moneypalm.in

Place _____

Date _____



Signature of Client

DISCLOSURE OF PROPRIETARY TRADING BY MBPL

Dear Client,

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

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

Kindly take note of the above & oblige.



Sole / First Applicant Signature

Date : _____

PMLA - DECLARATION

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



Sole / First Applicant Signature

Risk Category : Low Medium High

BROKERAGE STRUCTURE

EQUITY SEGMENT		
Brokerage Slab	Slab in %	Minimum per Share
Delivery Based		
Square Off		

F & O SEGMENT		
Brokerage Slab	Slab in %	Minimum per Share / Lot
Future		
Options		

CURRENCY DERIVATIVES SEGMENT		
Brokerage Slab	Slab in %	Minimum Brokerage per Lot
Future		
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 Moneypalm Brokers Private Limited
5. Charges quoted above are for the services listed. Any service not quoted above will be charged separately.
6. Minimum processing fees of Rs. 20/- will be charged for each day of trade.

Signature of Client



ELECTRONIC CONTRACT NOTE (ECN) DECLARATION

To,

Money palm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Dear Sir,

I _____ a client code _____ with member M/S. **MONEYPALM BROKERS PRIVATE LIMITED** of **NSE, BSE & MCX** 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.

Signature of Client  _____

Date : _____ Place: _____

RUNNING ACCOUNT AUTHORISATION

To,

Date : _____

Moneypalm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Sub : Running Account Authorisation

I/We are dealing through you as a client in Capital Market / Future & Option Segment / Currency 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.

 _____

LETTER OF AUTHORITY

To,

Money palm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Date : _____

Sub : Letter of Authority

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

1. Delivery of order/trade confirmation/cancellation :

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

2. Telephonic Conversation :

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

3. Set off of outstanding:

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

4. Charges & Balance Maintenance :

I/We have a Trading As well as depository relationship with Money palm Brokers Private Limited 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

 _____

REQUEST FOR ACTIVATION IN MCX OPTION

To,
Moneypalm Brokers Private Limited

Date : _____

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Dear Sir/Madam,

- I/We _____ am/are having a trading account with you vide Unique Client Code _____ for trading in commodity futures on MCX.
- I/We am/are desirous to trade in commodity options on MCX and request you to add following Trading Preference to my existing details with you :

EXCHANGE	Tick	SIGNATURE
Commodity Options on MCX	<input type="checkbox"/>	

- I/We agree to the following rate of brokerage for

Serial No.	Brokerage (Per Lot)	Minimum Brokerage
Commodity Option		

I/We understand that brokerage rates stated above are exclusive of any legal levy namely STT, GST and Stamp Duty etc. or charges namely Exchange Transaction Charges, SEBI Fee, Clearing Member Charges etc. which shall be charged separately at the rates applicable from time to time.

- I/We confirm that there is not change in respect of my/our KYC details namely, PAN Details, Address, Bank Account Details and Demat Account Details provided to you earlier and you requested to use the same for additional segment(s)/ Exchange(s) opted by me as above.
- I/We confirm that I/We have 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 hereby request Moneypalm Brokers Private Limited to apply all the voluntary authorizations given earlier to the additional segment(s)/Exchange(s) opted above.
- I/We also confirmed of having informed that the standard set of documents has been displayed or information by Moneypalm Brokers Private Limited on its website www.moneypalm.in

Please enable me to deal/trade on segment(s) opted above.

Yours Sincerely,

Client Name _____

 _____

Client Signature

Encl.: Proof of Financial Details

For Office Use Only

Activated on _____

Activated By _____

CATEGORIZATION OF PARTICIPANTS IN COMMODITY DERIVATIVES MARKET

To,

Date : _____

Money palm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Sub.: Declaration regarding Categorization of Participants in Commodity Derivatives Market

Dear Sir/Madam

This is to certify and declare that I/We _____
 are registered Client of Money palm Brokers Private Limited under UCC _____
 in Commodity Derivatives Segment of Multi Commodity Exchange of India Ltd. Further as per SEBI Circular No. SEBI/HO/CDMRD/DNPMP/CIR/P/2019/8, dated 04th January, 2019 & MCX Circular No. MCX/TRD/007/2019 dated January 4, 2019, following category of Market Participant is applicable to me.

- 1) **Farmers/FPO** **Commodities Interested in** _____
- 2) **Value Chain Participants (VCPs)** **Commodities Interested in** _____
- 3) **Proprietary Traders** **Commodities Interested in** _____
- 4) **Domestic Financial Institutional Investors** **Commodities Interested in** _____
- 5) **Foreign Participants** **Commodities Interested in** _____
- 6) **Others** **Commodities Interested in** _____

Yours faithfully,



Client Signature




Client UCC _____

Client Name _____

PAN No. _____

APPLICABLE ONLY FOR COMMODITIES

- I/We declare that I/We intend to trade in all commodities and I/We confirm that I/We am/are categorized as 'Others' for all commodities and not as 'Farmer' or Value Chain Participant (VCP) or foreign participant (FP) which requires detailed commodity categorization.
- I/We have taken cognizance of circulars issued by Commodity E:xchanges/SEBI from time to time on the guidelines for calculation of net open positions permitted in any commodity and I/we hereby undertake to comply with the same. I/We hereby declare and undertake that I/We will not exceed the position limits prescribed from time to time by Commodity Exchanges or SEBI and such position limits will be calculated in accordance with the circulars on position limits as modified from time to time. I/We undertake to inform you and keep you informed if any of our partners/directors/karta/trustee or any of the partnership firms/companies/HUFs/ Trusts in which I/We or any of above such person is a partner/director/karta/trustee, takes or holds any position in any commodity forward contract/commodity derivative on Exchanges through you or through any other member(s) of Exchanges to enable you to restrict our position limit as prescribed by the applicable circular of E:xchanges/SEBI as modified from time to time. I/We confirm that you have agreed to enter orders in commodity forward contracts/commodity derivatives for me as your clients on Commodity Exchanges only on the basis of our above assurances and undertaking. I/We further undertake to bear any liable/penalty/charges levied by Commodity Exchanges / SEBI. In this connection I/we understand that I/We shall submit the details of the entities with which I/We am related in a separate annexure with the details on Name, Client code and Relation.
- I/We undertake to abide by all terms and conditions provided in 'Rights and obligations' document(s), 'Risk Disclosure Document, Additional Risk Disclosure documents for Options Trading and 'Guidance Note including commodities' and such other documents being part of the Account Opening Form and also available on our website at <https://www.moneypalm.in/>

	1st Holder	2nd Holder	3rd Holder
Name			
Signature			

For Office Use Only

I/ We hereby updated the above details as furnished by the client.

Name & Signature of Authorized Signatory

Stamp of Stock Broker

Date :.....

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

To,

Date : _____

Moneypalm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

I _____ s/o, w/o, d/o _____
 _____, refer to my Trading Account
 _____ with Moneypalm Brokers Private Limited (MBPL) do hereby affirm,
 declare and undertake that

1. That my name as it appears on my Pan Card is _____
2. That my name as it appears on the Income Tax website is _____
3. Additional ID Proof _____
4. That my name as it appears on the Address proof is _____
5. That my name as it appears on the Bank Proof is _____
6. That above mentioned names, on Trading account, Tax website, Address proof, PAN Card No. _____ and Bank account bearing no. _____ are mine alone.
7. That I hereby request MBPL to maintain my name in Demat and Trading account as per the name appearing on the website / PAN card.
8. 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. MBPL may, at its sole discretion, terminate my trading and demat account in the event of me not getting my name altered within 45 days of signing this undertaking.
9. 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.
10. 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 MBPL.
11. That I further declare that I am responsible and I shall indemnify & keep indemnified MBPL, 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 MBPL is by my absolute free will and not by coercion, undue influence, pressure etc., and at present I am having sound health and mind.

 Signature of Client :  _____

APPLICATION FOR OPENING DEPOSITORY ACCOUNT - INDIVIDUAL & NON-INDIVIDUAL CDSL

(To be filled by the Depository Participant)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.										
DP ID	1	2	0	7	5	2	0	0	Client ID	

 (To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/our name as per following details :

HOLDERS DETAILS

Sole/First Holder's Name	PAN																		
	UID																		
UCC	Exchange : National Stock Exchange of India Ltd. (08538) Bombay Stock Exchange Ltd. (3034)																		
Second Holder's Name	PAN																		
	UID																		
Third Holder's Name	PAN																		
	UID																		
Search Name																			

Name* _____

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

TYPE OF ACCOUNT (Please tick whichever is applicable)

<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual Director	<input type="checkbox"/> Individual Director's Relative
	<input type="checkbox"/> Individual HUF / AOP	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Minor
	<input type="checkbox"/> Individual Margin Trading A/c (Mantra)	<input type="checkbox"/> Others (Specify) _____	
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable	<input type="checkbox"/> NRI Repatriable Promoter
	<input type="checkbox"/> NRI Non-Repatriable Promoter	<input type="checkbox"/> NRI - Depository Receipts	<input type="checkbox"/> Others (Specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National-Depository Receipts	<input type="checkbox"/> Others (Specify) _____

Status										Sub-Status (To be filled by the DP)				
<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Banks	<input type="checkbox"/> Trust	<input type="checkbox"/> Mutual Fund	<input type="checkbox"/> OCB	<input type="checkbox"/> FII									
<input type="checkbox"/> CM	<input type="checkbox"/> FI	<input type="checkbox"/> Clearing House	<input type="checkbox"/> Other (Specify) _____											
SEBI Registration No. (if applicable)		SEBI Registration Date	D	D	M	M	Y	Y	Y	Y				
RBI Registration No. (if applicable)		RBI Approval Date	D	D	M	M	Y	Y	Y	Y				
Nationality	<input type="checkbox"/> Indian	<input type="checkbox"/> Others (specify) _____												

OTHER 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)

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

Please tick, if applicable.
 Politically Exposed Person (PEP) Related to Politically Exposed Person (RPEP) (Please provide details as per annexure 2.2A)
 Any other information :

DETAILS OF GUARDIAN (in case the account holder is minor)

Guardian's Name											PAN										
Relationship with the applicant																					
I/We instruct the DP to receive each and every credit in my/our account (if not marked, the default option would be 'Yes')	[Automatic Credit]										Yes <input type="checkbox"/>	No <input type="checkbox"/>									
I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end. (If not marked, the default option would be 'No')											Yes <input type="checkbox"/>	No <input type="checkbox"/>									
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly																				
I/We request you to send Electronic Transaction-cum-Holding Statement at the email Id _____											Yes <input type="checkbox"/>	No <input type="checkbox"/>									
I/We would like to share the email ID with the RTA											Yes <input type="checkbox"/>	No <input type="checkbox"/>									
I/We would like to receive the Annual Report (Tick the applicable box. If not marked the default option would be in Physical)	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical & Electronic																				
I/We wish to receive dividend/interest directly in to my bank account as given below through ECS. (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]											Yes <input type="checkbox"/>	No <input type="checkbox"/>									
<input type="checkbox"/> I wish to opt BSDA Account. <input type="checkbox"/> I do not wish to opt BSDA Account																					
CAS Mode : <input type="checkbox"/> Physical CAS Required <input type="checkbox"/> CAS not Required																					

BANK DETAILS (Dividend Bank Details)

Bank Code (9 digit MICR Code)																							
IFS Code (11 Character)																							
Account Number																							
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify) _____																						
Bank Name																							
Branch Name																							
Bank Branch Address																							
City						State						Country						PIN					

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque books is issued, (or)
 - (ii) Photocopy of the Bank Statement having name and address of the BO.
 - (iii) Photocopy of the Passbook having name and address of the BO, (or)
 - (iv) Letter from the Bank.
- In case of option (ii), (iii) and (iv) above, MICR Code of the branch should be present/mentioned on the document.

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

MODE OF OPERATION FOR EXECUTION OF TRANSACTIONS (Transfer, Pledge & Freeze)

Jointly
 Anyone of the Holder

Consent for Communication to be received by first Account Holder : (Tick the applicable box. If not marked the default option would be **first holder**.)

<input type="checkbox"/> First Holder	<input type="checkbox"/> All Holder	Email Id :
	<input type="checkbox"/> Second Holder	
	<input type="checkbox"/> Third Holder	






CLEARING MEMBER DETAILS (To be filled by CMs only)

Name of Stock Exchange			
Name of CC / CH			
Clearing Member ID	Trading Member ID		

DECLARATION

I/We have received and read the Rights and Obligations document of BO-DP (DP-CM agreement for BSE Clearing Member Accounts) including the schedules thereto and the terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

SIGNATURE'S OF HOLDER / DIRECTOR / AUTHORISED SIGNATORIES (Enclosed a Board Resolution for Authorised Signatories)

Holder	Name	Designation	Signature(s)
Sole / First Holder / Authorised Signatory			
Second Holder/ Authorised Signatory			
Third Holder/ Authorised Signatory			
Other Holders			
Second Holder			
Third Holder			

(Signatures should be preferably in blue ink) (In case of more authorised signatories, please add annexure)

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] %	%	%
<i>Any odd lot after division shall be transferred to the first nominee mentioned in the form.</i>			
3. Relationship with the Applicant (if any)			
4. Address of Nominee(s) City / Place State / Country PIN Code			
5. Mobile/Telephone No. of Nominee(s)			
6. Email ID of nominee(s)			
7. Nominee Identification details - [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> AADHAAR <input type="checkbox"/> Saving Bank 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			
-----	--	--	--	--

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

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

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

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 Hindu Undivided Family, 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 Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
4. In case of joint account, on death of any of the joint account holders, the surviving account holder(s) has to inform Participant about the death of account holder(s) with required documents within one year of the date of demise.
5. In case if 'first holder' is selected, the communication will be sent as per the preference mentioned at Sr. No. 4. In case 'All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned at Sr. No. 4 and communication to other holders will be in electronic mode. The default option will be communication to 'first holder', if no option selected.
6. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
7. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
8. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
9. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
10. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto 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.
11. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
12. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure D.
13. Savings bank account details shall only be considered if the account is maintained with the same participant.
14. DP ID and client ID shall be provided where demat details is required to be provided.
15. All communication shall be sent at the address of the Sole/First holder only.
16. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
17. For receiving Statement of Account in electronic form:
 - I. Client must ensure the confidentiality of the password of the email account.
 - II. Client must promptly inform the Participant if the email address has changed.
 - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
18. Residual securities - in case of multiple nominees remaining after distribution of securities as per percentage of allocation.
19. Strike off whichever is not applicable.

DECLARATION FORM FOR OPTING OUT OF NOMINATION

To,
Moneypalm Brokers Private Limited

Dated _____

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

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.



.....
 First/Sole Holder Signature



.....
 Second Holder Signature



.....
 Third Holder Signature

STATEMENT OF ACCOUNT RECEIVING IN ELECTRONIC MODE

To,
Moneypalm Brokers Private Limited

Dated _____

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Re: Beneficial Owner(BO) Account No. _____

I/We _____ [name(s) of the BO(s)] had entered into DP BO agreement with you. I/we confirm having opted to receive the statement of accounts pertaining to our BO account in electronic mode in lieu of physical copy of the statement of account.

I/We confirm that the dispatch of statement of account to me/us at the following email address shall constitute full and absolute discharge of your obligation under the above agreement to provide me/us with statement of my/our BO account. But, I/we reserve my/our right to receive the physical copy of statement of accounts despite receiving the same in electronic mode, if such a demand is made in writing on you.

E-mail address : _____

I/we confirm that any change in the aforesaid email address or any other instructions with regard to dispatch/service of my/our statement of account on me/us shall not be binding upon you unless you are intimated in writing by me/us by acknowledged delivery.

Yours faithfully



.....
 First/Sole Holder Signature



.....
 Second Holder Signature



.....
 Third Holder Signature

Terms And Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL**(SMS Alerts will be sent by CDSL to BOs for all debits)****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 authorises 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/ unauthorised 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 unauthorised 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 authorisation, 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 Mumbai.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.

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

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

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

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

BOID	1	2	0	7	5	2	0	0								
	(Please write your 8 digit DPID)								(Please write your 8 digit Client ID)							

Sole / First Holder's Name : _____ Second Holder's Name _____ Third Holder's Name _____

Mobile Number on which message are to be sent

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

 (Please write only ONE valid email ID on which communications; if any, is to be sent)

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)

 _____
 First/Sole Holder Signature

 _____
 Second Holder Signature

 _____
 Third Holder Signature

Place : _____

Date : ____/____/20____

TARIFF SHEET - DP (SCHEDULE OF SERVICE CHARGES FOR DP SERVICES)
w.e.f. 1st October 2020

(Choose any one Scheme : AMC or NIL AMC Scheme)

Charge Head	Charges	
	Account with DDPI	Account without DDPI
Stamp Paper Charges	Nil	Nil
AMC- Individual (exclusive of GST)	<input type="checkbox"/> Rs. 360/-	Rs. 540/-
AMC- Corporate (exclusive of GST)	<input type="checkbox"/> Rs. 1020/-	Rs. 1500/-
NIL AMC SCHEME		NO SCHEME
For Individuals (exclusive of GST)	<input type="checkbox"/> Rs. 1000/-	
For Corporates (exclusive of GST)	<input type="checkbox"/> Rs. 2500/-	
Custody Charges	Nil	Nil
Transaction Charges(Buy)	Nil	Nil
Transaction Charges(Sell)	Rs. 10/- per Transaction. In case of NRI/OCB clients Rs. 15/- or .02% of the transaction value (whichever is higher)	
Off-Market Transactions	Rs. 15/- or .02% of the transaction value (whichever is higher)	
Failed Instruction	Nil	Rs. 20/- per instruction.
Pledge: Creation/Confirmation/ Closure/Invocation	Rs. 25/- or .02% of the transaction value (whichever is higher)	Rs. 25/- or .02% of the transaction value (whichever is higher)
Margin Pledge: Creation/Repledge/ Invocation	Margin pledge setup Rs. 15/- Margin repledge setup Rs. 15/-	Margin pledge setup Rs. 15/- Margin repledge setup Rs. 15/-
DEMAT	Re. 1/- per certificate (max Rs. 250/-) + Rs. 25/- courier charges	Rs. 2/- per certificate (max Rs. 250/-) + Rs. 25/- courier charges
DEMAT Rejections	Rs. 20/- per rejection + Rs. 25/- courier	Rs. 20/- per rejection + Rs. 25/- courier
REMAT Charges	a) A fee of Rs. 15/- for every 100 securities or part thereof. OR b) A flat fee of Rs. 15/- per certificate, whichever is higher.	a) A fee of Rs. 15/- for every 100 securities or part thereof. OR b) A flat fee of Rs. 15/- per certificate, whichever is higher.
Delivery Instruction Book	Nil	Rs. 25/- No charges for first book.
Fax Indemnity (Optional)	Actual	Actual

AMC - Individual based on holding valuation (Valid only for clients opting for Basic Service Demat Account (BSDA))

Holding Value	Charges	Charges
a. Upto 50,000	Nil	Nil
b. From 50,001 to 2,00,000 (exclusive of GST)	Rs. 100/-	Rs. 100/-
c. Over & above 2,00,000 (exclusive of GST)	Rs. 350/-	Rs. 350/-

All other charges shall remain same as above mention tariff.
Note :

- In case of delays in the payment of charges, the demat account will be frozen for all operations till such time all dues are cleared subject to 30 days notice from the payment due date.
- All instructions for transfer must be received in physical form from the clients upto 4:00pm on "T+1" for pay in of securities Late instructions would be accepted at the account holder's sole risk and responsibility.
- Charges are subject to revision at company's sole discretion and as per revisions in CDSL charges and are subject to 30 days notice from the date of applicability.
- All payments to be made in the name of "Moneypalm Brokers Private Limited" via a Cheque/DD payable at the local branch where the account is opened Outstation cheques will not be accepted.
- Any advance payment over and above the normal amount due can also be made. Any such higher amount paid than the minimum amount payable at the time of account opening shall be adjusted against the bills raised from time to time.
- Upfront payment of Rs. 5000/- for Minor Accounts.
- It may be noted that in the event of demat account closure or shifting of demat account to another DP, the upfront annual AMC collected is refundable to the extent of balance quarter(s).

CHARGES ON NON - PAYMENT OF DUES:	
Penalty and Interest Charges	A penalty of 1.5% per month the value outstanding on the bill after one month from the due date.
Non-Payment of bill after 30 days	Temporarily the Depository Services will be withdrawn from the payment due date. The renewal charges for resuming the Services will be Rs. 100/- per account.

For Existing Client Only	BO ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	UCC	<input type="text"/>			
Cancel my BSDA facility if already activated												<input type="checkbox"/>	Yes	<input type="checkbox"/>	No



First/Sole Holder Signature



Second Holder Signature

(28)



Third Holder Signature

DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI)

To all to whom these presents shall come I/We..... having Address at, send greetings.

Whereas I/ we hold beneficial owner account number DP Id I2075200 Client Id 00.....with M/s. Money palm Brokers Private Limited, through 401-403, 4th Floor, JMD Regent Square, M.G. Road, Gurugram-122002, Haryana. registered with Securities and Exchange Board of India (SEBI) and bearing SEBI Registration No. INZ000238435.













S.No.	PURPOSE	Signature of Client
1.	<p>Transfer of securities held in the my/our account towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by me/us on the Stock Exchange through the Money palm Brokers Private Limited.</p> <p>(as Demat Details Mentioned in Table – I)</p>	<div style="text-align: center;">  First/Sole Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Second Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Third Holder Signature </div>
2.	<p>Pledging / re-pledging of securities in favor Money palm Brokers Private Limited (TM)/Globe Capital Market Limited (CM) for the purpose of meeting margin requirements of me/us in connection with the trades executed by the me/us on the Stock Exchange.</p> <p>(as Demat Details Mentioned in Table – II)</p>	<div style="text-align: center;">  First/Sole Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Second Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Third Holder Signature </div>
3.	<p>Mutual Fund transactions being executed through Money palm Brokers Private Limited on Stock Exchange order entry platforms.</p>	<div style="text-align: center;">  First/Sole Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Second Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Third Holder Signature </div>
4.	<p>Tendering shares in open offers through Money palm Brokers Private Limited on Stock Exchange platforms</p>	<div style="text-align: center;">  First/Sole Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Second Holder Signature </div> <div style="text-align: center; margin-top: 10px;">  Third Holder Signature </div>

Table - I

ACCOUNT TYPE	CM BP ID	DP NAME	DP ID	CLIENT ID
CDSL NSE CM Pool A/c		Moneypalm Brokers Private Limited	12075200	00000030
NSDL NSE CM Pool A/c	IN518897	Globe Capital Market Limited	IN300966	10596882
NSDL BSE CM/Early pay-in/ Pool A/c	IN665125	Globe Capital Market Limited	IN300966	10600874
NSE Early Pay-in A/c		NSCCL-Moneypalm Brokers Private Limited	11000011	00019401
CDSL CLIENT UNPAID SECURITIES PLEDGE A/C		CUSPA-Moneypalm Brokers Private Limited	12075200	00027798

Table - II

ACCOUNT TYPE	CM BP ID	DP NAME	DP ID	CLIENT ID
TM/CM-Client Securities Margin Pledge Account		Moneypalm Brokers Private Limited	12075200	00025864
TM/CM-Client Securities Margin Re-Pledge Account		Globe Capital Market Limited	12020600	01410161
TM Pool Account		Moneypalm Brokers Private Limited	12075200	00027730

In the presence of	
1st Witness	2nd Witness
Name :	Name :
Address :	Address :
Signature :	Signature :

I/We further agree and confirm that the powers and authorities conferred by this DDPI deed shall continue until it is revoked by giving notice in writing by me and that the said revocation shall be effective from the date on which the revocation notice is received by the stock broker in his office at 401-403, 4th Floor, JMD Regent Square, M.G. Road, Gurugram-122002, Haryana.

Signed and delivered by the within named Beneficial Owner/s



.....
First/Sole Holder Signature



.....
Second Holder Signature



.....
Third Holder Signature

I/We Accept,
For **MONEYPALM BROKERS PRIVATE LIMITED**

(Authorized Signatory)

*This DDPI deed acceptable after the physically or digitally signed by all account holder/s

OPTION FORM FOR ISSUE OF DIS BOOKLET

DP ID	1	2	0	7	5	2	0	0	Client ID							
First Holder Name																
Second Holder Name																
Third Holder Name																

To,

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

Moneypalm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Dear Sir / Madam,

I / We hereby state that : [Select one of the options given below]

OPTION 1 :




I / We request you to issue Delivery Instruction Slip (DIS) booklet to me / us on opening my / our CDSL account through I / We have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager.

OR

OPTION 2 :

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later day.

Yours faithfully

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

MOBILE NO. AND E-MAIL ID DECLARATION BY FAMILY ACCOUNT

To,

Date : _____

Moneypalm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

We are having following trading & demat accounts with Moneypalm Brokers Private Limited We do hereby declare that our family contact no. is _____ and our family E-mail id is _____.

We hereby authorize Moneypalm Brokers Private Limited to send us any information such as alert/SMS/call/ email etc. at above mentioned contact no. and email id.

We declare that this contact no. and E-mail id belong to our family consisting of persons as per following detail.

S.No.	Code	Name	Relation

I hereby declare that the aforesaid mobile number or E-mail ID belongs to Me or My Family
(Spouse, dependent children and dependent parents)

I further declare that the above mentioned statement is true and correct.

Yours Faithfully,



(Client Signature)

DECLARATION BY HUF

To,

Date : _____

Moneypalm Brokers Private Limited

401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

DP ID	1	2	0	7	5	2	0	0	Client ID								
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As our HUF firm wishes to open an account with your DP in the said name _____ we beg to say that the first signatory to this letter, Mr _____ 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 the DP 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 the DP 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.

Your's Sincerely

Name & signature of Karta

**Name & Signature of Adult Co-parceners and date of birth of Minor Co-parceners
(Use Annexure for Additional Members)**

S.No.	Name	Sex	Relation with Karta	Date of Birth	Signature
1.					⊗ _____
2.					⊗ _____
3.					⊗ _____
4.					⊗ _____

**FORMAT OF BOARD RESOLUTION TO BE GIVEN BY CORPORATE CLIENT
(TO BE PRINTED ON LETTER HEAD OF COMPANY)**
**CERTIFIED TRUE COPY OF EXTRACTS OF THE MINUTES OF THE MEETING OF THE BOARD
OF DIRECTORS OF _____ (Co. Name) CONVENED ON**
THE _____ (date) / TIME AT _____
_____ (Venue)

"RESOLVED THAT an account for the purpose of trading in Securities be opened with M/s. **Moneypalm Brokers Private Limited**, Member - National Stock Exchange of India Ltd. / Bombay Stock Exchange Ltd., hereinafter referred to as the Broker, for undertaking sale & purchase of Securities on the said exchange(s).

FURTHER RESOLVED THAT Shri _____ and Shri _____, Directors of the Company, be and are hereby, authorised severally to do all such acts, deeds, things and sign all documents papers, authorisations, agreements etc. as may be necessary for opening and operating the said account with Broker.

FURTHER RESOLVED THAT the aforementioned Directors, be and are hereby, authorised severally, to give instructions on behalf of the Company, for conducting trading in securities for and on behalf of the Company.

FURTHER RESOLVED THAT, a copy of this resolution be forwarded to the Broker by Shri _____ or Shri _____ Directors, & the Broker, be instructed to honour the instructions of Shri _____ and / or Shri _____, Directors of the Company to carry on trading in Securities.

Certified true copy

For (Name of the Company)

 Dated :

--	--	--	--	--	--	--	--

Director

 Place :

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FORMAT OF DECLARATION TO BE GIVEN BY PARTNERSHIP FIRM ON LETTER HEAD OF THE FIRM

To,
Moneypalm Brokers Private Limited Date _____
401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Dear Sir,

We refer to the trading account being opened / opened with you in the name of _____ and declare and authorise you as under.

We recognize that a beneficiary account cannot be opened with a depository participant in the name of a partnership firm as per applicable law. To facilitate the operation of the above trading account with you and for the purpose of completing the Securities transfer obligations pursuant to the trading operations, we authorise you to recognize the beneficiary account No. _____ with depository _____ opened as a joint account in the names of the partnership of the firm.

We agree that the obligations for Securities purchased and/or sold by the firm will be handled and completed through transfer to/from the above mentioned account. We recognize and accept transfers made by you to the beneficiary account as complete discharge of obligations by you in respect of trades executed in the above Securities trading account of the firm.

We hereby authorize _____, partner in the firm to execute/sign and submit such documents, agreements, deeds etc. as may be necessary to enter into the agreement and engage in business with Moneypalm Brokers Private Limited, and to place order for buying and selling of Securities, sell, purchase, transfer, endorse, negotiate and do other things that may be necessary to engage in business on behalf of the partnership and to sign the authority letter for adjustment of balances in family accounts.

Name of Partners (in block letters)	Signature

FOR OFFICE USE ONLY

Branch Code :	Group Code :
Sub Branch :	Intro Code :
Tele Verification :	
CKYC Reference No.:	KYC Reference No.:

I.	CHECKING DETAILS	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"/>	
2.	Cross Checking done by TM _____ DP _____	
3.	Details Punched in Computer by TM _____ DP _____	
4.	UCC UPLOADED : <input type="checkbox"/> NSE Cash <input type="checkbox"/> NSE F&O <input type="checkbox"/> NSE Currency <input type="checkbox"/> BSE Cash <input type="checkbox"/> BSE F&O	
5.	Client Instruction Book issued by	
6.	Client Account Status Report issued by	
	<div style="border: 1px solid black; border-radius: 15px; padding: 5px; width: fit-content;"> DETAILS VERIFIED FROM UNSC LIST & SEBI DEBARRED ENTITY LIST </div>	
	<div style="border: 1px solid black; border-radius: 15px; padding: 5px; width: fit-content;"> Signature </div>	



Moneypalm Brokers Private Limited

Registered Office : 401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Corporate Office : 401-403, 4th Floor, JMD Regent Square, MG Road, Gurgaon, Haryana-122002

Phone: +91-124- 4342000 **Fax :** +91-124-4342028

Email: info@moneypalm.in **Website:** www.moneypalm.in

ACKNOWLEDGEMENT

Moneypalm Brokers Private Limited

Depository Participant : CDSL • DP ID 12075200

401-403, 4th Floor, JMD Regent Square,
MG Road, Gurgaon, Haryana-122002

Received the application from Mr/Ms _____ as the sole/first holder alongwith
_____ and _____ as the second
and third holders respectively for opening of a depository account. Please quote the DP ID & Client ID allotted to you in all your
future correspondence.

Date :

--	--	--	--	--	--	--	--	--	--

Participant Stamp & Signature