

# ***Demat Account Opening Form***

**MPSE SECURITIES LTD.**

**DP OF CENTRAL DEPOSITORY SERVICES (INDIA) LTD.  
DPID NO. 26200 DP SEBI REGN. NO. IN-DP-CDSL-168-2002**



## Documents Required for Individual Account Opening

S.No.	Particulars	Documents	Remarks
1	Proof of Identity	PAN Card Copy	
2	Proof of Address (Any One) (if correspondence address and permanent address is different, both required)	Bank Passbook / Statement	Not more than 3 months old
		Electricity Bill	Not more than 3 months old
		Telephone Bill	Not more than 3 months old
		Driving License	Valid as on date
		Voter ID Card	
		Passport	Valid as on date
		Aadhar Card	
3	Bank Details	Cancelled Cheque OR	
		A copy of Bank Passbook / Statement	In case of Name not printed on cheque
4	KRA Form	KRA Form	
		One Photograph affix (across sign)	
5	DEMAT Form	From filled in <b>Capital Letters</b>	
		One Photograph affix (across sign)	
		Signed in 3 places	
6	Payment (Cheq / Cash / Trading)	As per Tariff Selected	
7	Witness	Witness on two places	Two witness on Nomination form
			Two witness on Agreement form

## Document Required for HUF Demat Account Opening

S.No.	Particulars	Documents	Remarks
1	Proof of Identity	PAN Card Copy	
2	Proof of Address (Any One) (if correspondence address and permanent address is different, both required)	Bank Passbook / Statement	Not more than 3 months old
		Electricity Bill	Not more than 3 months old
		Telephone Bill	Not more than 3 months old
		Driving License	Valid as on date
		Voter ID Card	
		Passport	Valid as on date
		Aadhar Card	
3	Bank Details (HUF)	Cancelled Cheque OR	
		A copy of Bank Passbook / Statement in the name of HUF	In case of Name not printed on cheque
4	KRA Form	KRA Form	
		One Photograph affix (across seal & sign)	
5	DEMAT Form	From filled in <b>Capital Letters</b>	
		One Photograph affix (across seal & sign)	
		HUF cannot have nominations/joint holders	
		Signed in 31 places	
6	Declaration	HUF mandate-mentioning list of Co-parceners	
7	Payment (Cheq / Cash / Trading)	As per Tariff Selected	
8	Witness	Witness on two places	Two witness on Nomination form
			Two witness on Agreement form
9	Seal	HUF Seal as Per Card Name	

### NOTE

- \* Photocopy of PAN Card is Compulsory
- \* In-person Verification is Compulsory
- \* All Original Documents to be brought for Verification
- \* All Documents to be self Attested by Account Holders
- \* Latest one passport size photograph is Compulsory

1. Signature can be in English or Hindi or any of the other languages contained in the 8th Schedule of the constitution of India. Thumb impression 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. Signature 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.











**PHOTOGRAPH**

Please affix your recent passport size photograph and sign across it.

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**Second Holders Details :**

Please fill this form in ENGLISH and in BLOCK LETTERS.

**A. IDENTITY DETAILS**

Name of the applicant												
Father / Husband Name												
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Marital Status	<input type="checkbox"/> Single			<input type="checkbox"/> Married						
Date of Birth						PAN						
Nationality		Status	<input type="checkbox"/> Resident Individual		<input type="checkbox"/> Non Resident		<input type="checkbox"/> Foreign National					
Unique Identification Number (UID) Aadhar, if any												
Specify the proof of mldentity Submitted												

**B. ADDRESS DETAILS**

Correspondence Address											
City / Town / Village		State									
Country		Pin Code									
Telephone No. (R)		Fax No.									
Telephone No. (O)		Mobile No.									
E-mail ID											
Specify the proof of address submitted for correspondence Address											
Permanent Address (if different from correspondence Address)											
City / Town / Village		State									
Country		PIN Code									
Specify the proof of address submitted for Permanent Address											

**C. OTHER DETAILS**

Gross Annual Income (please specify) OR	Income Range per annum : <input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1 Lakh to 5 Lakh <input type="checkbox"/> 5 Lakh to 10 Lakh <input type="checkbox"/> 10 Lakh to 25 Lakh <input type="checkbox"/> More than 25 Lakh
Net Worth as on (date) should not be older than 1 year	Net Worth (Amount)
Occupation	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Other (Specify).....
Please tick if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person
Any Other information	

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

<b>Signature of the Applicant</b>	
<b>Name</b>	<b>Signature</b>
(Signatures should be preferably in black ink.)	
<b>Date</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

**FOR OFFICE USE ONLY**

(Originals verified) True copies of documents received  (Self-Attested) Self Certified document copies received.

(.....)  
**Signature of the authorised Signatory**

**Date** \_\_\_\_\_

**Seal/Stamp of the intermediary**

57 Signature

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**Third Holders Details :****PHOTOGRAPH**Please fill this form in **ENGLISH** and in **BLOCK LETTERS**.

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Please affix your recent passport size photograph and sign across it.

**A. IDENTITY DETAILS**

Name of the applicant																						
Father / Husband Name																						
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married																	
Date of Birth												PAN										
Nationality	Status		<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident	<input type="checkbox"/> Foreign National																	
Unique Identification Number (UID) Aadhar, if any																						
Specify the proof of mIdentity Submitted																						

**B. ADDRESS DETAILS**

Correspondence Address												
City / Town / Village						State						
Country						Pin Code						
Telephone No. (R)						Fax No.						
Telephone No. (O)						Mobile No.						
E-mail ID												
Specify the proof of address submitted for correspondence Address												
Permanent Address (if different from correspondence Address)												
City / Town / Village						State						
Country						PIN Code						
Specify the proof of address submitted for Permanent Address												

**C. OTHER DETAILS**

Gross Annual Income (please specify) OR	Income Range per annum :	<input type="checkbox"/> Below 1 Lakh	<input type="checkbox"/> 1 Lakh to 5 Lakh
		<input type="checkbox"/> 5 Lakh to 10 Lakh	<input type="checkbox"/> 10 Lakh to 25 Lakh
		<input type="checkbox"/> 10 Lakh to 25 Lakh	<input type="checkbox"/> More than 25 Lakh
Net Worth as on (date) should not be older than 1 year	Net Worth (Amount)		
Occupation	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Other Specify).....		
Please tick if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person		
Any Other information			

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

**Signature of the Applicant**

<b>Name</b>	<b>Signature</b>		
(Signatures should be preferably in black ink.)			
<b>Date</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			

S10 Signature

← S11

**FOR OFFICE USE ONLY**
 (Originals verified) True copies of documents received  (Self-Attested) Self Certified document copies received.

(.....)

**Signature of the authorised Signatory**

Date \_\_\_\_\_

**Seal/Stamp of the intermediary**



# MPSE SECURITIES LIMITED

Regd Offices: 201 Palika plaza, Phase II ,M.T.H. Compound ,Indore Ph. 07314008231 to 236, Fax :2432849

## ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT

(To be filled by the Depository Participant)

Application No. <b>63541</b>										Date											
DP Internal Reference No.										Client											
DP ID	1	2	0	2	6	2	0	0	ID	0	0										

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

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

### Holder 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 person, 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"/> Other (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"/> Other (Specify).....
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National-Depository Receipts <input type="checkbox"/> Other (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							
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							
Do you wish to receive dividend/interest directly in to your bank, account given below through ECS ? (If not marked, the default option would be 'Yes')															<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"/> Other (specify) _____																
Bank Name																			
Branch Name																			
Bank Branch Address																			
City	State	Country	PIN Code																
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)																			
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				

Signature

Signature



**NOMINATION FORM**

I/we the sole holder / Joint Holders / Guardian (in case of minor ) hereby declare that :

- I / We do not wish to nominate any one for this demat account.**
- I / We **nominate** the following person who is entitled to receive security balance lying in my/ our account, particulars where of are given below, in the event of my / our death.

Full Name of the Nominee							
Address							
City		State					
Country		PIN Code					
Telephone No.		Fax No.					
PAN		UID					
Relationship with BO (If any)		E-mail ID					
Date of Birth (Mandatory if nominee is a minor)							

As the nominee is a minor as on date, to receive the securities in this account on behalf of the nominee in the event of the death of the sole holder / all joint holders, I / We appoint following person to act as **Guardian** :

Full Name of Guardian of Nominee							
Address							
City		State					
Country		PIN Code					
Telephone No.		Fax No.					
E-mail ID							
Relationship of Guardian with Nominee							

This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.

**Note : Two witnesses shall attest signature(s) / thumb impression(s)**

Details of the Witness		
	<b>First Witness</b>	<b>Second Witness</b>
Name of witness		
Address of witness		
Signature of witness		

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

**Signature of Account Holder's**

	<b>First / Sole Holder or</b>	<b>Second Holder</b>	<b>Third Holder</b>
Name			
Signatures			

Nomination Regn. No.

**63541**

Date : .....

For : **MPSE Securities Ltd.**  
(Authorised Signatory)

Application No. :

**Acknowledgement Receipt**

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	

**Depository Participant Seal and Signature**

## Rights and Obligations of Beneficial Owner and Depository Participant as Prescribed by SEBI and Depositories

### General Clause

1. The Beneficial Owner and the Depository participant (DP) shall be bound by the provisions of the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996, Rules and Regulations of Securities and Exchange Board of India (SEBI), Circulars/Notifications/Guidelines issued there under, Bye Laws and Business Rules/Operating Instructions issued by the Depositories and relevant notifications of Government Authorities as may be in force from time to time.
2. The DP shall open/activate demat account of a beneficial owner in the depository system only after receipt of complete Account opening form, KYC and supporting documents as specified by SEBI from time to time.

### Beneficial Owner information

3. The DP shall maintain all the details of the beneficial owner(s) as mentioned in the account opening form, supporting documents submitted by them and/or any other information pertaining to the beneficial owner confidentially and shall not disclose the same to any person except as required by any statutory, legal or regulatory authority in this regard.
4. The Beneficial Owner shall immediately notify the DP in writing, if there is any change in details provided in the account opening form as submitted to the DP at the time of opening the demat account or furnished to the DP from time to time.

### Fees /Charges/Tariff

5. The Beneficial Owner shall pay such charges to the DP for the purpose of holding and transfer of securities in dematerialized form and for availing depository services as may be agreed to from time to time between the DP and the Beneficial Owner as set out in the Tariff Sheet provided by the DP. It may be informed to the Beneficial Owner that "no charges are payable for opening of demat accounts"
6. In case of Basic Services Demat Accounts, the DP shall adhere to the charge structure as laid down under the relevant SEBI and/or Depository circulars/directions/notifications issued from time to time.
7. The DP shall not increase any charges/tariff agreed upon unless it has given a notice in writing of not less than thirty days to the Beneficial Owner regarding the same.

### Dematerialization

8. The Beneficial Owner shall have the right to get the securities, which have been admitted on the Depositories, dematerialized in the form and manner laid down under the Bye Laws, Business Rules and Operating Instructions of the depositories.

### Separate Accounts

9. The DP shall open separate accounts in the name of each of the beneficial owners and securities of each beneficial owner shall be segregated and shall not be mixed up with the securities of other beneficial owners and/or DP's own securities held in dematerialized form.
10. The DP shall not facilitate the Beneficial Owner to create or permit any pledge and /or hypothecation or any other interest or encumbrance over all or any of such securities submitted for dematerialization and/or held in demat account except in the form and manner prescribed in the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996 and Bye-Laws/Operating Instructions/Business Rules of the Depositories.

### Transfer of Securities

11. The DP shall effect transfer to and from the demat accounts of the Beneficial Owner only on the basis of an order, instruction, direction or mandate duly authorized by the Beneficial Owner and the DP shall maintain the original documents and the audit trail of such authorizations.
12. The Beneficial Owner reserves the right to give standing instructions with regard to the crediting of securities in his demat account and the DP shall act according to such instructions.

### Statement of account

13. The DP shall provide statements of accounts to the beneficial owner in such form and manner and at such time as agreed with the Beneficial Owner and as specified by SEBI/depository in this regard.
14. However, if there is no transaction in the demat account, or if the balance has become Nil during the year, the DP shall send one physical statement of holding annually to such BOs and shall resume sending the transaction statement as and when there is a transaction in the account.
15. The DP may provide the services of issuing the statement of demat accounts in an electronic mode if the Beneficial Owner so desires. The DP will furnish to the Beneficial Owner the statement of demat accounts under its digital signature, as governed under the Information Technology Act, 2000. However if the DP does not have the facility of providing the statement of demat account in the electronic mode, then the Participant shall be obliged to forward the statement of demat accounts in physical form.
16. In case of Basic Services Demat Accounts, the DP shall send the transaction statements as mandated by SEBI and/or Depository from time to time.

### Manner of Closure of Demat account

17. The DP shall have the right to close the demat account of the Beneficial Owner, for any reasons whatsoever, provided the DP has given a notice in writing of not less than thirty days to the Beneficial Owner as well as to the Depository. Similarly, the Beneficial Owner shall have the right to close his/her demat account held with the DP provided no charges are payable by him/her to the DP. In such an event, the Beneficial Owner shall specify whether the balances in their demat account should be transferred to another demat account of the Beneficial Owner held with another DP or to rematerialize the security balances held.
18. Based on the instructions of the Beneficial Owner, the DP shall initiate the procedure for transferring such security balances or rematerialize such security balances within a period of thirty days as per procedure specified from time to time by the depository. Provided further, closure of demat account shall not affect the rights, liabilities and obligations of either the Beneficial Owner or the DP and shall continue to bind the parties to their satisfactory completion.

### Signature of Account Holder's

	First / Sole Holder or	Second Holder	Third Holder
Name			
→ Signatures			



**Default in payment of charges**

19. In event of Beneficial Owner committing a default in the payment of any amount provided in Clause 5 & 6 within a period of thirty days from the date of demand, without prejudice to the right of the DP to close the demat account of the Beneficial Owner, the DP may charge interest at a rate as specified by the Depository from time to time for the period of such default.

20. In case the Beneficial Owner has failed to make the payment of any of the amounts as provided in Clause 5&6 specified above, the DP after giving two days notice to the Beneficial Owner shall have the right to stop processing of instructions of the Beneficial Owner till such time he makes the payment along with interest, if any.

**Liability of the Depository**

21. As per Section 16 of Depositories Act, 1996,

1. Without prejudice to the provisions of any other law for the time being in force, any loss caused to the beneficial owner due to the negligence of the depository or the participant, the depository shall indemnify such beneficial owner.

2. Where the loss due to the negligence of the participant under Clause (1) above, is indemnified by the depository, the depository shall have the right to recover the same from such participant.

**Freezing/Defreezing of accounts**

22. The Beneficial Owner may exercise the right to freeze/defreeze his/her demat account maintained with the DP in accordance with the procedure and subject to the restrictions laid down under the Bye Laws and Business Rules/Operating Instructions.

23. The DP or the Depository shall have the right to freeze/defreeze the accounts of the Beneficial Owners on receipt of instructions received from any regulator or court or any statutory authority.

**Redressal of Investor grievance**

24. The DP shall redress all grievances of the Beneficial Owner against the DP within a period of thirty days from the date of receipt of the complaint.

**Authorized representative**

25. If the Beneficial Owner is a body corporate or a legal entity, it shall, along with the account opening form, furnish to the DP, a list of officials authorized by it, who shall represent and interact on its behalf with the Participant. Any change in such list including additions, deletions or alterations thereto shall be forthwith communicated to the Participant.

**Law and Jurisdiction**

26. In addition to the specific rights set out in this document, the DP and the Beneficial owner shall be entitled to exercise any other rights which the DP or the Beneficial Owner may have under the Rules, Bye Laws and Regulations of the respective Depository in which the Demat account is opened and circulars/notices issued there under or Rules and Regulations of SEBI.

27. The provisions of this document shall always be subject to Government notification, any rules, regulations, guidelines and circulars/ notices issued by SEBI and Rules, Regulations and Bye-laws of the relevant Depository, where the Beneficial Owner maintains his/ her account, that may be in force from time to time.

28. The Beneficial Owner and the DP shall abide by the arbitration and conciliation procedure prescribed under the Bye-laws of the depository and that such procedure shall be applicable to any disputes between the DP and the Beneficial Owner.

29. Words and expressions which are used in this document but which are not defined herein shall unless the context otherwise requires, have the same meanings as assigned thereto in the Rules, Bye-laws and Regulations and circulars/notices issued there under by the depository and /or SEBI

30. Any changes in the rights and obligations which are specified by SEBI/Depositories shall also be brought to the notice of the clients at once.

31. If the rights and obligations of the parties hereto are altered by virtue of change in Rules and regulations of SEBI or Bye-laws, Rules and Regulations of the relevant Depository, where the Beneficial Owner maintains his/her account, such changes shall be deemed to have been incorporated herein in modification of the rights and obligations of the parties mentioned in this document.

Signature's 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

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**Acknowledgement**

To,  
MPSE Securities Limited  
201, Palika Plaza, Phase II, MTH Compound  
Indre-452001

Dear Sir/Madam,  
I/We hereby acknowledge receipt of the Rights and Obligations of Beneficial Owner and Depository Participant as Prescribed by SEBI and Depositories

I state that I have read and understood all above documents and these documents are binding upon me.

Yours Faithfully,

Client's Name 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Signature's 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

## Terms And Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL

### 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 reliability, 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](mailto: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

### Signature of Account Holder's

	First / Sole Holder or	Second Holder	Third Holder
Name			
Signatures			← S20

Place: Indore

Date \_\_\_\_\_



**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	2	6	2	0	0		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

<b>+91</b>															
(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)

**Signature of Account Holder's**

	First / Sole Holder or	Second Holder	Third Holder
Name			
Signatures			

<p>-Transactions Using Secured Texting Facility (TRUST) Refer to Terms and Conditions Annexure - 2.6</p>	<p>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</p> <p><input type="checkbox"/> Yes  <input type="checkbox"/> No</p> <p>I/We wish to register the following clearing member IDs under my/our below mentioned BO Id registered for TRUST</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 33%;">Stock Exchange Name / ID</th> <th style="width: 33%;">Clearing Member Name</th> <th style="width: 33%;">Clearing Member ID (Optional)</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)						
Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)								

Place: Indore

Date \_\_\_\_\_

## Demat Tariff Schedule

PARTICULARS	TRADER <input type="checkbox"/>	INVESTOR <input type="checkbox"/>	LIFE TIME (Non-refundable) <input type="checkbox"/>	LIFE TIME (Refundable) <input type="checkbox"/>
Annual Maintenance Charges (AMC)	Rs. _____ /- P.A.	N.A.	N.A.	N.A.
Scheme charges	N.A.	Rs. _____ /-	Rs. _____ /-	Deposit Rs. 2500/-
Transaction Charges on POA / ISIN	Rs. _____ /-	Rs. _____ /-	Rs. _____ /-	Rs. _____ /-
Transaction Charges ( Sell/offmkt/inte- Depository)	0.03% (Minimum Rs. 11/-)	0.04% (Minimum Rs. 20/-)	0.04% (Minimum Rs. 20/-)	0.04% (Minimum Rs. 20/-)
Applicable Notes	Point No. 1, 4, 6	Point No. 1, 2, 4, 6	Point No. 1, 2, 4, 5, 6	Point No. 1, 2, 3, 4, 5, 6

### NOTES

Fixed Charges		
1	a) Documentation b) Power of Attorney c) KRA Charges d) Extra statement e) Pledge (Creation/Invocation /Closure)	Rs. 100/- Rs. 100/- Rs. 30 /- Rs. 25/stmt Rs.0.03% (Mimi Rs. 25/-)
2	Investor & Life Time Scheme Charges are for 1st Quarter only and are non-refundable / transferable	
3	Life Time Refundable Scheme Deposit shall be refunded only after completion of 5 yrs, the deposit may increase after 5 yrs.	
4	There are no charges for Account Opening, Transaction Charges on Purchase & Custody Charges	
5	Life Time means the time up to which MPSE Securities Limited carry on Depository Participant Business, which can be even less than 1 year	
6	MPSESL reserves the right to freeze accounts for debit instructions in case client fails to pay service charge by due Date mentioned in bills.	
	f) Dematerialisation g) Rematerialisation (Postage Charges on (f) & (g) as per Actual) h) Service Tax as per applicable rates	Rs. 3/- Per Cert Rs. 15/- Per Cert

Signature

I/We Agree to above Charges.

Signature of Account Holder's			
First / Sole Holder or	Second Holder	Third Holder	
Name			
Signatures			



## Undertaking-cum-Indemnity in respect of facsimile instruction for operation of Depository Account

To  
 MPSE Securities Ltd  
 201, Palika Plaza, Phase-II,  
 M.T.H. Compound,  
 Indore -452001

Sr. No.	BO IDs	Name of holder (s)
1		First Holder
2		Second Holder
3		Third Holder

I/We

- 1) \_\_\_\_\_ residing at \_\_\_\_\_
- 2) \_\_\_\_\_ residing at \_\_\_\_\_ and,
- 3) \_\_\_\_\_ residing at \_\_\_\_\_

execute this UNDERTAKING-CUM-INDEMNITY in favour of MPSE Securities Limited (a company incorporated and registered under the Companies Act, 1956) and having its Registered Office at 201, Palika Plaza, Phase-II, M.T.H. Compound, Indore -452001 hereinafter called "**the DP**" (which expression shall unless it be repugnant to the context or meaning thereof mean and include its successors in title) as follows:

**WHEREAS** I/We maintain a Beneficial Owner Account(s) ("the said Account") mentioned above, with the DP at its located at 201 Palika Plaza, Phase-II, M.T.H. Compound, Indore -452001 As per the instructions for operation of the said Accounts, the same is allowed to be operated by us or the persons authorized, in that behalf (hereinafter referred to as "**Authorized Person/s**").

**AND WHEREAS** in the day-to-day business, I am / we are required to give urgent instructions to the DP for operation of the said Account:

**WHEREAS** the DP has agreed to accept, the original instruction slip, a fax submission, Email Scan copy Submission of thereof signed by the authorized persons to operate the said account under their signatures, subject to the indemnity herein offered by me/us to the DP on the terms and conditions herein mentioned.

**NOW IN CONSIDERATION OF THE ABOVE**, I/We hereby irrevocably agree, confirm and undertake to the DP as follows:

1. I/We shall transmit the Fax instructions and/ or Email Instruction only to the fax number or Email informed/provided to us by the DP.
2. The Fax and / or Email Submission shall be signed by the Authorized Person/s mentioned in the List of Authorized signatories submitted by me/us in the account opening form on behalf of me/us and their signatures shall be in the same manner and way as has been informed to the DP by me/us and the DP is hereby requested and authorized, (but is not obliged to) rely upon and act, in accordance with such Fax / Email Submission which is signed or bonafide believed by the DP to have been signed, by the Authorized Person/s.
3. The DP is requested by me/us and shall be entitled to treat any Fax and / or Email Submission as fully and duly authorized by and binding upon me/us and further be entitled (but not bound) to take any steps relying upon the same, believing the Fax and / or Email Submission, in good faith as appropriate, regardless, of the amount of money involved and notwithstanding any error in transmission or reception of such Fax and / or Email Submission or any misunderstanding or ambiguity or lack of clarity in the terms of such Fax and / or Email Submission.
4. I/We shall upon making any Telefax and / or Email Submission hereunder, deliver to the DP without any delay within two working days, the original hard copy of the Fax and / or Email Submission (the Hardcopy) signed by the Authorized Person/s as aforesaid. Each Hardcopy shall bear the following words on the top of the instruction slip - "This is a Hardcopy of Fax / Email Submission to you, transmitted on \_\_\_\_ (day) of \_\_\_\_ (month), \_\_\_\_ (year).
5. The DP may, but shall not be obliged to, await receipt of the Hard copy prior to taking any action in connection with the Fax Submission and shall not be obliged to follow-up with me/us for the originals. Further the storage of a photocopy / Print of the fax / Email transmission sent by me/us shall be the conclusive evidence of instruction to the DP for having acted on such instructions and I/We hereby agree and acknowledge the same".
6. I / We hereby agree that in case the DP does not receive the hard copy of the instruction within 2 working days, the DP may discontinue the said facility. In such cases the DP will do so with immediate effect after informing me orally / in writing / by fax and / or Email . I / We undertake that I / we shall not hold the DP liable for any loss to me / us in case the DP does not act on fax and / or Email instruction received by the DP in such a case.
7. The DP shall not be required to confirm (whether orally, in writing or otherwise) any fax and / or Email submission or (verify the identity of the Authorized Person/s or his/her/their signature/s making or giving the fax and / or Email submission or purporting to do so.

524 Signature \_\_\_\_\_

- 8. The DP shall be under no duty to set and/or adopt any procedure for the purpose of such confirmation or verification and if at all there is any, the DP shall not be obliged to strictly adopt or comply with the same in any or every instance.
- 9. The DP shall not be liable for any losses or damages which I/we may suffer as a consequence of the DP acting in accordance with or in reliance upon, any Fax and / or Email Submission or otherwise pursuant to the authority conferred herein, upon the DP.
- 10. I/We shall indemnify the DP and CDSL and keep them indemnified and save harmless, at all times against any and all claims, losses, damages, costs liabilities and expenses incurred, suffered or paid or incurred by the DP or required to be incurred, suffered or paid by the DP and also against all demands, actions, suit proceedings made, filed / instituted against the DP, in connection with or arising out of or in relation to or as a consequence of:
  - i. The DP acting pursuant to, in accordance with or relying upon, any Fax and / or Email Submission or otherwise pursuant to the request and authority conferred herein; and/or;
  - ii. The DP acting pursuant to in accordance with or relying upon any Fax and / or Email Submission received by the DP which it believes in good faith to be such a Fax and / or Email Submission; and / or;
  - iii. Any unauthorized or fraudulent Fax and / or Email Submission to the DP. PROVIDED that this indemnity shall not be available to the DP, if the liability, for which the DP seeks indemnification hereunder, arises directly and completely from its own negligence or willful default.
  - iv. The DP not having acted on the fax and / or Email submission due to non-receipt of the transmission or receipt of incomplete or partly / fully unreadable transmission.
  - v. The DP not having acted on any fax and / or Email submission sent by me / us on a number other than the number mentioned by the DP for the purpose of fax and/or Email transmission.
- 11. The DP shall not be under any obligation at any time to maintain any facility for the receipt of any Fax and / or Email Submission or to ensure the continued operations or availability of any such facsimile facilities or equipment, and I/we shall not hold the DP liable for any loss consequent to no availability of the said fax and/ or Email facility.
- 12. I/We acknowledge and confirm that I am/we are aware that by the very nature of telecommunications / Internet services, the Fax and or Email transmissions may not be received properly and may be clearly legible. I / We agree to assume and bear all the risks involved in respect of such errors and misunderstanding and the DP shall not be responsible in any manner for the same or breach of confidentiality thereto and shall also not be liable for any claims, loss, damage, cost or expense and liability arising there from.
- 13. This indemnity is without prejudice to the DP's other rights, privileges, powers and remedies in law and the DP may delay enforcing its rights without at any time losing them and any waiver of a right by the DP hereunder or available to it by law, shall not be deemed to be a waiver of any other rights or of the same right at another time.
- 14. The DP may stop/terminate this facility given to me / us by giving seven day prior written notice to me/us. However, any such termination shall not affect anything done or any rights or liabilities accrued or incurred prior to the termination and all the above indemnities given by me/us to the DP hereunder shall survive any such termination. However, in case of termination as mentioned in point 6 above, no such notice need to be given by the DP.

The Provisions relating to arbitration contained in the agreement executed by us in favour of the DP shall be applicable to any dispute or difference that may arise in respect of such fax and / or Email transmission including all disputes with regard to the receipt of the fax and / Email Transmission by the DP.

I/We specifically agree and confirm that regardless of the place from which the fax and / or Email transmission in question may have been transmitted to the DP any matter or issue arising hereunder shall be governed by and construed exclusively in accordance with the Indian laws and shall be subject to the exclusive jurisdiction of the Courts of Indore (India) alone.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Given by:

**Signature of account Holder's**

	First/Sole Holder	Second Holder	Third Holder
Name			
Signatures			

Details of the Witness			
	First Witness		Second Witness
Name of Witness			
Address of Witness			
Signature of Witness			



**POWER OF ATTORNEY**

Stamp

**TO ALL TO WHOM THESE PRESENT SHALL COME, I/WE \_\_\_\_\_**  
**\_\_\_\_\_ presently residing/having office at**  
**\_\_\_\_\_**

WHEREAS I/We am/are dealing in securities Market at NSE/ BSE and I / we am /are required to maintain margin in the form of securities with Stock Broker for my/our open positions and/or delivery of securities for my/ our obligations for securities sold by me/ us through SEBI registered Stock Broker.

AND WHEREAS I/We am/are desirous of appointing MPSE SECURITIES LIMITED ( here after referred to as "MPSESL" ) as my/our attorney to operate my/our Beneficiary (BO) Account no.12026200\_\_\_\_\_ with MPSE SECURITIES LIMITED(MPSESL) -DP Division on my/our behalf for transferring securities from the aforesaid BO Account to following BO Accounts or any other account which may be opened by MPSE SECURITIES LIMITED, Madhya Pradesh Stock Exchange Ltd (here after referred to as "MPSE" ) and Trading member of Madhya Pradesh Stock Exchange Ltd from time to time and intimated to me/us through e-mail or other mode of communication to hold securities as margin on my/our behalf and for meeting my/our sales obligation .

Details of B.O. Accounts

1	1202620000111337	To Meet Client BSE Delivery obligation in cash Segment
2	1202620000111322	To Meet Client BSE Delivery/ Margin obligation in cash Segment
3	1202620000111356	To Meet Client BSE Delivery obligation in cash Segment
4	1202620000111341	To Meet Client NSE Delivery/ Margin obligation in cash Segment
5	1202620000112480	To Meet Client Margin requirement in BSE cash Segment for Pledge of Securities
6	1202620000112423	To Meet Client NSE Delivery obligation in cash Segment
7	IN-301330-21101916	To Meet Client NSE Delivery obligation in cash Segment
8	IN-301330-21077408	To Meet Client NSE Delivery/ Margin obligation in cash & F& o Segment
9	IN-301330-21084840	To Meet Client BSE Delivery obligation in cash Segment
10	IN-301330-21077385	To Meet Client BSE Delivery/ Margin obligation in cash Segment
11	IN-301330-21099743	To Meet Client Margin requirement in NSE F& o Segment
12	IN-301330-21099751	To Meet Client Margin requirement in NSE Cash Market Segment
13		To Meet Clients Margin requirement / delivery obligation in cash / F&O Segment
14	12026200	for BSE/ NSE ( Broker B.O. Account ) To Meet Clients Margin requirement / delivery obligation in cash / F & O Segment for BSE/ NSE ( Broker B.O. Account )

KNOW ALL MEN BY THESE PRESENTS THAT I/ We, the above named, do hereby nominate, constitute and appoint MPSE Securities having its registered office at as my /our true and lawful attorney to do only the following acts, deeds and things and exercise only the following powers and authorities:

To operate the above mentioned my/our Beneficiary Account maintained with MPSESL-DP Division, in the name/s of \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / for

1. Issuing instruction to transfer and / or pledge securities from my/our BO Account to above mentioned BO Accounts of MPSESL,MPSE, Trading Member of MPSE for meeting my / our margin requirement for my/ our trades and to fulfil my/our obligations to deliver security sold by me / us through MPSESL , MPSE, Trading Member of MPSE at BSE/NSE counter.
2. To obtain any and all details concerning the said BO Account and to apply for Delivery Instruction Slips (DIS) and statement and other information in respect of the said BO Account and pass on the same to me/us or my/our authorised persons/entity.
3. To execute, sign and deliver such forms, instructions, applications, letters, authorities, mandate, declarations, indemnities, affidavits and other documents and writings whatsoever as may be required for giving effect to all or any of the powers or authorities conferred by and under the clause no. 1 & 2 mentioned above

Signature

Signature

Signature

4. To transfer back my/ our excess share, if any, debited to my/our BO account. AND I/We ratify the instructions given by the aforesaid MPSE Securities Ltd to the Depository Participant named hereinabove in the manner specified herein.

AND I/We hereby agree and confirm that the powers and authorities conferred by this power of attorney shall continue until I/We may revoke the same by a written communication to MPSE Securities Ltd's DP Division at Indore.

AND I/We further agree and confirm that I/We shall be bound by whatever the attorney shall do or cause to be done under or pursuant to the powers and authorities conferred by this power of attorney.

IN WITNESS WHEREOF, I/We, \_\_\_\_\_  
 \_\_\_\_\_ have set my/our hands and signatures hereto this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_.

SIGNED, SEALED AND DELIVERED By within named BO Account holder

Signature of Account Holder's

	First / Sole Holder or	Second Holder	Third Holder
Name			
→ Signatures			

'Before me, Notary

In the presence of **(Compulsory)**

Details of the Witness	First Witness	Second Witness
Name of Witness		
Address of Witness		
Signature of Witness		

We Accepted

Name: For **MPSE SECURITIES LIMITED**

Regd Offices: 201 Palika plaza, Phase II ,M.T.H. Compound ,Indore Ph. 07314008231 to 236, Fax :2432849

For **MPSE SECURITIES LIMITED**

Authorized Signatory

S29 Signature

S30





# MPSE SECURITIES LTD.

DP of Central Depository Services (India) Ltd.

DPID No. 26200 SEBI Regn. No. IN-DP-CDSL-168-2002

Regd. Office : 201, Palika Plaza, Phase II, M.T.H. Compound, Indore

Phone No. : 4008231 to 236 Fax : 0731-2432849 Website : www.mpseindia.in

## Account Closure Form

Application No.				Date									
Closure Initiated by	BO	DP	CDSL										

(To be filled by the BO. Please fill all the details in Block Letters in English)

To,  
MPSE Securities Ltd.  
Indore


Dear Sir/Madam,

I / We the Sole Holder / Joint Holder / Guardian (in case of Minor) / Clearing Member request you to close my / our account with you from the date of this application. The details of my/our account are given below -

Account Holder's Details													
DP ID	1	2	0	2	6	2	0	0	Client ID	0	0		
Name of the First / Sole Holder													
Name of the Second Holder													
Name of the Third Holder													
Address for Correspondence													
City						State						PIN	
Details of remaining security balance in the account (if any)													
Reasons for Closing the Account													
Balance remaining in the account (if any) to be :													
• Partly rematerialised and partly transferred						• Rematerialised							
• Transferred to another account (Number given below)						• Not applicable							
DP ID						Client ID							
Balance present in a/c for (To be filled by DP, if applicable)							• Ear - marked			• Pledged			
							• Pending for Dematerialisation			• Frozen			
							• Pending for Rematerialisation			• Lock - in			

### DECLARATION : In case of Account Closure due to SHIFTING OF ACCOUNT :

I/We declare and confirm that all the transactions in my/our demat account are true/authentic.

	First Sole Holder	Second Holder	Third Holder
Name			
 Signature			

\* If DP or CDSL initiates account closure, Signature(s) of account holder(s) not required.

### Instructions to Account Holder(s)

- Submit a duly filled up RRF if the balances are to be rematerialised.
- Submit a duly-filled Delivery instruction slip (DIS) (off market instruction slip) if the balances are to be transferred to another account. This requirement is not applicable in the case of "SHIFTING OF ACCOUNT".

**In-Person Verification**

**In-person** verification done by

Employee Name.....

Signature.....

Applicant's Signature(s)

**S32 Signatures**



1<sup>st</sup> ✓ \_\_\_\_\_

2<sup>nd</sup> ✓ \_\_\_\_\_

3<sup>rd</sup> ✓ \_\_\_\_\_

For Office Use Only

**CHECKLIST FOR ACCOUNT OPENING FORM**

Application No.	
Documents to be attached	Please Tick here
PAN Card Photocopy	
Address Proof	
Identity Proof	
Photograph	
Agreement	
Nomination Form	

Mandatory Fields	Please Tick here
PAN No. to be mentioned	
PIN Code	
MICR Code	
Bank A/C No.	
Phone No.	
Witness at four places	
In-person Verification	
Date of Receipt	
Date of A/c Opening	
Name & Sign. Of A/c Receiving Officer	
Name & Sign. Of A/c Opening Officer	
Receipt No.	



Application No.	53541							
DP ID	1	2	0	2	6	2	0	0
Client ID	0	0						
Client Name								

<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> NRI	<input type="checkbox"/> FOREIGN NATIONAL
<input type="checkbox"/> TRADER SCHEME	<input type="checkbox"/> INVESTOR SCHEME	
Sub-Broker Code		
Sub-Broker Name		



## MPSE SECURITIES LTD.

DP OF CENTRAL DEPOSITORY SERVICES (INDIA) LTD.  
 DPID NO. 26200 DP SEBI REGN. NO. IN-DP-CDSL-168-2002

Regd. Office : 201, Palika Plaza, Phase II, M.T.H. Compound, INDORE  
 Phone : 0731--4008231 to 236, Fax : 0731-2432849, E-mail : [depository@mpseindia.in](mailto:depository@mpseindia.in)  
 E-mail : [investorgrievancedesk@mpseindia.in](mailto:investorgrievancedesk@mpseindia.in) Website : [www.mpseindia.in](http://www.mpseindia.in)