

To,  
The South Indian Bank Ltd.,  
HO Marketing Department, Demat Centre,  
2<sup>nd</sup> Floor, Shanu Tower, No. IV/461A,  
North Kalamassery, Ernakulam-683104,  
Tel/ Fax: 0484-2933561, Email Id: demat@sib.co.in

Received Seal

### **Demat Account Application Form (Individual)**

#### **Check List**

1. **Separate KYC forms** (page 2&3) required for **each holders** in case of joint demat account.
2. **Photograph** (Recent passport size colour 3.5x3.5 cm) of all the applicants affixed on KYC form and signed across.
3. **KYC form** attached is duly filled and **signed by customer and branch official**.
4. Proof of Identity (**PAN Card** copy **self attested** and attested by Branch) of the applicant attached with the application and it is verified in person?
5. Verified **Address Proofs** supporting both correspondence & permanent address enclosed (voter's ID card/Driving License/Passport, Latest Tel Bill/Electricity Bill within 2 months). For NRI Repatriable (Passport/International Driving license Mandatory) & For NRI Non Repatrabale (Proof of Indian Address Mandatory)  
**All proofs must be self attested and Branch attested**
6. SB/CD A/C **Statement** of applicant with transaction & Cancelled **Cheque Leaf** attached?
7. Signatures are affixed by applicants in all the pages marked 'X' and Bank official marked 'Y' in black ink preferably and witnessed wherever necessary.(**2 Witnesses in nomination form**)
8. A copy of Rights and Obligations (Page 6,7 ) to be provided to the customer for reference.
- 9.. All Columns in the application filled and the data entry done in system are in **Block letters**? 10. Bank MICR code, IFSC code and **account number in 16 digit format** are entered properly in application form and system.

#### **Account Canvassed by: (Mandatory)**

Name & PPC	
Designation & Branch	
Signature of employee	

**For The South Indian Bank**

Name of the Verifying Officer: -

Signature:

PPC: -

**Authorised Signatory**

----- Please tear here -----

### **Acknowledgement Receipt**

Received nomination request from:

DP ID	1	3	0	2	7	9	0	0	Client ID							
Name																
Address																
Nomination in																
Registration No.									Registered on	D	D	M	M	Y	Y	Y

**Application No.:**

**Date:**

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

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

**Depository Participant Seal and Signature**

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



Application No. :

Please fill in ENGLISH and in BLOCK LETTERS

**A. Identity Details (please see guidelines overleaf)**

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

Name

Father's/Spouse Name

2. Gender ☐ Male ☐ Female B. Marital status ☐ Single ☐ Married C. Date of Birth 



 / 



 /

3. Nationality ☐ Indian ☐ Other (Please specify) \_\_\_\_\_

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

5. PAN 



 Please enclose a duly attested copy of your PAN Card

Aadhaar Number, if any: \_\_\_\_\_

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

☐ UID (Aadhaar) ☐ Passport ☐ Voter ID ☐ Driving Licence ☐ Others \_\_\_\_\_ (Please see guideline 'D' overleaf)

PHOTOGRAPH

Please affix  
the recent passport  
size photograph and  
sign across it

**MANDATORY- AFFIX  
PASSPORT SIZE PHOTO**

**& SIGN ACROSS X**

**B. Address Details (please see guidelines overleaf)**

1. Address for Correspondence

City / Town / Village		Country	Pin Code
State			

2. Contact Details

Tel. (Off.) (ISD) (STD)	Tel. (Res.) (ISD) (STD)
Mobile (ISD) (STD)	Fax (ISD) (STD)
E-Mail Id.	

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

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

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



 / 



 /

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

City / Town / Village		Country	Pin Code
State			

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

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

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



 / 



 /

6. Any other information: \_\_\_\_\_

**DECLARATION**

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

Place: \_\_\_\_\_

Date: \_\_\_\_\_

**SIGNATURE OF APPLICANT**

X



**FOR OFFICE USE ONLY**

AMC/Intermediary name OR code

**THE SOUTH INDIAN BANK LTD**

☐ (Originals Verified) Self Certified Document copies received

☐ (Attested) True copies of documents received

Main Intermediary

Seal/Stamp of the intermediary should contain

Staff Name  
Designation  
Name of the Organization  
Signature  
Date

Y

IPV Done ☐ on 



 / 



 /

Seal/Stamp of the intermediary should contain

Staff Name  
Designation  
Name of the Organization  
Signature  
Date

## INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

### A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients.
2. 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.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. 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.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. 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:

1. 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).
2. Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving license.
3. 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.)

1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale

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

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. 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.
6. 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.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. 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.)

1. 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.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. 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:

1. 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).
2. 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.

**Additional KYC Form for Opening a Demat Account**

**For Individuals**

**THE SOUTH INDIAN BANK LTD - 27900**

(To be filled by the Depository Participant)

Application No.				Date												
DP Internal Reference No.																
DP ID	1	3	0	2	7	9	0	0	CLIENT 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:-

**Holders Details**

<b>Sole / First Holder's Name</b>		PAN													
		UID													
<b>Second Holder's Name</b>		PAN													
		UID													
<b>Third Holder's Name</b>		PAN													
		UID													

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

**Type of Account (Please tick whichever is applicable)**

Status	Sub – Status
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual Margin Trading A/C (MANTRA) <input type="checkbox"/> Individual Director <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Minor <input type="checkbox"/> Others(specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Non Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI Non Repatriable Promoter <input type="checkbox"/> NRI- Depository Receipts <input type="checkbox"/> Others (specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National Depository Receipts <input type="checkbox"/> Others (specify) _____

**Details of Guardian (in case the account holder is minor)**

Guardian's Name	_____	PA	_____
Relationship with the applicant	_____		
I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')		[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No	
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly		
I / We request you to send Electronic Transaction-cum-Holding Statement at the <b>Email ID</b> _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to share the email ID with the RTA			<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)			

I/ We wish to receive dividend / interest directly in to _____ my bank account as given below through ECS (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time ]	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

**Bank Details [Dividend Bank Details]**

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

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

**Other Details**

<b>Gross Annual Income Details</b>	Income Range per annum:	
	<input type="checkbox"/> <input type="checkbox"/> Up to <input type="checkbox"/> Rs.1,00,000 <input type="checkbox"/> <input type="checkbox"/> Rs 1,00,000 to <input type="checkbox"/> Rs 5,00,000 <input type="checkbox"/> <input type="checkbox"/> Rs 5,00,000 to <input type="checkbox"/> <input type="checkbox"/> 10,00,000 <input type="checkbox"/> <input type="checkbox"/> Rs 10,00,000 to <input type="checkbox"/> Rs 25,00,000 <input type="checkbox"/> <input type="checkbox"/> More than <input type="checkbox"/> Rs 25,00,000	
	Net worth as on (Date)	Rs
[Net worth should not be older than 1 year]		
<b>Occupation</b>	<input type="checkbox"/> <input type="checkbox"/> Private / Public Sector <input type="checkbox"/> <input type="checkbox"/> Govt. Service <input type="checkbox"/> <input type="checkbox"/> Business <input type="checkbox"/> <input type="checkbox"/> Professional <input type="checkbox"/> <input type="checkbox"/> Agriculture <input type="checkbox"/> <input type="checkbox"/> Retired <input type="checkbox"/> <input type="checkbox"/> Housewife <input type="checkbox"/> <input type="checkbox"/> Student <input type="checkbox"/> <input type="checkbox"/> Others (Specify) _____	
<b>Please tick , if applicable:</b>	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)	
<b>Any other information:</b>		

<b>SMS Alert Facility</b> Refer to Terms & Conditions given as <b>Annexure - 2.4</b>	<b>MOBILE NO. +91</b> _____ [(Mandatory , if you are giving Power of Attorney ( POA)]  (if POA is not granted & you do not wish to avail of this facility, cancel this option).													
Transactions Using Secured Texting Facility <b>(TRUST)</b> . Refer to Terms and Conditions <b>Annexure – 2.6</b>	I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I have read and understood the Terms and Conditions prescribed by CDSL for the same. <input type="checkbox"/> Yes <input type="checkbox"/> No I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST <table border="1" style="width: 100%;"> <thead> <tr> <th><u>Stock Exchange</u> <u>Name/ID</u></th> <th><u>Clearing Member</u> <u>Name</u></th> <th><u>Clearing Member ID (Optional)</u></th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		<u>Stock Exchange</u> <u>Name/ID</u>	<u>Clearing Member</u> <u>Name</u>	<u>Clearing Member ID (Optional)</u>									
<u>Stock Exchange</u> <u>Name/ID</u>	<u>Clearing Member</u> <u>Name</u>	<u>Clearing Member ID (Optional)</u>												
<b>Easi</b>	To register for easi, please visit our website <a href="http://www.cdslindia.com">www.cdslindia.com</a> . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.													

## Nomination Details

Nomination Registration No.	Dated

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 balances lying in my/our account, particulars whereof 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)		D	D	M	M	Y	Y	Y	Y	Y	

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					
Telephone No.						Fax No.					
Relationship of Guardian with Nominee						E-mail ID					

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		
	First Witness	Second Witness
Name of witness		
Address of witness		
Signature of witness		

For, NRIs

Foreign Address											
City						State					
Country						P.O BOX					

I/We hereby declare that we have given the complete residential address as given above and we shall be informing the DP in case of any change in our address in future.


FEMA Declaration: I/We have complied with, and will continue to comply with FEMA Regulations and other applicable laws.

**Rates and Charges for Demat Account:**

I/We agree to the following Charges to be collected from my/our operative SB/CD A/c.


1. Annual maintenance Rs 200 plus service tax ( Charge is collected upfront )
2. Dematerialisation - Rs 75 plus service tax per company up to two share certificates. For every additional certificate Rs 10 should be collected.
3. Destatementisation – Rs 50 plus service tax.
4. Inter Depo/ Off market transactions – Rs 25 plus tax per transaction.
5. Unpledge / Pledge request - Rs 100 plus tax per transaction.
6. Redemption / Rematerialisation - Rs 75 plus service tax per transaction.
7. Debit Transactions Rs 25 each.

I/we agree for the periodic revisions also.

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

**Declaration:**

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

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

(Signatures should be preferably in black ink).

**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.

#### **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.

I/We have received and read the copy of Rights and Obligations document'

  <b>X</b>		
Signature of BO 1 <sup>ST</sup> Holder	Signature of BO 2 <sup>nd</sup> Holder	Signature of BO 3 <sup>rd</sup> Holder

ANNEXURE TO OPENING FORM FOR FATCA/CRS COMPLIANCE- INDIVIDUAL

(Name with address)

i) Father Name:

First	Middle	Last

ii) Spouse Name(if married):

[illegible]

6. PAN:

[illegible]

7. Occupation(specify occupation of Individual):

[illegible]

v) Country of residence as per tax laws:

[illegible]

(2 digit code as per ISO3166 List)

--	--

vi) Tax Identification Number/s(TIN)

i

[illegible]

allotted by tax resident country and

ii)

[illegible]

iii)

[illegible]

vii) TIN issuing country

[illegible]

--	--	--

--	--	--

--	--

(2 digit code as per ISO3166 List) :

viii) Place of birth:

[illegible]

ix) Country of birth:

[illegible]

(2 digit code as per ISO3166 List)

--	--

(v) Telephone No and mobile No. with code:

[illegible]

The above given details are true to best of my knowledge. I also undertake that any change in the above data will be informed to the Bank in due time.

(Signature with date)