

No. A



Client Registration Form

ALICEBLUE FINANCIAL SERVICES PVT LTD

Non Individual DEMAT & TRADING REGISTRATION

Client Name : _____

Client Code : _____

BO ID : _____

Branch /RM Name : _____

Sub-broker /AP Name : _____

Group Code : _____

Terminal Code : _____

PAN No. : _____

FOR OFFICE USE ONLY

<input type="checkbox"/> NSE Cash	<input type="checkbox"/> BSE Currency	Status
<input type="checkbox"/> NSE F & O	<input type="checkbox"/> MCX	
<input type="checkbox"/> NSE CDS		
<input type="checkbox"/> BSE Cash		
<input type="checkbox"/> BSE F & O		



1800 3070 1155
www.aliceblueindia.com

Equities | Commodities | Currencies

Name of the Document	Brief Significance of the Document	
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES		
Account Opening Form	PART I - KYC form - Document captures the basic information about the constituent and an instruction/check list	-
Part II - Application for opening a Demat Account		
Part II - Nomination form for Demat Account		
Annexure - Regular/Basic Services Demat Account (BSDA) and Separate Mobile Number & Email ID Declaration		--
Part I - Trading Account Related Details		-
ECN Declaration		
Extended KYC Annexure - Individuals (including Sole - Proprietors) FATCA/CRS		
Tariff		
VOLUNTARY DOCUMENTS		
Running account authorisation	Required for maintaining clients account on a running account basis and for other authorisation	
CLIENT REGISTRATION FORM - MUTUAL FUND		--
DERIVATIVE SEGMENTS SUPPORTING DOCUMENTS		--
Disclosure & Declaration under PMLA 2002	Disclosure by Member & Declaration by Client under PMLA 2002.	
Disclosure Information	Pro - Account Disclosure Information	
POWER OF ATTORNEY		

CLEARING MEMBER : Globe Capital Market LTD., CIN : U74100DL1985PLC021350 | SEBI : INF230663732
804, Ansal bhawan, 16 K.G. Marg, Connaught Place, New Delhi - 110001, Web : www.globecapital.com, Email : globedp@globecapital.com

Registered Office : Old No. 56/2, New No. 58, LIC Nagar, Vinayagar Kovil Street, Erode, Tamil Nadu- 638002
Corporate Office: 153/2, M.R.B. Arcade, Bagalur Main Road, Dwaraka Nagar, Yelahanka, Bangalore - 560063. Karnataka.
 Email : askus@aliceblueonline.com. Web : aliceblueonline.com Tel : 080 - 28478599
Compliance Officer :Mr. M. Sidhavelayutham Contact No : 080 -28478599, Email : grievances@aliceblueindia.com
CEO : Mr. M. Sidhavelayutham, Contact No: 91 9840992691 Email : sidhavelayutham@aliceblueindia.com

Exchange /DP	Member Code/ID	SEBI Registration No.	Segment	
BSE	6670	INZ000156038	CASH/F&O/CD	For any grievance/dispute please contact Alice Blue Financial services. At the above address or email grievances@aliceblueindia.com and phone no : 080 - 67645555 and for escalation you may write to us at askus@aliceblue.com In case not satisfied with the response, please contact concerned exchanges BSE at is@bseindia.com and phone no.022 2272 8097 and NSE at ignse@nse.co.in and phone No. 022 2659 8190 MCX at : grievance@mcxindia.com Ph : 022673 18888
NSE	90112	INZ000156038	CASH/F&O/CD	
MCX	56710	INZ000156038	F&O	
CDSL	12085300	IN-DP-364-2018		



Terms & Conditions:

1. Demat customers eligible for the BSDA facility need to register their mobile number for the SMS alert facility for debit transactions
2. The above charges are exclusive of GST levied @ 18% and other taxes/statutory charges levied by government bodies/statutory authorities from time to time, which will be charged as applicable.
3. In case the Demat accounts with BSDA facility does not meet the listed eligibility as per guideline issued by SEBI or any such authority at any point of time, such BSDA accounts will be converted to Standard Program Demat accounts without further reference to the respective customers and will be levied standard program pricing
4. In case if the Demat accounts with BSDA facility exceed the prescribed limits and move out of the stipulated BSDA criteria, the eligibility of such accounts for BSDA facility will be evaluated on the last day of the Annual billing cycle.
5. The value of the transaction will be in accordance with rates provided by Depositories (NSDL/CDSL)
6. The transaction charges will be payable monthly. The charges quoted above are for the services listed. Any services not quoted above will be charged separately.
7. The operating instructions for the joint accounts must be signed by all the holders.
8. All instructions for transfer must be received at the designated DP servicing branches at least 24 hours before the execution date.
9. The charges for processing of instructions submitted on the execution date (accepted at clients risk) will be 0.25% on the value of transaction, minimum of Rs.25/- per instruction.
10. In case of non-recovery of Debit charges due to inadequate balance in your lined trading account or inadequate advances fees or invalid trading account, the Depository services for your account will be temporarily discontinued. Any request for resuming the services will be charged at Rs. 250/- and services will be resumed in a minimum of three working days from the date of receipt of request with AliceBlue Financial services (P) Ltd. and post payment of all outstanding dues towards depository charges.
11. In case the Demat accounts are with nil balances/transactions or in case if the customer defaults in payment of AMC, the physical statement shall not be sent to the customer after period of year. However the electronic statement of hold - ing will be sent only to the customers whose email Ids are registered for e-statement.

SEPARATE MOBILE NUMBER & EMAIL ID DECLARATION

I hereby declare that the mobile number, E-mail ID belongs to Me or My family (spouse, dependent children and dependent parents).

	Name of the Customer	Mobile Number	Email ID of the customer
1st Account holder			
2nd Account holder			
3rd Account holder			

SS
Signature 1st holder

Signature 2nd holder

Signature 3rd holder

PART - I TRADING ACCOUNT RELATED DETAILS

No.153/2, M.R.B. Arcade, Bagalur Main Road, Dwaraka Nagar, Yelahanka, Bangalore - 560063. Karnataka.



NAME OF THE APPLICANT:

[Grid for Name of the Applicant]

BANK AND DEPOSITORY ACCOUNTS DETAILS:

Bank Name: [] Account type Savings Current
Bank A/C No. [] Branch code []
IFSC Code [] MICR Number []
Branch Address []
DP Name A L I C E B L U E F I N A N C I A L S E R V I C E S (P) L T D
Client ID (BO ID) [] DP ID : [] Depository Name (tick one) NSDL CDSL
Client ID (BO ID) []

TRADING PREFERENCES:

*Please sign in the relevant boxes where you wish to trade. The segment not chosen should be stricken off by the client.

Exchange Cash Market Future & Options Currency Derivative

TRADING PREFERENCES

NSE EQ _____ BSE EQ _____ MCX F&O _____
NSE F&O _____ BSE F&O _____
NSE CDS _____ BSE CDS _____

If in future ,the client wants to trade on any new segment/new exchange,separate authorization/letter should be taken from the client by the stock broker,please specify the proof submitted to avail the privileges to trade in derivatives segment : (please refer last page of this application form) []

PAST ACTION : 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 3years:

If yes ,please specify: []

DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS: Not dealing, If yes, please mention details below:

Sub-Brokers Name: [] SEBI Registration number: []

R.O.Address: [] Phone : [] Fax: [] Website: []

Whether dealing with any other stock broker/sub-broker(if case dealing with multiple stock brokers/sub-brokers,provide details of all)

Name of Stock Broker: [] Name of Sub-Broker, if any: []

Client Code: [] Exchange: []

Details of disputes/dues pending from/to such stock broker/sub-broker: []

ADDITIONAL DETAILS:I/we wish to receive Electronic Contact Note (ECN) OR Physical Contact Note (PCN)

E-mail ID for ECN []

I wish to avail of the facility of internet trading/wireless technology: Yes If No, Please Specify _____

Number of years of Investment/Trading Experience: Yes [YY] Stock [YY] Derivatives

[YY] Other investment related field Any other information: []

If employed please provide employer name []

INTRODUCER DETAILS (Optional)

Name: []

Status: Sub Broker Remisier Authorized person Existing Clients Others,please specify _____

Address: []

Phone: []

Signature of Introducer

EXTENDED KYC ANNEXURE - INDIVIDUALS (Including Sole- Proprietors) FATCA/CRS
(Applicable for Resident and Non-Resident Customers)



CBDT Terms and Conditions

The Central Board of Direct Taxes (CBDT) has notified rules 114F to 114H , as a 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 revelant cases, information will have to be reported to tax authorities / appointed agencies.Towards compliance,we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.Should there be any change in any information provided by you ,please ensure you advise us promptly,i.e., within 30 days.Please note that you may receive more than one request of information if you have multiple relationships with AliceBlue Financial services (P) Ltd. or its group entities .Therefore ,it is important that you respond to our request,even if you believe you have already supplied any previously requested information.

CBDT Instruction

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

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

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country,customer to provide revelant **Curing Documents** as mentioned below:

FATCA/CRS Indicia observed (ticked)		Documentation required for cure of FATCA/CRS Indicia
		If customer does not agree to be specified U.S. person/reportable person status
1.	U.S. Place of Birth	1. Self -certification (in attached format) that the account holder is neither a citizen of Untied States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents : a. Certified Copy of Certificate of loss of Nationality or b Reasonable explanation of way the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
2.	Residence/mailling address in a country other than India	1. Self-Certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary eidence (refer list below)
3.	Telephone number in a country other than india (and no telephone number in India provided)	1. Self-Certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary eidence (refer list below)
4.	Standing instruction to transfer to an account maintained in a country other than India	1. Self-Certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary eidence (refer list below)

List of acceptable **documentary evidence** needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*
2. Valid identification issued by an authorized government body* (e.g.Passport , National Identity card,etc.)

***Government or agency thereof or a municipality**

For Alice Blue Financial services (P) Ltd / Alice Blue Financial services

Sourcing Branch Name : _____ Branch Code:

Signature verified and form approved by : BDA/BM employee Code: _____ Signature & Date: _____

TARIFF

Brokerage	
Cash Intraday (%) (NSE / BSE)	
Cash Delivery (%) (NSE / BSE)	
Futures (%) (NFO / BFO / MCX)	0.02%
Currency Futures (Per lot Per Side in Rs.)	10 Rs Per Lot
Options (Per lot Per Side in Rs.)	10 Rs Per Lot
MCX Futures	
MCX Options	10 Rs Per Lot
Other Charges	NIL
Documentation/ Processing Charges	Rs 100 + GST
For Physical Contract Notes /Statements	Actual Postage Charges
For Cheque Bounce/ Cheque Cancellation	Rs 500 per Cheque plus GST
Interest on Delayed Payment	0.1% per day
Delivery Instruction Book Charges	Rs _____
Bracket Order Charges	Rs 4 Per Order
Square off Charges	Rs 20 + GST (Per Order)
Call and Trade Charges	Rs 20 + GST (Per Order)
Payment Gateway Charges	Rs 10 + GST
Short Margin Penalty for Consecutive 3 days	@5% on the shortfall from fourth day.
Clearing Member Charges	
Cash	Rs 100 per Crore of Turnover
Futures	Rs 115 per Crore of Turnover
Options	Rs 3000 per Crore of Transaction
Currency Options	Rs 3000 per Crore of Transaction
Currency Derivatives	Rs 200 per Crore of Transaction
Statutory Charges: GST, STT, Transaction Charges, Stamp Duty, etc are applicable as per rules	
GST 18%	Brokerage, Clearing Member Charges, Exchange Turnover Charges
Securities Transaction Tax (STT)	
Delivery in Cash	0.10%
Intraday in Cash only on Selling Side	0.025%
Futures only on Selling Side	0.01%
Options only on Selling Side	0.05%
Sale of an option, where option is exercised/assigned	0.125%
Commodities Transaction Tax (CTT)	
Futures (only on Selling Side)	0.01% (Non-agri)
Options (only on Selling Side)	0.05%
Sale of an option, where option is exercised/assigned	0.0001%
Exchange Levy and Stamp Duty	As applicable from time to time based on the states
SEBI Charges	Rs 15 per Crore
Transaction Charges	Rs 260 per Crore
Exchange Levy and Stamp Duty	As applicable from time to time based on the states

Signature:



Place: _____

MUTUAL FUND SERVICE SYSTEM FACILITY (MFSS) / BSE STAR MF CLIENT REGISTRATION FORM

I/We am/are registered as your client _____ with above mentioned UDN No./ Client Code No _____ or the purpose of trading in the Capital Market Segment of National Stock Exchange of India Ltd. (Exchange) / BSE Ltd.

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

For the purpose of availing the MFSS / BSE StAR MF facility, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of MFSS/BSE StAR MF and I/we further confirm that the details contained in same remain unchanged as on date. I/We are willing to abide by the terms and conditions as mentioned in the circular dated November 24, 2009 (NSE)/December 02, 2009 (BSE) and as may be specified by the Exchange from time to time by Securities and Exchange Board of India (SEBI) and Association of Mutual Funds of India (AMFI).

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

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

I/We hereby confirm having read and understood the terms and conditions and disclosures provided overleaf.

For MFSS (NSE)

For BSE StAR MF

S18 Signature of Client

S19 Signature of Client

DETAILS OF TERMS & CONDITIONS FOR THE INVESTOR / CLIENT FOR USING NEW MFSS FACILITY / BSE STAR MF PLATFORM

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

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

2. Terms and Conditions

- 2.1. The client shall be bound by circulars/notices issued by NSEIL/BSE from time to time including the circulars issued by NSEIL since 2009 onwards and circulars issued thereafter and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
- 2.2 The client shall notify the Participant/MFI in writing if there is any change in the information in the client registration form provided by the client to the Participant/MFI at the time registering as a client for participating in the new MFSS/ StAR MF platform or any time thereafter.
- 2.3 The client shall submit to the participation/MFI a completed application form in the manner prescribed format for the purpose of placing a order with the Participant/MFI.
- 2.4. The client has read and understood the risks involved in investing in Mutual Fund Schemes
- 2.5. The client shall be wholly responsible for all his investment decisions and instruction.
- 2.6. The client shall ensure continuous compliance with the requirements of NSEIL/BSE, SEBI and AMFI.
- 2.7. The client shall pay to the Participant/MFI fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant/MFI renders to the Client.
- 2.8 The Client will furnish information to the Participant/MFI in writing, if any winding up petition or insolvency petition has been filed or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
- 2.9. In the event of non-performance of the obligation by the Participant/MFI, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL/BSE or NSCCL/ Indian Clearing Corporation LTD. (ICCL).
- 2.10. In case of any dispute between the Participants/MFIs and the investors arising out of the MFSS facility/BSE StAR MF platform, NSEIL/BSE and / or NSCCL/ICCL agrees to extend the necessary support for the speedy redressal of the disputes .

Declaration: I am fully aware that

- I would need to keep clear that balances in my DP accounts for the transaction to be processed.
- I have understood the terms and conditions attached herewith and agreed to the same.
- I have understood Alice Blue Securities(P) Ltd will place my order on a best effort basis.
- Mutual Fund Investments are subject to market risk, please read the Statement of Additional Information (SAI)/Offer document (OD)/ Scheme.Information Document (SID) carefully before investing.

Alice Blue Financial services (P) Ltd offers execution based services only

DISCLOSURE BY MEMBER TO CLIENT UNDER PMLA 2002

Dear Client,

Subject: Prevention of Money Laundering

Money laundering is a process of making dirty money clean. Money is moved around the financial system again and again in such manner that its origin gets hidden. It involves complex chain of activities whereby huge amount of money generated from illegitimate activities viz. selling of narcotic drugs, extortion, corruption, illicit dealing in weapons, human trafficking, etc. is put through a series of process so that it comes out at the other end as clean and legal money. Terrorist organizations encourage money laundering to support their illegal acts.

It is important to note that due to increased vigilance in the wake of threats emanating from increasing terrorism, any failure on our part to discharge the duties cast on us under the applicable laws or we becoming an instrumental or apart of the chain, even if unknowingly or ignorantly, may invite the trouble. In order to fight against the money laundering and terrorist financing the Prevention of Money Laundering Act (PMLA) was brought into force w.e.f. July 1, 2005 in India. Guidelines were also issued in the context of the recommendations made by the Financial Action Task Force on anti- money laundering standards. Compliance with these standards has become imperative for international financial relations.

PMLA is applicable to every intermediary registered with SEBI, which includes a Commodity Brokers and any other intermediary associated with Commodities Market. As per the provisions of PMLA, the intermediaries are required to comply with Know Your Client (KYC) norms, conduct ongoing client due diligence to ensure that the activity being conducted in any account is consistent with the intermediary's knowledge of the client, its business and risk profile.

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

DISCLOSURE BY CLIENT UNDER PMLA 2002

Client Name _____

Details of the Corporate/Partnership Firm/Trust/etc. where I/We am/are affiliated

S.No	Name	Entity Type	Nature of Business	Relationship	PAN

I/We hereby submit and agree to submit as the commitment every financial year the following documents to AliceBlue Financial Services (P) Ltd

1. Audited Annual Accounts
2. Self attested copy of Income Tax Return or
3. Any other Financial information as requested by the Aliceblue Financial Services Pvt Ltd.

I/We further confirm that I/we invest in the Commodity Market with:

- My/our owned funds
- Borrowed Funds from Bank/NBFC or
- Borrowed Funds from others

I/We hereby declare that I/We am/are not doing any benami transactions in my/our account. I/We understand that in case of any Cash/ Suspicious/ Benami transactions being observed into my account, the Member may report the same to Director FIU-IND, New Delhi under the provisions of PMLA, 2002 and thereafter I/we will be liable for any enquiry or penalty which might be levy by the Regulatory Authority under the said Act

S12

Signature of Client

DISCLOSURE INFORMATION (Aliceblue Financial Services Pvt Ltd.)

To,

Dear Client,

This is to inform you that we do only client based trading in Multi Commodity Exchange of India Ltd (MCX)

AliceBlue Financial Services (P) Ltd

Authorised Signatory

I/We acknowledge the receipt of the information given by AliceBlue Financial Services (P) Ltd that they do client based trading only.

S13

Signature of Client

ELECTRONIC CONTRACT NOTE (ECN) DECLARATION (VOLUNTARY)

To
Alice Blue Financial Services Pvt Ltd
No.153/2, M.R.B. Arcade, Bagalur Main Road,
Dwaraka Nagar, Yelahanka, Bangalore - 560063.
Karnataka .

Dear Sir / Madam,

I, _____ a client with Member **M/s. Alice Blue Financial Services Pvt Ltd** of **MCX Exchange** undertake as follows:

- I am aware that the Member has to provide physical contract note in respect of all the trades placed by me unless I myself want the same in the electronic form.
- I am aware that the Member has to provide electronic contract note for my convenience on my request only.
- Though the Member is required to deliver physical contract note, I find that it is inconvenient for me to receive physical contract notes. Therefore, I am voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out / ordered by me.
- I have access to a computer and am a regular internet user, having sufficient knowledge of handling the email operations. My email id is _____
- This has been created by me and not by someone else.
- I am aware that this declaration form should be in English or in any other language known to me.
- I am aware that non-receipt of bounced mail notification by the member shall amount to delivery of the contract note at the above e-mail ID.
- **(The above declaration and the guidelines on ECN given in the Annexure have been read and understood by me. I am aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same)**
- **(The above lines must be reproduced in own hand writing of the client.)**

–	
Unique Client Code	
PAN	
Address	

Signature of client	
---------------------	--

Date:

Place:

Verification of client signature done by:
(Employee Name and Code):

Name of authorized signatory of ABFSPL:
Member Signature:

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

Name of Applicant _____

PAN of the Applicant

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

Name & Signature of the Authorised Signatory(ies)

Date / /





FATCA & CRS Declaration - Non Individual

PAN Trading DP Code

Name

Please tick the applicable tax resident declaration -

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

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

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 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 _____ _____
GIIN not available (please tick as applicable)	<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 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 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 (%) ⁵			

* 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

⁵Attach 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 hereby agree and confirm to inform **Alice Blue Financial Services Pvt Ltd.** for 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	D D M M Y Y Y Y

Sign here : (1) Date : _____
Place : _____

For Investor convenience, Alice Blue Financial Services Pvt Ltd. (ABFSPL) for collecting mandatory information for updating across all Group Companies of ABFSPL 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 **ABFSPL** dispatch the hard copy to

Alice Blue Financial Services Pvt Ltd
 No. 153/2, 3rd Floor, M.R.B. Arcade,
 Bagalur Main Road, Dwaraka Nagar,
 Yelahanka, Bengaluru - 560063

Details of Politically Exposed Persons (PEP)/ Related to Politically Exposed Person (RPEP). [For-non-individual]

Name of holder _____ PAN of the holder _____

Sr.No	Name of the Authorized 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

Name & Signature of the Authorised Signatories Date ____/____/____

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

A. IMPORTANT POINTS:

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

B. Proof of Identity (POI): List of documents admissible as Proof of Identity:

- PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
- Unique Identification Number (UID) (Aadhaar)/Passport/Voter ID card/Driving license.
- Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): List of documents admissible as Proof of Address: (* Documents having an expiry date should be valid on the date of submission.)

- Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of

Residence/Driving License/Flat Maintenance bill/Insurance Copy.

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

D. Exemptions/clarifications to PAN

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

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

E. List of people authorized to attest the documents:

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

F. In case of Non-Individuals, additional documents to be obtained from Non-individuals, over & above the POI & POA, as mentioned below:

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

Format of Declaration from HUF

To
Alice Blue Financial Services Pvt Ltd
No. 153/2, 3rd Floor,
M.R.B.Arcade,
Bagalur Main Road,
Dwaraka Nagar, Yelahanka,
Bengaluru – 560063

Re: Opening of a Trading Account and Demat Account

We, the undersigned, declare that we are the only members of Hindu Undivided Family (“HUF”) under the name and style of M/s _____ with ABFSPL (The Company) respectively for the purpose of dealing in shares, securities, derivatives and other financial & saving instruments.

Mr. _____ is the Karta / Manager of the above HUF and is authorized to open and operate singly the trading account and demat account with ABFSPL in the name of the HUF.

We confirm that the activities and business of the said HUF 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 or co-parceners of the HUF. We further confirm that the Karta is authorized to sign on behalf of the HUF and has full and unrestricted authority to bind all members of the HUF however constituted from time to time.

We declare and state that the Karta is authorized to execute all deeds, documents, papers, agreements, power of attorney (ies), documents creating security, Demand Promissory Notes etc. in respect of the opening and operation of the Account.

We understand that in case of a HUF a beneficiary account can be opened with Depository Participant by the karta as per the current regulations. To facilitate the operation of Trading account with ABFSPL and for the purpose of completing the obligations arising out of the same, we authorize ABFSPL to effect transfers to and from the beneficiary account opened by the karta. We also authorize the Karta to execute such power of attorney (ies) (including but not limited to powers of attorney to operate any bank account of the HUF and any demat account opened for the HUF

We request and authorize the Company to honour operations and instructions under the signature(s) of the Karta in respect of the Account. We note that all online transaction request placed by clients are authenticated by a user-id & password and other security features.

We authorize the Company to allot such user id, password etc. to the above Karta on behalf of the HUF. We, the undersigned members of the HUF, undertake to bind not only the present members of the said HUF (both adult and minors) but also all future members thereof (both adults and minors) and all persons entitled to a share therein and ourselves personally and our respective interest in the HUF properties as well as our separate estates towards discharge of our obligations to the Company arising out of the transactions done in the said Trading Account / Demat Account.

We also undertake that any and all claims due to the Company from the said HUF shall be recoverable personally from all or any of us and also from the entire family properties of the HUF of which the first signatory is the Karta, including the share of the minor co-parceners.

We hereby undertake to inform the Company of the death or birth of co-parcener or of any change occurring at any time in the membership of the HUF during the subsistence of the Account.

We confirm to have read and understood the terms and conditions applicable to the Account and relating thereto and shall always be bound by and abide with them and their amendments from time to time.

Yours faithfully,

Full Name: _____ Signature: _____

Sl No	Name & Relationship of co-parcener	Signature of Co-Parcener	Sl No	Name & Relationship of co-parcener	Signature of Co-Parcener

[To be signed by all members including female members of the HUF. Names should be suffixed with details like s/o, d/o, w/o as the case may be, with address where the address is different from the HUF address. Minor's name (and date of birth) to be mentioned like “A” (minor) through “B” (natural guardian)].