



CLIENT REGISTRATION KIT



ABHINANDAN STOCK BROKING PVT. LTD.

Depository Participants : Central Depository Services (India) Limited
Regd. Office : CITY POINT, 95, Sarat Bose Road, 3rd Floor, Kolkata - 700 029
Phone : 4005-5430 ❖ Fax : (033) 4005-5430 ❖ E.mail : info@abhinandangroup.com
Website : www.abhinandangroup.com ❖ CIN : U65100WB2010PTC153196
DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016

Client Name :

Client ID :

Registration Date:.....



CDSL
Your Depository

ABHINANDAN STOCK BROKING PVT. LTD.

Regd. Office : 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata – 700 029
 Telefax : +91 33 4005-5430, E.mail : info@abhinandangroup.com
 Website : www.abhinandangroup.com, CIN : U65100WB2010PTC153196
 Investors' Complaints Redressal E.mail : complaints@abhinandangroup.com
DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016



(To be filled by the Depository Participant)

Acknowledgement Receipt

Application No. :

Date :

We hereby acknowledge the receipt of the Account Opening Application Form :

Name of the Sole / First Holder	
Name of Second Holder	
Name of Third Holder	

For **ABHINANDAN STOCK BROKING PVT. LTD.**

Seal and Signature

Authorised Signatory

Acknowledgement Receipt

Received Nomination Form from :

DP ID	1	2	0	8	2	8	0	0	Client ID								
Name																	
Address																	
Nomination in favour of																	
No Nomination	<input type="checkbox"/> Does not wish to nominate																
Registration No.									Registered on	D	D	M	M	Y	Y	Y	Y

For **ABHINANDAN STOCK BROKING PVT. LTD.**

Seal and Signature

Authorised Signatory

Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

DP ID	1	2	0	8	2	8	0	0	Client ID							
Name of the Sole / First Holder																
Name of Second joint Holder																
Name of Third joint Holder																

For **ABHINANDAN STOCK BROKING PVT. LTD.**

Seal and Signature

Authorised Signatory

**ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT
(FOR INDIVIDUALS)**



ABHINANDAN STOCK BROKING PVT. LTD.

Regd. Office : 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata – 700 029

Telefax : +91 33 4005-5430, E.mail : info@abhinandangroup.com

Website : www.abhinandangroup.com, CIN : U65100WB2010PTC153196

DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016

(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	8	2	8	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 the following details: -

Holders Details																										
Sole/ First Holder's Name												PAN														
												UID														
Second Holder's Name												PAN														
												UID														
Third Holder's Name												PAN														
												UID														
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)																										
Status	Sub-Status																									
<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)____																	

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] <input type="checkbox"/> Yes <input type="checkbox"/> No			
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')								<input type="checkbox"/> Yes <input type="checkbox"/> No			
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 _____								<input type="checkbox"/> Yes <input type="checkbox"/> No			
I/ We would like to share the email ID with the RTA								<input type="checkbox"/> Yes <input type="checkbox"/> No			
I / We would like to receive the Annual Report				<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic							
(Tick the applicable box. If not marked the default option would be in Physical)											
Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository Participant (Tick any one)											
								<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form			
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]								<input type="checkbox"/> Yes <input type="checkbox"/> No			
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 code			
(i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book 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 options (ii), (iii) and (iv) above, MICR code of the branch should be present/mentioned on the document.											
OTHER DETAILS - Gross Annual Income Details											
Income Range per annum			<input type="checkbox"/> Upto ₹ 1 Lac <input type="checkbox"/> ₹ 1 Lac to ₹ 5 Lac <input type="checkbox"/> ₹ 5 Lac to ₹ 10 Lac								
			<input type="checkbox"/> ₹ 10 Lac to ₹ 25 Lac <input type="checkbox"/> More than 25 Lacs								
Net-worth as on (Date)			D	D	M	M	Y	Y	Y	Y	₹
(Net worth should not be older than 1 year)											
Occupation			<input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture								
			<input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others _____								

Please tick, if applicable		<input type="checkbox"/> Politically Exposed Person (PEP)	
		<input type="checkbox"/> Related to Politically Exposed Person (RPEP)	
Any other information			
SMS Alert Facility	MOBILE NO. +91 _____		
Refer to Terms & Conditions given as Annexure - 2.4	[[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).		
Transactions Using Secured Texting Facility (TRUST): Refer to Terms and Conditions Annexure – 2.6			
I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility.			
I have read and understood the Terms and Conditions prescribed by CDSL for the same.			<input type="checkbox"/> Yes <input type="checkbox"/> No
I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST.			
Stock Exchange Name/ID			
Clearing Member Name			
Clearing Member ID (Optional)			
Easi	To register for <i>easi</i> , please visit our website www.cdslindia.com . <i>Easi</i> allows a BO to view his ISIN balances, transactions and value of the portfolio online.		
Nomination Details			
Nomination Registration No.		Dated	D D M M Y Y Y Y
I/We the sole holder / Joint holders / Guardian (in case of minor) hereby declare that:			
<input type="checkbox"/> I/We do not wish to nominate any one for this demat account.			
<input type="checkbox"/> I/We nominate the following persons, who is / are entitled to receive security balances lying in my/our account, particulars whereof are given below, in the event of my / our death.			
Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name			
*First Name			
Middle Name			
*Last Name			
*Address			
*City			
*State			
*Pin			
*Country			
Telephone No.			
Fax No.			
PAN			
UID			
Email ID			

Nomination Details	Nominee 1	Nominee 2	Nominee 3
*Relationship with the BO			
Date of birth (dd-mm-yyyy) (mandatory if Nominee is a minor)			
Name of the Guardian of Nominee (if nominee is a minor)			
*First Name			
Middle Name			
*Last Name			
*Address of the guardian of nominee			
*City			
*State			
*Country			
*PIN			
Age			
Telephone			
Fax No.			
Email ID			
*Relationship of the Guardian with the Nominee			
*Percentage of allocation of securities			
*Residual Securities [please tick any one nominee, if tick not marked the default will be first nominee]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Note : Residual securities : in case of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.</p> <p>* Marked is Mandatory field</p> <p>This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.</p>			

Note : One witness shall attest signature(s) / thumb impression(s)	
Details of the Witness	
Name of witness	
Address of witness	
Signature of witness	

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

	Name	Signatures
First / Sole Holder or Guardian (in case of Minor)		✓
Second Holder		✓
Third Holder		✓

(Signatures should be preferably in black ink).

**ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT
(FOR NON-INDIVIDUALS)**



ABHINANDAN STOCK BROKING PVT. LTD.

Regd. Office : 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata – 700 029

Telefax : +91 33 4005-5430, E.mail : info@abhinandangroup.com

Website : www.abhinandangroup.com, CIN : U65100WB2010PTC153196

DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016

(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	8	2	8	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 the following details: -

Holders Details											
Sole/ First Holder's Name										PAN	
Search Name											
Second Holder's Name										PAN	
										UID	
Third Holder's Name										PAN	
										UID	
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)											
Status										Sub-Status	
<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)										To be filled by the DP	
SEBI Regn. No. (If Applicable)					SEBI Regn. Date	D	D	M	M	Y	Y
RBI Regn. No. (If Applicable)					RBI Approval Date	D	D	M	M	Y	Y
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify)_____										
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] <input type="checkbox"/> Yes <input type="checkbox"/> No	
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')										<input type="checkbox"/> Yes <input type="checkbox"/> No	
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 _____										<input type="checkbox"/> Yes <input type="checkbox"/> No	

I/ We would like to share the email ID with the RTA		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I / We would like to receive the Annual Report		<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic	
(Tick the applicable box. If not marked the default option would be in Physical)			
Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository Participant (Tick any one)			
		<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form	
Clearing Member Details (To be filled by CMs only)			
Name of Stock Exchange			
Name of CC / CH			
Clearing Member Id		Trading member ID	
I / We wish to receive dividend / interest directly in to my bank account given below through ECS? (if not marked, the default option would be 'Yes')		<input type="checkbox"/> Yes <input type="checkbox"/> No	
[ECS is mandatory for locations notified by SEBI from time to time]			
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 code	
(i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book 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 options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.			
OTHER DETAILS - Gross Annual Income Details			
Income Range per annum		<input type="checkbox"/> Upto ₹ 1 Lac <input type="checkbox"/> ₹ 1 Lac to ₹ 5 Lac <input type="checkbox"/> ₹ 5 Lac to ₹ 10 Lac	
		<input type="checkbox"/> ₹ 10 Lac to ₹ 25 Lac <input type="checkbox"/> ₹ 25 Lac to ₹ 1 Crore <input type="checkbox"/> More than ₹ 1 Crore	
Net-worth as on (Date)		D D M M Y Y Y Y ₹	
(Net worth should not be older than 1 year)			
Please tick If any of the authorized signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors is either Politically Exposed Person (PEP) or Related to Politically Exposed Person (RPEP). Please provide details as per Annexure 2.2 A.			<input type="checkbox"/>
Any other information			
SMS Alert Facility		MOBILE NO. +91_____	
Refer to Terms & Conditions given as Annexure - 2.4		[[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).	

Transactions Using Secured Texting Facility (TRUST). Refer to Terms and Conditions Annexure – 2.6	
I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility.	
I have read and understood the Terms and Conditions prescribed by CDSL for the same.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST.	
Stock Exchange Name/ID	
Clearing Member Name	
Clearing Member ID (Optional)	
Easi	To register for <i>easi</i> , please visit our website www.cdslindia.com . <i>Easi</i> allows a BO to view his ISIN balances, transactions and value of the portfolio online.

I/We have received and read the document of 'Rights and Obligation 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 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.

	Name	Designation	Signature
Sole / First Authorised Signatory			✓
Second Authorised Signatory			✓
Third Authorised Signatory			✓

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

(Signatures should be preferably in black ink).

Format of Board Resolution (Only for Corporates)

on Company Letterhead & duly certified to be true

"RESOLVED that a depository account of the company be opened with Abhinandan Stock Broking Pvt. Ltd. and Mr./Mrs. _____ and Mr./Mrs. _____, Directors and Mr./Mrs. _____ and Mr./Mrs. _____, authorised signatories are hereby singly / jointly authorised to complete all account opening formalities, issue receipt / delivery instructions, demat / remat requests, intersettlement, transfers, account closure / shifting / freeze / defreeze requests, pledge instructions, cancellations of the aforesaid and all other acts as may be necessary for operations of the account and a copy of this resolution be delivered to Abhinandan Stock Broking Pvt. Ltd.

"RESOLVED further that Abhinandan Stock Broking Pvt. Ltd. being the POA holder on behalf of _____ is hereby authorised to sign as per authorisation by Abhinandan Stock Broking Pvt. Ltd. the document relating to be beneficiary account with Abhinandan Stock Broking Pvt. Ltd. and the authority so given to Abhinandan Stock Broking Pvt. Ltd. to act on behalf of M/s _____ shall not be with drawn / revoked without prior intimation in writing with three weeks time.

Annexure 2.2A - FOR NON-INDIVIDUALS
Details of Politically Exposed Persons (PEP) / Related to Politically Exposed Persons (RPEP)

Name of Holder _____ PAN of the Holder _____			
Sr. No.	Name of the Authorised Signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors	Relation with the holder (i.e. promoters, whole time directors etc.	Please tick the relevant option
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP

Name & Signature of the Authorised Signatory(ies) _____

Date : _____

PEP : Politically Exposed Persons **RPEP** : Related to Politically Exposed Persons

Annexure 2.4

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 authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
6. **The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.**
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed with out proper authorization, the BO should immediately inform the DP in writing.

Fees:

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

Disclaimer:

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

Liability and Indemnity:

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

Amendments:

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

Governing Law and Jurisdiction:

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in 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	8	2	8	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 messages are to be sent +91

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

The mobile number is registered in the name of : _____

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

Signatures ✓ _____ ✓ _____ ✓ _____
Sole / First Holder Second holder Third Holder

Place : _____

Date : _____

Annexure-2.6

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

1. Definitions:

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

- i. "Depository" means Central Depository Services (India) Limited (CDSL)
 - ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.
 - iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
 - iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
 - v. "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time. Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository.
 3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depository shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure of the service provider or network.
 4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
 5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
 6. The BO shall be responsible for submitting response to the 'Responsive SMS' within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for deregistration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
 7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
 8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.
 9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP .
 10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.

11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. In the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
12. The BO may request for deregistration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system if the request is received through the DP.
13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.
17. Indemnity:

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

18. Disclaimer:

Depository shall be absolved of any liability in case:-

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

INSTRUCTIONS TO THE APPLICANTS (BOS) FOR ACCOUNT OPENING

1. Signatures can be in English or Hindi or any of the other languages contained in the 8th Schedule of the Constitution of India. Thumb impressions and signatures other than the above mentioned languages must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate / Special Executive Officer under his/her official seal.
2. Signatures should be preferably in black ink.
3. Details of the Names, Address, Telephone Number(s), etc., of the Magistrate / Notary Public / Special Executive Magistrate / Special Executive Officer are to be provided in case of attestation done by them.
4. In case of additional signatures (for accounts other than individuals), separate annexures should be attached to the account opening form.
5. In case of applications containing a Power of Attorney, the relevant Power of Attorney or the self-certified copy thereof, must be lodged along with the application.
6. All correspondence / queries shall be addressed to the first / sole applicant.
7. Strike off whichever option, in the account opening form, is not applicable.

OPTION FORM FOR ISSUE OF DIS BOOKLET

	Date	D	D	M	M	Y	Y	Y	Y
DP ID	1	2	0	8	2	8	0	0	Client ID
First Holder Name									
Second Holder Name									
Third Holder Name									

To
ABHINANDAN STOCK BROKING PVT. LTD.
 95, Sarat Bose Road
 City Point, 3rd Floor
 Kolkata – 700 029

Dear Sir / Madam,

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

OPTION 1 :

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL account though I / we have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of the 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.

Yours faithfully

	Sole / First Holder	Second Joint Holder	Third Joint Holder
Name			
Signature	✓	✓	✓

OR

OPTION 2 :

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA / executed PMS agreement in favour of / with _____ (name of the 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 date.

Yours faithfully

	Sole / First Holder	Second Joint Holder	Third Joint Holder
Name			
Signature	✓	✓	✓

Common Registration Form for availing SMS Alert and /or TRUST facility

To
ABHINANDAN STOCK BROKING PVT. LTD.
 95, Sarat Bose Road
 City Point, 3rd Floor
 Kolkata – 700 029

Dear Sir/Madam,

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

- a. SMART-SMS alert facility
- b. TRUST- TRansaction using Secured Texting facility

(please note that SMS alert facility is mandatory if TRUST facility is opted for)

BOID

1	2	0	8	2	8	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 messages are to be sent +91

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

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

(Existing users registered for SMS alerts:- Please note that if the mobile number for TRUST is different than the registered mobile number for SMS alert, the new mobile number will be updated for SMS alert also.)

The mobile number is registered in the name of:

(Name) _____

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

I/ We consent to CDSL providing to the service provider such information pertaining to account/ transactions in my/our account as is necessary for the purpose of availing the said facility.

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

Signatures _____ _____ _____
Sole / First Holder Second holder Third Holder

Place : _____

Date : _____

AUTHORITY LETTER

To
ABHINANDAN STOCK BROKING PVT. LTD. (ASBPL)
95, Sarat Bose Road
City Point, 3rd Floor
Kolkata – 700 029

Sub : Authority to debit the Demat Charges

Beneficiary Client ID	
Trading Account Code	

Dear Sir,

This is to inform **Abhinandan Stock Broking Pvt. Ltd.** that,

1. I/We have a beneficiary account with **Abhinandan Stock Broking Pvt. Ltd.** (DP) with client ID as mentioned above.
2. Further I/we have a trading account with ASBPL (trading code mentioned above) for investment and trading purpose.
3. I/We find it extremely inconvenient to give cheques against your depository bills and client registration charges.

With respect to the above mentioned subject and consideration, I/we hereby authorize you to debit the trading account maintained with ASBPL for the debit charges payable to ASBPL, as Depository Participant for providing depository services. Any such debited to my/our account shall be binding on me/us.

Thanking You

Yours faithfully,

Signature of the Client : _____ _____ _____
Sole/First Holder Second Holder Third Holder

Name of the client : _____

Address : _____

AUTHORISATION FOR PROVIDING DP BILL/TRANSACTION/HOLDING STATEMENT BY EMAIL

Date : _____

To
ABHINANDAN STOCK BROKING PVT. LTD.
 95, Sarat Bose Road
 City Point, 3rd Floor
 Kolkata – 700 029

Dear Sir,

You are requested to provide me/us bill/holding/transaction statement including statement of account in the following manner :

1. I/we understand that I/we have a right to receive the Bill / Holding / Transaction Statement in physical form. I/we understand that I/we have the option to receive Bill / Holding / Transaction Statement by email, in lieu of physical form.
2. In case the DP sends the Bill / Holding / Transaction Statement through email at my/our registered Email Id _____, I/we hereby authorize them not to send in physical form unless specifically requested by me.
3. I/we agree that the log reports of your dispatching software shall be a conclusive proof of dispatch of Bill / Holding / Transaction Statement to me/us and such dispatch shall be deemed to mean receipt by me/us and shall not be disputed by me/us on account of any non-receipt/delayed receipt for any reason whatsoever.
4. I/we also agree that non-receipt of bounced mail notification by you shall amount to delivery at my/our email ID.
5. I/we shall immediately inform the DP about change in email address.
6. I/we will take all the necessary means to ensure confidentiality and secrecy of the login name and password of the internet/email account.

Thanking you,

Yours faithfully,

✓ _____
 Signature of the Client

DECLARATION IN CASE OF SAME MOBILE NUMBER AND / OR E.MAIL ID FOR DIFFERENT CLIENTS
 [Please tick (✓) wherever applicable]

DP ID		Client ID		Date	
Name of Account Holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (spouse, dependent children and dependent parents).					
Signature of account holder		✓			
Name of account holder					



ABHINANDAN STOCK BROKING PVT. LTD.

Regd. Office : 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata – 700 029

Telefax : +91 33 4005-5430, E.mail : info@abhinandangroup.com

Website : www.abhinandangroup.com, CIN : U65100WB2010PTC153196

Investors' Complaints Redressal E.mail : complaints@abhinandangroup.com

DP ID : 12082800 ❖ SEBI REGN. NO. : IN-DP-208-2016



CHARGE STRUCTURE

Sl. No.	Particulars	Scheme 1	Scheme 2	Scheme 3
1	One Time Charge (Non-Refundable)	Nil	Nil	₹ 4000 for Non-Corporate ₹ 5000 for Corporate
2	Annual Maintenance Charges	₹ 250 for Non-Corporate ₹ 850 for Corporate	₹ 500 for Non-Corporate ₹ 1100 for Corporate	Nil for Non-Corporate ₹ 500 for Corporate
3	Buy (Credit)	Nil	Nil	Nil
4	Sell (Debit)			
	Market Transactions	0.01% of transaction value (subject to minimum of ₹ 15 per ISIN)	₹ 15 per ISIN	₹ 15 per ISIN
	Off-Market Transactions	0.02% of transaction value (subject to minimum of ₹ 25 per ISIN)	0.01% of transaction value (subject to minimum of ₹ 25 per ISIN)	0.01% of transaction value (subject to minimum of ₹ 25 per ISIN)
5	Dematerialization	₹ 10 Per Certificate (subject to minimum of ₹ 25 per ISIN) + ₹ 50 Courier Charges		
6	Rematerialization	₹ 15 Per 100 Securities or part thereof (subject to minimum of ₹ 50 per ISIN)		
7	All kind of Pledge / Hypothecation requests	0.01% of value of securities (subject to minimum of ₹ 35 per request)		
8	All kind of Lending/ borrowing requests	0.01% of value of securities (subject to minimum of ₹ 35 per request)		
9	Easi Facility*	Nil		
10	Easiest Facility**	₹ 100 per annum		
11	Account of choice***	₹ 400 p.a. & Token charges ₹ 2250 and annual renew of token charge ₹ 1150		

* Only viewing Holding & Status of transaction(s) executed in the last 30 days

** is a mode of operation through which transfer of securities can take place to settlement related accounts of CMs (brokers) only.

*** is a mode of operation through which transfer of securities can take place to any account of choice.

Scheme Opted : Scheme 1 Scheme 2 Scheme 3



Sole/First Holder



2nd Holder



3rd Holder

NOTES :

1. Only 1st year's annual account maintenance charges are collected at the time of account opening. All other charges are billed on a monthly basis if you have any transactions during that month.
2. For all purposes, the bill date shall be construed as the date of demad and bills will be considered as the bill cum notice for payment. ASBPL reserves the right to freeze depository account for debit transaction in case of non payment of charges after 15 days from the bill date.
3. Delayed payment charges will be levied @ 24% p.a., if payment is not received within 15 days from the bill date.
4. **"All market instructions for transfer must be received latest by 4.00 p.m. on the previous working day prior to the pay in day as per SEBI guidelines. All Off Market instructions for transfer must be received at least 24 hours before the execution date. Late instructions would be accepted at the Account Holder's sole risk and responsibility".**
5. Charges are subject to revision at the company's sole discretion and as per revision in CDSL charges. Changes, if any, will be intimated 30 days in advance.
6. Any service not quoted above will be charged separately.
7. Value of transactions will be in accordance with rates provided by the depository.
8. Service tax and other statutory charges, if applicable will also be levied.
9. Charges may also be collected upfront, by the point of acceptance of Delivery Instructions.
10. Charges for POA stamping will be charged extra.

I/we have read and understood the "Schedule of Charges" prescribed above and agree to abide by the same.

Signature of Account Holders :

_____ _____ _____
Sole/First Holder 2nd Holder 3rd Holder

POLICY/DECLARATION ON AML/CFL

Sl.No.	AML Measures	Particulars
1	AML Policy	We have in place written policy & procedure as per guidelines issued by SEBI/ Exchange
2	Know Your Customer (KYC)	We have in place system for identification of our clients including KYC documentation.
3	Maintenance of Records	We update the client profile on a regular basis.
4	Screening against negative lists	We have in place record maintenance and retention procedures as prescribed. We screen the client database to ensure that it is not held by or linked to anyone included in the specified list.
5	Risk Assessment	We have in place system to place clients into high, medium & low risk category and apply enhanced due diligence for clients that pose a higher risk.
6	Clients of Special Category	We have in place policy to place clients of special category such as persons <input type="checkbox"/> with political link, <input type="checkbox"/> non -residents, <input type="checkbox"/> Trusts, <input type="checkbox"/> NGOs, <input type="checkbox"/> Closely held Companies etc. in high risk category. <input type="checkbox"/> Other PI. specify _____
7	Monitoring, Identification & Reporting of Suspicious Transactions	We have in place, systems and procedures for monitoring, detection and reporting of suspicious transactions to the relevant authorities.
8	Audit	We are subject to inspection by SEBI/Exchange. Additionally we are periodically audited by an independent internal auditor that assesses AML policies and procedures too.

POWER OF ATTORNEY

To all whom these presents shall come, I / We the details of BO as mentioned in the schedule hereunder SEND GREETINGS.

Whereas, I/We have a Beneficiary Account bearing no. _____ in the name and style of _____ (hereinafter referred to as the "said account") with **Abhinandan Stock Broking Pvt. Ltd.**, having its registered office at 95, Sarat Bose Road, City Point, 3rd Floor, Kolkata - 700 029, a member of National Stock Exchange of India Limited and BSE Limited and I/We am/are desirous of appointing an agent/attorney to operate said account on my/our behalf for a limited purpose in the manner herein after appearing.

NOW THEREFORE THESE PRESENTS WITNESS THAT I / We the above named do hereby nominate, constitute and appoint **Abhinandan Stock Broking Pvt. Ltd.** (The Trading Member / Broker / DP) acting through any of its officers or employees or any duly authorized person, to be my/ our true and lawful constituted attorney (hereinafter called as "**attorney**" for the purpose of brevity, which expression shall, unless repugnant to the meaning or context thereof be deemed to mean and include its successors) and authorize the said Attorney in my/our name(s) and on my/our behalf to do the following acts, deeds and things and exercise the following powers and authorities.;

1. To do such thing and give all such instructions as mentioned below conferring the said account as I/We myself/ourselves could give if I/We was/were personally present.
To transfer necessary quantity of shares from my / our designated Demat account, on my / our behalf to the accounts, mentioned in the Annexure for meeting
 - a) Delivery obligation for sale transaction done, and
 - b) Margin requirement in respect of transactions executed by me / us through my/our client Trading account with **Abhinandan Stock Broking Pvt. Ltd.** (Trading Member / broker)
2. The Attorney is authorized to transfer the securities and to do all such acts, deeds things as may be necessary and expedient for or incidental to ensure that delivery of securities arising out of transaction undertaken by me / us under the agreement are duly and properly completed.
3. To instruct the DP to block, hold, debit and/or create pledge, lien, hypothecation on securities available in my / our demat account on my/our behalf, in its own favour or in favour of a Clearing House/ Clearing Corporation / Exchange to meet my/our upfront maintenance, mark-to-market loss, settlement and / or other margin obligations.
4. To apply redemption on my/our behalf for various products like Mutual Funds, Public (shares as well as debenture), rights offer for shares, tendering shares in open offers etc. pursuant to my/ our specific instructions.
5. To send consolidated summary of client scrip-wise buy and sell positions taken with average rates, margin details, balance information, and any other relevant information to the clients by way of SMS/email on a daily basis and at such other periodic intervals, notwithstanding any other document to be Disseminated as specified by SEBI from time to time.
6. To debit and pay / transfer the necessary charges, from the credit balances available in my / our Client account with The Trading Member / broker towards payment of various charges, account maintenance fees, etc. payable by me / us to the Attorney pertaining to transactions done, postage, and maintenance of my / our designated demat account.
7. To return the securities, that the Attorney might receive erroneously or was not entitled to receive, to my/ our designa demat account.

✓

Sole/First Holder

✓

2nd Holder

✓

3rd Holder

Sole/First Holder

8. The Power of Attorney with authority and powers as stated herein has been given for the specific purpose of the above mentioned services and can be revoked without prior notice but under intimation to the Attorney subject to my / our fulfilling of the Margin / Settlement and /or other obligation for the transactions undertaken in my/ our client account prior to receiving request for revocation of POA.

All disputes arising out of this Power of Attorney shall be subject to the jurisdiction of the City civil Courts situated at Kolkata.

IN WITNESS WHEREOF I/We, hereunto set and subscribe my/our hands and signed at on this _____ day of _____ 20__.

	Name	Signature
First Holder		
Second Holder		
Third Holder		

ANNEXURE

PARTICULARS	DP ID	CL ID	PARTICULARS	DP ID	CL ID
CDSL NSE Pool A/c	12082800	00000058	CDSL Client Margin A/c	12082800	00000011
CDSL BSE Principal A/c	12082800	00000077	NSDL NSE Pool / CM-BP-ID	IN300958	10169170/IN518196
CDSL NSE Early Pay-In A/c	11000011	00019781	NSDL BSE Pool / CM-BP-ID	IN300958	10175416/IN664405
CDSL BSE Early Pay-In A/c	11000010	00023783	NSDL Client Margin A/c	N.A.	N.A.

<p>Witness 1</p> <p>Signature : _____</p> <p>Name : _____</p> <p>Address : _____</p> <p>_____</p>	<p>Witness 2</p> <p>Signature : _____</p> <p>Name : _____</p> <p>Address : _____</p> <p>_____</p>
--	--

Place : Kolkata

Date : _____

I / We Accept:

For and on behalf of **Abhinandan Stock Broking Pvt. Ltd.**

(The Power of Attorney Holder / Authorised Signatory/ies)

**REQUEST FOR NON-CONVERSION OF REGULAR DEMAT ACCOUNT
INTO BASIC SERVICES DEMAT ACCOUNT (BSDA)**

From :

Date : _____

To
ABHINANDAN STOCK BROKING PVT. LTD.
DP ID : 12082800
95, Sarat Bose Road
City Point, 3rd Floor
Kolkata – 700 029

Dear Sir,

With reference to my/our application for opening a Demat Account with you as per the following details,

	Name	PAN
Sole/First Holder	_____	_____
Second Holder	_____	_____
Third Holder	_____	_____

Please note that I/We have read and understood the SEBI Guidelines for facility for a BSDA. I/We hereby declare that I/we am/are do not wish to open a Depository Account as a BSDA holder and undertake to comply with the requirements specified by SEBI or any such Authority for such facility from time to time. Further, at any point of time in future, even if my/our account do meet the eligibility of a BSDA, my/our aforesaid Account should always be a Regular Account & never be converted into BSDA Account.

Thanking you,

Yours truly,

✓ _____
Signature of the Client

Client ID _____

Dated : _____

From :

To
ABHINANDAN STOCK BROKING PVT. LTD.
DP ID : 12082800
95, Sarat Bose Road
City Point, 3rd Floor
Kolkata – 700 029

Ref. : Acknowledgement for the receipt of documents

Dear Sir,

This is to acknowledge and declare that

- I/We have received a photocopy of the KYC (full booklet), duly executed with you, to my/our satisfaction including my / our Client ID.
- I/We have (Physically Electronically) received, read and understood the Rights and Obligations of Beneficial Owner and Depository Participant” as prescribed by SEBI and Depositories.
- I/We have received a photocopy of Power of Attorney.
- I/We have received Charge Structure & Client Master Report.

Thanking you,

Yours truly,

✓ _____
Signature of the Client

Client Code _____



Invest & grow

Regd. Office : CITY POINT, 95, Sarat Bose Road, 3rd Floor, Kolkata - 700 029
Phone : 4005-5430 ❖ Fax : (033) 4005-5430 ❖ E.mail : info@abhinandangroup.com
Investors' Complaints Redressal E.mail : complaints@abhinandangroup.com
Website : www.abhinandangroup.com ❖ CIN : U65100WB2010PTC153196