V MATHRAN & CO PRIVATE LIMITED

SEBI Registration No.
INZ000200831 *Dt.17-09-2018*
IN-DP-850-2026 *Dt. 03-06-2026*

NSE Member Code: **90163**
BSE Member Code: **6889**

NSDL DP ID: **IN305058**

www.vmathran.com

CIN
U67120WB1997PTC086082

Registered Office
204 Vaishno Chambers,
6 Brabourne Road, Kolkata-700001
(033) 4602-2696
info@vmathran.com

DEMAT ACCOUNT OPENING KIT
NON-INDIVIDUAL

CLIENT NAME _____

CLIENT CODE _____

A/c Opening Date: ____/____/_____

⚠ **SCORES:** scores.sebi.gov.in | 1800 22 7575
⚠ **ODR Portal:** smartodr.in/login

Investments in securities market are subject to market risks.
Please read all documents carefully before signing.

ACCOUNT OPENING KIT

V Mathran & Co Private Limited is a SEBI-registered Stock Broker and Trading/Clearing Member of the National Stock Exchange of India Ltd. (NSE) and BSE Limited. The company is also a Depository Participant (DP) registered with NSDL, offering clients a seamless single-window for equity trading, derivatives trading, and depository services.

Management

Mr. Vishnu Kumar Mathran | +91 93397 03927 | vmathran@gmail.com

Mr. Pratik Mathran | +91 98308 69693 | pratik@vmathran.com

Mr. Akash Mathran | +91 98745 23451 | akash@vmathran.com

Regulatory & Grievance Contacts

Contact / Authority	Details
SEBI Registration	INZ000200831, IN-DP-850-2026
NSE Grievance	ignse@nse.co.in | (022) 2659-8190
BSE Grievance	isc.mumbai@bseindia.com | (022) 2272-8517
NSDL Grievance	relations@nsdl.com | (022) 4886-7000
SEBI SCORES Portal	https://scores.sebi.gov.in | 1800 22 7575
ODR Portal	https://smartodr.in/login
Investor Grievance (VMPL)	vmpl.investors@gmail.com | (033) 4602-2696 **Akash Mathran (Compliance Officer)**

Proprietary Trading Disclosure

Pursuant to SEBI Circular No. SEBI/MRD/SE/Cir-42/2003 dated 19th November 2003, NSE Circular NSE/INVG/PRE/2003/16 and BSE Notice No. 20031125-7 dated 25th November 2003:

V Mathran & Co Private Limited is also engaged in proprietary trading on the Stock Exchanges. Clients' transactions and proprietary transactions are kept completely segregated.

SCORES — Filing Complaints Online

How to file a complaint on SCORES:

1. Register at https://scores.sebi.gov.in or Toll Free Helpline at 1800 22 7575, 1800 266 7575
2. Provide: Name, PAN, Address, Mobile Number, Email ID
3. Your complaint will be tracked and resolved within SEBI's prescribed timelines

For unresolved grievances, initiate Online Dispute Resolution (ODR) at: https://smartodr.in/login

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

Important Instructions:

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

For office use only Application Type* ☐ New ☐ Update

(To be filled by financial institution) KYC Number *(Mandatory for KYC update request)*

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

☐ Name*

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

Date of Incorporation / Formation* D D – M M – Y Y Y Y Date of Commencement of Business D D – M M – Y Y Y Y

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

PAN * Form 60 furnished

TIN / GST Registration Number

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

☐ Officially valid document(s) in respect of person authorised to transact
☐ Certificate of Incorporation / Formation ☐ Registration Certificate Regn Certificate No.
☐ Memorandum and Articles of Association ☐ Partnership Deed ☐ Trust Deed
☐ Resolution of Board / Managing Committee ☐ Power of attorney granted to its manager, officers or employees to transact on its behalf
☐ Activity Proof - 1 (For Sole Proprietorship Only) ☐ Activity Proof - 2 (For Sole Proprietorship Only)

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

3.1 Registered Office Address / Place of Business*

Proof of Address* ☐ Certificate of Incorporation / Formation ☐ Registration Certificate ☐ Other Document
Line 1*
Line 2
Line 3 City / Town / Village*
District* PIN / Post Code* State / U.T Code* ISO 3166 Country Code*

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

Line 1*
Line 2
Line 3 City / Town / Village*
District* PIN / Post Code* State / U.T Code* ISO 3166 Country Code*

☐ 4. CONTACT DETAILS (All communications will be sent to Mobile number/ Email-ID provided" may be used) (Please refer instruction **D** at the end)

Tel. (Off) – FAX –
Mobile – Email ID
Mobile – Email ID

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

MANDATORY

☐ 6. REMARKS (If any)

7. APPLICANT DECLARATION (Please refer Instruction **G** at the end)

- 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.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

[Signature / Thumb Impression]

Signature / Thumb Impression of Authorised Person(s)

Date : D D – M M – Y Y Y Y Place:

8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ Equivalent e-document

IPV & KYC VERIFICATION CARRIED OUT BY

Identity Verification ☐ Done Date D D – M M – Y Y Y Y

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

INSTITUTION DETAILS

Name **V MATHRAN & CO PRIVATE LIMITED**

Code **IN4218**

[Institution Stamp]

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Legal Entity / Other than Individuals KYC Application Form

A Clarification / Guidelines for filing Entity Details section

1 Entity Constitution Type

A - Sole Proprietorship
B - Partnership Firm
C - HUF
D - Private Limited Company
E - Public Limited Company
F - Society
G - Association of Persons (AOP) / Body of Individuals (BOI)
H - Trust
I - Liquidator
J - Limited Liability Partnership
K - Artificial Liability Partnership
L - Public Sector Banks
M - Central/State Government Department or Agency
N - Section 8 Companies (Companies Act, 2013)
O - Artificial Jurisdical Person
P - International Organisation or Agency /Foreign Embassy or Consular Office etc.
Q - Not Categorized
R - Others
S - Foreign Portfolio Investors

2 In case of companies and partnerships, PAN of the entity is mandatory. In case of other entitites, FORM 60 may be obtained if PAN is not available.

B Clarification / Guidelines for filling 'Proof of Identity[PoI]' section

1 Activity Proof - 1 and Activity Proof - 2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
2 Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
3 Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
4 'Equivalent e-document' means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
5 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
6 KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.

C Clarification / Guidelines for filling 'Proof of Address [PoA]' section

1 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
2 Certified copy of document or equivalent e-document to be submitted.

D Clarification / Guidelines for filling 'Contact Details' section

1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
2 Do not add '0' in the beginning of Mobile number.

E Clarification / Guidelines for filling 'Related Person Details' section

1 Personal Details
- The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.

2 Proof of Address [PoA]
- PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
- REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.

3 If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.
4 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.

F Provision for capturing signature of multiple authorised persons is to be made by the RE.

MANDATORY

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person

Important Instructions:

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

For office use only (To be filled by financial institution) Application Type* ☐ New ☐ Update ☐ Delete
KYC Number (Mandatory for KYC update and delete request)

1. DETAILS OF RELATED PERSON* (Please refer instruction E at the end)

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details

KYC Number of Related Person (if available*) *If KYC number is available, only 'Related Person Type' & 'Name' is mandatory*

Related Person Type* ☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointment Official ☐ Proprietor ☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify)

DIN (Director Identification Number) *(Mandatory if Related Person Type is Director)*

1.1 PERSONAL DETAILS (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)				
Maiden Name				
Father / Spouse Name				
Mother Name				

Date of Birth* D D – M M – Y Y Y Y

Gender* ☐ M- Male ☐ F- Female ☐ T-Transgender

Nationality* ☐ IN- Indian ☐ Others (ISO 3166 Country Code ☐☐)

PAN* ☐ Form 60 furnished

1.2 PROOF OF IDENTITY AND ADDRESS* (Please refer instruction E at the end)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number
- ☐ B-Voter ID Card
- ☐ C- Driving Licence
- ☐ D-NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar

II ☐ E-KYC Authentication

III ☐ Offline verification of Aadhaar

☐ PHOTO*

Address

Line 1*
Line 2
Line 3 City / Town / Village*
District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

☐ 1.3. CURRENT ADDRESS DETAILS (Please refer instruction E and the end)

☐ Same as above mentioned address (In such cases address details as below need not be provided)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number
- ☐ B-Voter ID Card
- ☐ C- Driving Licence
- ☐ D-NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar

II ☐ E-KYC Authentication

II ☐ Offline verification of Aadhaar

IV ☐ Deemed PoA

☐ Self Declaration

MANDATORY

Address

Line 1*

Line 2

Line 3 City / Town / Village*

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

1. 4 CONTACT DETAILS (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

Tel. (Off) – Tel. (Res) – Mobile –

Email ID

2. APPLICANT 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.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : D D – M M – Y Y Y Y Place:

Signature /Thumb Impression of Applicant

3. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification ☐ Digital KYC process ☐ Equivalent e-document

IPV & KYC VERIFICATION CARRIED OUT BY

Date D D – M M – Y Y Y Y

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

INSTITUTION DETAILS

Name **V MATHRAN & CO PRIVATE LIMITED**

Code **IN4218**

[Institution Stamp]

MANDATORY

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person

Important Instructions:

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

For office use only (To be filled by financial institution) Application Type* ☐ New ☐ Update ☐ Delete
KYC Number (Mandatory for KYC update and delete request)

1. DETAILS OF RELATED PERSON* (Please refer instruction E at the end)

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details

KYC Number of Related Person (if available*) *If KYC number is available, only 'Related Person Type' & 'Name' is mandatory*

Related Person Type* ☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointment Official ☐ Proprietor ☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify)

DIN (Director Identification Number) *(Mandatory if Related Person Type is Director)*

1.1 PERSONAL DETAILS (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)				
Maiden Name				
Father / Spouse Name				
Mother Name				

Date of Birth* D D – M M – Y Y Y Y

Gender* ☐ M- Male ☐ F- Female ☐ T-Transgender

Nationality* ☐ IN- Indian ☐ Others (ISO 3166 Country Code ☐☐)

PAN* ☐ Form 60 furnished

1.2 PROOF OF IDENTITY AND ADDRESS* (Please refer instruction E at the end)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number
- ☐ B-Voter ID Card
- ☐ C- Driving Licence
- ☐ D-NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar

II ☐ E-KYC Authentication

III ☐ Offline verification of Aadhaar

☐ PHOTO*

Address

Line 1*
Line 2
Line 3 City / Town / Village*
District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

☐ 1.3. CURRENT ADDRESS DETAILS (Please refer instruction E and the end)

☐ Same as above mentioned address (In such cases address details as below need not be provided)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number
- ☐ B-Voter ID Card
- ☐ C- Driving Licence
- ☐ D-NREGA Job Card
- ☐ E- National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar

II ☐ E-KYC Authentication

II ☐ Offline verification of Aadhaar

IV ☐ Deemed PoA

V ☐ Self Declaration

MANDATORY

Address

Line 1*

Line 2

Line 3 City / Town / Village*

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

1. 4 CONTACT DETAILS (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

Tel. (Off) – Tel. (Res) – Mobile –

Email ID

2. APPLICANT 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.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : D D – M M – Y Y Y Y Place:

Signature /Thumb Impression of Applicant

3. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification ☐ Digital KYC process ☐ Equivalent e-document

IPV & KYC VERIFICATION CARRIED OUT BY

Date D D – M M – Y Y Y Y

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

INSTITUTION DETAILS

Name **V MATHRAN & CO PRIVATE LIMITED**

Code **IN4218**

[Institution Stamp]

MANDATORY

KNOW YOUR CLIENT (KYC) Application Form - *For Non Individuals*

☐ NEW ☐ CHANGE REQUEST (Please tick ✓ the appropriate)

Acknowledgement No.

NSDL
Technology, Trust & Reach

Please fill this form in ***ENGLISH*** and in ***BLOCK LETTERS***
(Please tick ✓ the box on left margin of appropriate row where ***CHANGE/CORRECTION*** is required and provide the details in the corresponding row)

A IDENTITY DETAILS

1. Name of the Applicant

2a. Date of incorporation D D / M M / Y Y Y Y 2b. Place of incorporation

3. Date of commencement of business D D / M M / Y Y Y Y

4a. PAN

4b. Registration No. (e.g. CIN)

5. Status (Please tick ✓ the appropriate)

☐ Private Limited Co.	☐ Public Ltd. Co.	☐ Body Corporate	☐ Partnership	☐ Trust
☐ Charities	☐ NGO's	☐ FI	☐ FII	☐ HUF
☐ AOP	☐ Bank	☐ Government Body	☐ Non-Government Organization	☐ Defense Establishment
☐ BOI	☐ Society	☐ LLP	☐ FPI - Category I	☐ FPI - Category II
☐ FPI - Category III	☐ Others (Please specify)			

B ADDRESS DETAILS

1. Address for Correspondence

City / Town / Village Pin Code
State Country

2. Specify the Proof of Address submitted for Correspondence Address:

3. Contact Details

Tel. (Off.) Fax
Tel. (Res.) Mobile No
E-Mail Id

4. Registered Address (If different from above)

City / Town / Village Pin Code
State Country

C OTHER DETAILS (If space is insufficient, enclose these details separately [Illustrative format enclosed])

1. Name, PAN, residential address and photographs of Promoters/Partners/Karta/Trustees and whole time directors:

2a. DIN of whole time directors :

2b. Aadhar number of Promoters/Partners/Karta :

D DECLARATION

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

Date: D D / M M / Y Y Y Y

☐ Name & Signature of the Authorised Signatory

FOR OFFICE USE ONLY

In Person Verification (IPV) Details:

Name of the person who has done the IPV:

Designation: Employee ID:

Name of the Organization:

Date of IPV: D D / M M / Y Y Y Y

Signature of the person who has done the IPV

Seal/Stamp of the Intermediary

☐ Originals Verified and Self Attested Document copies received

Date Signature of the Authorised Signatory

MANDATORY

1. Name

2. Relationship with Applicant *(i.e. promoters, whole time directors etc.)*

3a. PAN 3b. DIN

3c. Aadhar (UID) Number

4. Residential/ Registered Address

City / Town / Village Pin Code

State Country

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

1. Name

2. Relationship with Applicant *(i.e. promoters, whole time directors etc.)*

3a. PAN 3b. DIN

3c. Aadhar (UID) Number

4. Residential/ Registered Address

City / Town / Village Pin Code

State Country

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

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Please affix your recent passport size photograph and sign across it

1. Name

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3a. PAN 3b. DIN

3c. Aadhar (UID) Number

4. Residential/ Registered Address

City / Town / Village Pin Code

State Country

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

1. Name

2. Relationship with Applicant *(i.e. promoters, whole time directors etc.)*

3a. PAN 3b. DIN

3c. Aadhar (UID) Number

4. Residential/ Registered Address

City / Town / Village Pin Code

State Country

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it

Name & Signature of the Authorised Signatory (ies)

Date: D D / M M / Y Y Y Y

CLIENT INFORMATION & DOCUMENT CHECKLIST

DOCUMENT CHECKLIST — NON-INDIVIDUAL (CORPORATE / PRIVATE LIMITED)

#	Document Required	Details / Acceptable Proofs	☐
1	**PAN Card of the Company**	Company PAN — mandatory Proof of Identity.	☐
2	**Proof of Address of the Corporate (any one)**	MCA Form INC-22 / Income Tax Return / Electricity Bill / GST Certificate / Rent Agreement.	☐
3	**MOA & AOA + Certificate of Incorporation**	Memorandum & Articles of Association and Certificate of Incorporation.	☐
4	**Board Resolution**	Authorising opening of Demat (if applicable) & Trading Account and naming persons authorised to operate them.	☐
5	**List of Authorised Signatories (on letterhead, current date)**	Name, Designation, Address, Photo, Specimen Signature.	☐
6	**List of Directors (on letterhead, current date)**	Name, Address, Mobile No., Email ID, PAN No., DIN No., Aadhaar No.	☐
7	**ID Proof of Directors**	PAN Card of each Director.	☐
8	**Address Proof of Directors (any one)**	Aadhaar / Passport / Voter ID / Driving Licence / Telephone Bill / Electricity Bill / Rent Bill.	☐
9	**Latest Shareholding Pattern**	Name, No. of Shares, Face Value, Total Amount, % of Shares.	☐
10	**Beneficial Owner (BO) KYC**	PAN, POA & Shareholding Pattern of entity holding >15% (individual) / >25% (non-individual) in the shareholding pattern.	☐
11	**Bank Statement — last 3 months**	Latest statement, not older than 2 months.	☐
12	**Audited Annual Accounts — last 2 FYs**	Audited Reports + Net-worth Certificate (not older than one year).	☐
13	**Cancelled Cheque / Cheque of Rs. 1,500**	Towards Demat A/c opening — 1-year AMC charges (if applicable).	☐
14	**Client Master List (CML)**	Incase client opts to open only trading account	☐
15	**Other KYC Information**	Company Email ID; each Director's Mother's Name, Income Range, Profession, Mobile/Email; Director photographs — 3 copies each.	☐

KYC FILLING & ATTESTATION GUIDELINES

- **Attestation:** Copies of all documents must be self-attested by the authorised signatory and produced with originals for verification. In their absence, copies may be attested by a Notary Public, Gazetted Officer, or Manager of a Scheduled Commercial Bank (Name, Designation & Seal).
- **PAN & Matching:** PAN is mandatory for the entity and all Directors, unless specifically exempt. Name & address on the KYC form must match the documentary proof submitted.
- **POA:** Proof of Address is required only if the Proof of Identity does not carry an address, or the address is invalid. Submit proofs for both if correspondence and registered addresses differ.
- **Annual Update:** Every year the entity must resubmit: audited Balance Sheets for the last 2 FYs, and the latest shareholding pattern certified by the Company Secretary / Whole-time Director / MD.
- **FATCA/CRS:** All clients must declare tax residency status. NRIs & foreign nationals must complete FATCA/CRS annexure.
- **UBO & Language:** Identify and complete KYC for all Ultimate Beneficial Owners (UBOs) holding control directly or indirectly, per SEBI takeover regulations. Any proof in a foreign language must be accompanied by an English translation.
- **DDPI:** Demat Debit & Pledge Instruction replaces the old Power of Attorney (POA). Signing DDPI is optional but recommended for smooth settlement.

DEMAT ACCOUNT OPENING FORM (FOR NON-INDIVIDUALS)
V MATHRAN & CO PRIVATE LIMITED
DP ID IN305058

CLIENT ID									**Date**										

(To be filled by Participant)

We request you to open a Depository Account in our name as per the following details:

(Please fill all the details in CAPITAL LETTERS only)

A) DETAILS OF ACCOUNT HOLDER(S) :

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

B) Type of account

☐ Body Corporate ☐ FI ☐ FIi
☐ Qualified Foreign Investor ☐ Mutual Fund ☐ Trust
☐ Bank ☐ CM ☐ HUF ☐ Others(Please specify) _____

C) For HUF, Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., although the account is opened in the name of the karta, partner(s), trustee(es) etc., the name & PAN of the HUF, Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., should be mentioned below :

Name		**PAN**										

D) Income Details (Rs.) (please specify) - Income Range per annum

☐ Below 20 Lac ☐ 20 - 50 Lac ☐ 50 Lac - 1 Crore ☐ Above 1 Crore, and

Networth Amount		as on (Date)								

E) In case of FIIs/Others (as may be applicable)

RBI Approval Reference No.		**RBI Approval date**								

SEBI Registration Number (for FIIs)	

F) BANK DETAILS :

Bank A/c Type	☐ Savings Account ☐ Current Account ☐ Others (Please specify)_____
Bank A/c No.	
Bank Name	
Branch Address	
City/town/village	Pin Code
State	Country
MICR Code	IFSC

MANDATORY

G) Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/ Karta/Trustees/whole time directors:	☐ Politically Exposed Person (PEP) ☐ Related to Politically Exposed Person (RPEP)

H) Clearing Member Details (to be filled up by Clearing Members only)

Name of Stock Exchange	
Name of Clearing Corporation/ Clearing House	
Clearing Member ID	
SEBI Registration Number	
Trade Name	
CM-BP-ID **(to be filled up by Participant)**	

I) STANDING INSTRUCTIONS :

1. We authorise you to receive credits automatically into our account	☐ Yes ☐ No
2. Account to be operated through Demat Debit & Pledge Instruction(DDPI)	☐ Yes ☐ No
3. I/We wish to receive the DIS Booklet with Account Opening	☐ Yes ☐ No
4. Standing Instruction indicator for Auto-Pledge confirmation	☐ Yes ☐ No

3. SMS Alert facility :

Sole/First Holder	☐ Yes ☐ No	Second Holder	☐ Yes ☐ No	Third Holder	☐ Yes ☐ No

4. Mode of receiving Statement of Account *(Tick any one)*	☐ Physical Form ☐ Electronic Form
(Read Note 3 and ensure that email ID is provided in KYC Application Form)	
5. Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository Participant *(Tick any one)*	☐ Physical Form ☐ Electronic Form
6. We would like to instruct the DP to accept all pledge instruction of my/our account without any further instruction from me/our end. (If not marked, the default option would be NO.)	☐ Yes ☐ No
7. We would like to share the e-mail Id with the RTA	☐ Yes ☐ No
8. Option to receive Annual Reports, AGM, Notices & Other Communications from Issuer & RTA is physical form	☐ Yes ☐ No

J) LIST OF FAMILY MEMBERS (SEPARATE ANNEXURE MAY BE USED IN CASE NUMBER OF MEMBER IS HIGHER)

Sl. No.	Name of Coparcener / Member	Gender	Date of Birth	Relation with Karta	*Whether Coparcener/ Member (Please specify)

*** Son, daughter, grandson & grand-daughter will be Co-parceners. Spouse, daughter-in-law will be Members.**

L) ☐ I/We wish to make one time Self-declaration for Inter-Depository transfer of Government Securities. **[As per details given below]**

☐ I/We do not wish to make one time Self-declaration for Inter-Depository transfer of Government Securities.

Declaration Details	I/We hereby declare that I/We will submit only those Inter-Depository transfer Instructions in respect of Government Securities (G-Sec) which are bonafide and arising out of genuine trade or transfer transaction.

MANDATORY

DECLARATION

The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by us and we have understood the same and we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. We hereby declare that the details furnished above are true and correct to the best of our knowledge and belief and we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false our untrue or misleading or misrepresenting, we are aware that we may be held liable for it. **We acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".**

Authorised Signatories (Enclose a Board Resolution for Authorised Signatories. For HUF, details of Karta to be given)

Sole/First Holder	Name	Signature(s)
First Signatory/ Karta of HUF		
Second Signatory		
Third Signatory		
Other Holders		
Second Holder		
Third Holder		

Mode of Operation for Sole/First Holder {In case of joint holdings, all the holders must sign. In case of HUF, this is not applicable.)

☐ Any one singly	
☐ Jointly by	
☐ As per resolution	
☐ Others (please specify)	

NOTES:

1. In case of additional signatures, separate annexure should be attached to the application form.
2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or Notary Public or a Special Executive Magistrate.
3. For receiving Statement of account in electronic form:
   a. Client must ensure the confidentiality of the password of the email account.
   b. Client must promptly inform the Participant if the email addresses has changed.
   c. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
4. Strike off whichever is not applicable.
5. Board resolution (only for corporates) on company letterhead & duly certified to be true.

= =

Acknowledgement

V MATHRAN & CO PRIVATE LIMITED

DP ID IN305058

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

Date:

INTRODUCER DETAILS (optional)	
Name of the Introducer	
Status of the Introducer	☐ Remisier ☐Authorized Person ☐Existing Client
	☐ Others, please specify
Address and Phone No. of the Introducer	
Signature of the Introducer	✓

DECLARATION

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

2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.

3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website, if any.

Place: _____

✓_____

Date: _____ **Signature of Client/ (all) Authorized Signatory (ies)**

FOR OFFICE USE ONLY

UCC Code allotted to the Client: _____ Demat Beneficiary ID_____

	Documents verified with Originals	Client Interviewed By
Name of the Employee		
Employee Code		
Designation of the employee		
Date		
Signature		

I / We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non- mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.

Signature of the Authorized Signatory

Date: **Seal/Stamp of the stock broker**

TARIFF SHEET

DP CHARGES - NSDL	
PARAMETER	**CHARGES**
Account Opening	Nil
Annual Maintenance Charges: For Individual For Corporate For BSDA Clients	 Rs. 500/- Rs. 1500/- For Holding Value Under 4Lakhs: Nil For Holding Value 4LAC to10 Lakhs ₹100/-
Transaction Charges: Market Delivery Off- Market / Inter Depository Delivery	 Rs. 25/- Rs. 35/- or 0.035% *(whichever is higher)*
Conversion of MF units represented by SOA in Demat	Rs. 100/- *per instruction*
Reconversion of MF units into SOA	Rs. 100/- *per instruction*
Redemption of MF units	Rs. 25/- *per instruction*
Margin Pledge Creation	Rs. 10/- *per instruction*
Margin Re- Pledge	Rs. 10/- *per instruction*
Margin Pledge Release	Rs. 10/- *per instruction*
Margin Pledge Invocation CM/TM	Rs. 10/- *per instruction*
Dematerialisation	Rs. 10/- per certificate [Min. Rs. 100/- per request] Plus courier charges Rs. 50/-
Rematerialisation	Rs. 15/- per 100 Quantity or a flat fee of Rs. 15/- per certificate *(whichever is higher)*
Pledge Creation	Rs. 50/-
Pledge Invocation	Rs. 50/-
Pledge Closure	Rs. 25/-
Client Master Modification	Rs. 50/- [Plus courier charges Rs. 50/-]
Clients Account Freeze/Unfreeze	Rs. 100/- [Plus courier charges Rs. 50/-]

Important Notes: • A Settlement Fee @ Rs. 4/- per Debit instruction in a Client Account shall be charged to the Participant of the Client

- All DP charges above are inclusive of NSDL charges. They are indicative and subject to NSDL circulars and revisions.
- All charges subject to applicable GST @18% unless stated otherwise. Updated available at *www.vmathran.com*
- Brokerage rates are as agreed at the time of account opening. Any changes will be communicated 30 days in advance.
- **Penalty on non-maintenance of minimum 50% Cash:Collateral ratio – upto 18% p.a. on shortfall of Cash Component**

✓_____

Signature Of Client

COMMUNICATION & DIGITAL CONSENT FORM

Client Name: _____
Client Code (UCC): _____
Email ID: _____
Mobile Number: _____

I/We hereby authorize V Mathran & Co Private Limited ("VMPL") to communicate with me/us through the contact details provided above. I/We consent to receive:

☐ Contract Notes and Trade Confirmations
☐ Ledger, Holding and Margin Statements
☐ Regulatory Alerts and Exchange Communications
☐ Research Reports and Market Updates
☐ Trading Ideas and Investment Insights
☐ Corporate Announcements and Product Information
☐ SMS Alerts
☐ WhatsApp Communications
☐ Email Communications

I/We confirm that:

1. Above email address and mobile number belong to me/us or have been validly authorized by me/us.
2. I/We shall promptly inform VMPL of any change in the above contact details.
3. Communications sent to the registered email address and/or mobile number shall be deemed delivered.
4. VMPL shall not be responsible for non-delivery arising from network issues, inactive accounts, mailbox limitations, service interruptions or circumstances beyond its control.
5. Any market views, research reports, alerts or trading ideas shared by VMPL are for informational purposes only and shall not be construed as guaranteed returns or investment assurance.
6. All investment and trading decisions shall be taken by me/us independently after considering my/our financial situation, risk profile and investment objectives.
7. This consent shall remain valid until revoked by me/us through written communication.

✓_____
Signature Of Client

DECLARATION IN CASE OF SAME MOBILE NUMBER AND / OR EMAIL ID FOR DIFFERENT CLIENTS

Client ID		Date	
Name of account Holder			
☐ Mobile Number			
☐ Email ID			
I hereby declare that the aforesaid mobile number or E-mail ID belongs to ☐ Me or ☐ My family (spouse, dependent children and dependent parents).			
Signature of account holder	✓		
Name of account Holder			

CONSENT LETTER FOR RECEIVING ALERTS/ TRADING CALLS ON MOBILE/ WHATSAPP / EMAIL

Dear Madam/Sir,

I/We hereby give my/our consent to VMPL to give me/us Alerts, Trading Calls, Research Reports, News, Live Updates or any other information on my Email ID given earlier for Electronic Communication and also on my mobile number.

This shall not be treated as violation of any DND or any other similar rules applicable from time to time. The number may be given to the exchange database also. Further, I/we undertake to VMPL and confirm to use my/our own judgment in taking a view and execute trade in the identified security(ies) according to my/our financial strength/capabilities and shall not hold VMPL responsible for any loss suffered by me/us on account of executing or omitting to execute any trades in pursuance of such communication and/or investment advises sent by VMPL.

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

✓_____

Signature Of Client

CONSENT LETTER FOR EMAIL AND MOBILE ALERT FACILITIES

Dear Madam/Sir,

This is with reference to my/our trading account opened with you; I/we request you arrange facility of receiving email and/ or mobile alert facility issued by Exchange in compliance with regulation and guidelines issued by concern authorities from time to time.

Email Facility	**Service Required -** YES ☐NO
Email ID	
Owned by- Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	✓
SMS Facility	**Service Required** -YES☐ NO☐
Mobile Number	
Owned by- Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	✓

* Please specify the Name and PAN detail in case email id and/or Mobile Number is other than that of the client. In this regards we state the following:

1. This is to further confirm that it will be my/our responsibility that my/our Email ID and/or Mobile Number are active and the relevant Inbox is not full. Further, the trading member will not be held liable for the mails and / or SMS alert not received.
2. I/we undertake that any change in my/our Email ID and/or Mobile Number shall be communicated to you in writing through a physical letter.
3. I/we agree that this authority shall be valid, until it is revoked by me/us at any time by giving a written notice to V Mathran & Co Private Limited.

✓_____

Signature Of Client

DECLARATION & LETTER OF UNDERSTANDING

To,
V Mathran & Co Private Limited ("VMPL")

I/We hereby confirm and agree as follows:

1. VMPL may adjust credit balances, margins and collateral available in any of my/our accounts against obligations arising in any other account, segment or exchange maintained with VMPL, subject to applicable regulations.
2. I/We understand that trading instructions may be placed through approved communication channels, including telephone, recorded lines, online platforms and other modes permitted by VMPL. I/We shall be responsible for all instructions originating from me/us or my/our authorized representative.
3. I/We authorize VMPL to retain or withhold funds and/or securities towards margin requirements, settlement obligations, debit balances, penalties, statutory dues or other liabilities arising from my/our transactions.
4. I/We acknowledge that securities markets operate through electronic systems and communication networks. Delays, interruptions, connectivity issues, exchange outages, system failures or other circumstances beyond VMPL's control may affect order execution, modification or cancellation.
5. VMPL shall not be liable for losses arising from events beyond its reasonable control, including system failures, communication disruptions, regulatory actions, natural calamities, strikes, riots, war or other force majeure events.
6. Any penalties, charges, interest, auction obligations or regulatory levies arising from my/our transactions may be debited to my/our account.
7. Any discrepancy relating to contract notes, ledger statements, fund balances or securities balances should be brought to the notice of VMPL promptly upon receipt.
8. I/We undertake to provide all information and documentation required under Anti-Money Laundering (AML), Know Your Client (KYC) and regulatory requirements and understand that VMPL may report transactions to regulatory authorities wherever required under applicable laws.
9. This declaration shall remain valid until revoked by me/us in writing, subject to settlement of all outstanding obligations.

I/We confirm that I/we have read, understood and accepted the above terms.

✓_____

Signature Of Client

Voluntary information provided by client in relation to the Prevention of Money Laundering Act, 2002

Name of the Client : _____

If Business / Profession: Nature of business: _____

Details of my/our Relatives, having account with **V Mathran & Co Private Limited**:

Name	Relationship	UCC (Client Code)
1.		
2.		

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

Name	Entity Type	Nature of Business	Relationship	UCC (Client Code)
1.				
2.				

I/We hereby submit and agree to submit every year any one of the following documents to V Mathran & Co Private Limited, before the due date as prescribed by V Mathran & Co Private Limited:

1. Profit and Loss Account & Capital Account
2. Balance Sheet
3. Self-attested copy of Income Tax Return (If return not available, I/we will furnish Form 16)
4. Copy of Form 16 in case of Salary Income
5. Any other document providing financial details of the client

☐ I/We hereby declare that I/We do not fall under Clients of Special Category as defined in Prevention of Money Laundering Act 2002, OR

☐ I/We hereby declare that I/We fall under Clients of Special Category as defined in Prevention of Money Laundering Act, 2002 (choose the relevant category as under)

☐ Non Resident Client, ☐High Net-worth Clients, ☐Trust, Charties, Non- Governmental Organisations (NGOs) and organizations receiving donations, ☐Companies having close family shareholdings or beneficial ownership,

☐ Politically Exposed Persons, ☐Companies Offering foreign exchange offerings, ☐Clients in high risk countries where existence/ effectiveness of money laundering controls is suspect, ☐Non face to face clients, ☐Clients with dubious reputation as per public information available etc.

I/We confirm that I/We will immediately inform V Mathran & Co Private Limited in case I/We am/are convicted under any grounds or any action is taken against me/us by any authority(ies).

I/We intend to invest in the stock market with: □ Own Funds □ Borrowed Funds
(If Borrowed Funds, then please specify below Sources of funds :)

Sources of Borrowed Funds (if any)	Amount (₹)

(Certificated / Opinion Report from the Banker / Financial Institution confirming that there has been no default in the client's account is to be attached, which I/We agree to attach herewith.)
I/We hereby declare that I/We am/are beneficial owner of the Trading / On-line account opened with V Mathran & Co Private Limited, and that I/We am/are investing my/our own funds with V Mathran & Co Private Limited.

✓ _____ _____
Client Signature **Client's Name**

FOR OFFICE USE ONLY

Risk categorization of client as per PMLA, 2002: ☐High Risk ☐Medium Risk ☐Low Risk

DECLARATION OF ULTIMATE BENEFICIAL OWNERSHIP

(Mandatory for Non-Individuals)

Investor Name_____ PAN_____

Part I - LISTED COMPANY / ITS SUBSIDIARY COMPANY [If applicable, Part II Not Applicable] We hereby declare that the Applicant/ Owner of the controlling interest in the applicant

☐ is a Company listed on a Stock Exchange

☐ is a majority-owned subsidiary of a Company listed on a Stock Exchange

Name of the holding/ parent company (with % share)_____

Name of such Listed Company (if not the Applicant itself)_____

Stock Exchange where listed_____ Security ISIN_____

Part II - OTHER THAN LISTED COMPANY / ITS SUBSIDIARY COMPANY

Name & Address of the Ultimate Beneficial Owner [UBO]	PAN or any other identification proof where PAN not applicable	Country of tax residency	% of beneficial interest in the Applicant	Whether Politically Exposed?	UBO Code (see instruction next page)
(1)					
(2)					
(3)					

If UBO is already KYC compliant, KYC complied proof to be enclosed. Else PAN or any other valid identity proof and address proof must be attached (self-certified by the UBO and certified by the Applicant)

Part III - DECLARATION

We understand that V Mathran & Co Private Limited is relying on this information for the purpose of determining the beneficial ownership of the account. We certify that the information we provided on this form is true and complete to the best of our knowledge and belief. We agree to submit a new form within 30 days if any information or certification on this form gets changed.	✓ Authorised Signatory [with seal] Date : Place :

In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit.

MANDATORY

GENERAL INFORMATION & INSTRUCTIONS

As per SEBI Master Circular No. CIR/ISD/AML/3/2010 dated December 31, 2010 regarding Client Due Diligence policy, related circulars on anti-money laundering and SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

Ultimate Beneficiary Owner [UBO]:

A. **For Investors other than individuals or trusts:**

(i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:

- more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company:
- more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership;
- more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.

(ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.

(iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

B. **For Investors which is a trust:**

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

C. **Exemption in case of listed companies/foreign investors**

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/ MIRSD/ 11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client.

UBO Code Description

UBO-1 : Controlling ownership interest of more than 25% of shares or capital or profits of the Applicant, where the Applicant is a company UBO-2 : Controlling ownership interest of more than 15% of the capital or profits of the Applicant, where the Applicant is a partnership UB0-3 : Controlling ownership interest of more than 15% of the property or capital or profits of the Applicant, where the Applicant is an unincorporated association or body of individuals UB0-4 : Natural person exercising control over the Applicant through other means i.e., exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under UBO-1 to UBO-3 above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests] UBO-5 : Natural person who holds the position of senior managing official [In case no natural person could be identified as above] UBO-6 :The settler(s) of the trust UBO-7 :Trustee(s) of the Trust UBO-8 :The Protector(s) of the Trust [if applicable]. UBO-9: The beneficiaries with 15% or more interest in the trust if they are natural person(s) UBO-10 : Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership.

FATCA/CRS DECLARATION FORM - FOR NON-INDIVIDUAL

Applicant Name_____

PART I

A. Is the account holder a Government body/International Organization/listed company on recognized stock exchange:

☐ Yes ☐ No

If "No", then proceed to point B. If "yes" please specify name of stock exchange, if you are listed company _____ *and proceed to sign the declaration.*

B. Is the account holder a (Entity/Financial Institution) tax resident of any country other than India: ☐ Yes ☐ No

If "yes", then please fill of FATCA/ CRS Self certification Form. If "No", proceed to point C.

C. Is the account holder an Indian Financial Institution: ☐ Yes ☐ No

If "yes", please provide your GIIN, if any _____. *If "No", proceed to point D.*

D. Are the Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian citizen: ☐ Yes ☐ No

If "yes", (then please fill FATCA/ CRS self-certification form)). If "No", proceed to sign the declaration.

CUSTOMER DECLARATION

( ) Under penalty of perjury, I/we certify that :

1. The applicant is:
   (i) An applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District to Columbia or any other states of the U.S.,
   (ii) An estate the income of which is subject to U.S. federal income tax regardless of the source thereof. **(This clause is applicable only if the account holder is identified as a US person)**
2. The applicant is an applicant taxable as a tax resident under the laws of country outside India.
   (i) I/We understand that V Mathran & Co Private Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. V Mathran & Co Private Limited is not able to offer any tax advice on FATCA/CRS or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
   (ii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
   (iii) I/We agree that as may be required by domestic regulators/tax authorities V Mathran & Co Private Limited may also be required to report, reportable details to CBDT or close or suspend my account.
   (iv) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Name of the Entity_____

Signature 1 ✓ _____ Signature 2 ✓ _____

Signature 3 ✓ _____ (As per MOP)

Date:_____

MANDATORY

PART II

Self-Certification Form(Entity) for Foreign Account Tax Compliance Act ("FATCA") and Common Reporting Standards(CRS)

Section 1: Entity information

Name of Entity_____

Customer id (if existing)_____ Entity Constitution Type_____

Entity Identification type: ☐ Tax Identification Number (TIN) ☐ US GIIN ☐ Company Identification Number

☐ Global Entity Identification Number (EIN) ☐ Other

Entity Identification No._____

Entity Identification issuing country_____ Country of Residence for tax purpose_____

Section 2: Classification of Non-Financial entities

I/We (on behalf of the entity) certify that the entity is:

a) An entity incorporated and taxable in US (Specified US person) : ☐ Yes ☐ No
*If "Yes", please provide your U.S. Taxpayer Identification Number (TIN)*_____

b) An entity incorporated and taxable outside of India (other than US) : ☐ Yes ☐ No
*If "Yes", please provide your TIN or its functional equivalent*_____

Provide your TIN issuing country _____

c) *Please provide the following additional details if you are not a Specified US Person:*
FATCA / CRS classification for Non-financial entities (NFFE)

☐ Active NFFE ☐ Passive NFFE without any controlling Person
☐ Passive NFFE with Controlling Person(s) : US ☐ Others ☐
☐ Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus V Mathran & Co Private Limited is not required to do the reporting)

Please provide GIIN number:_____

Section 3: Classification of financial institutions (including Banks)

I/We (on behalf of the entity) certify that the entity is:

a. An entity is a U.S. financial institution: ☐ Yes ☐ No
If "Yes", (i) Please provide your Taxpayer Identification Number (TIN)
(ii) Please provide GIIN, if any _____
If "No", please tick one of the following boxes below:

FATCA classification	**Please provide the Global Intermediary Identification number (GIIN) or other information where**
☐ Reporting Foreign Financial Institution in a Model 1 Inter-Governmental Agreement ("IGA") Jurisdiction	_____
☐ Reporting Foreign Financial Institution in a Model 2 IGA Jurisdiction	_____
☐ Participating FFI in a Non-IGA Jurisdiction	_____
☐ Non-reporting FI	_____
☐ Non-Participating FI	_____
☐ Owner-Documented FI with specified US owners	_____

Section 4: Controlling person declaration

If you are classified as **"Passive NFFE with Controlling Person(s)"** or **"Owner documented FFI"** or **"Specified US person"**, please provide the following details:

Name of controlling person	Correspondence Address	Country of residence for tax purpose	TIN	TIN issuing country	Controlling person type

Details	Controlling person 1	Controlling person 2	Controlling person 3	Controlling person 4	Controlling person 5
Identification Type					
Identification Number					
Occupation Type					
Occupation					
Birth Date					
Nationality					
Country of Birth					

Section 5: Declaration

(i) Under penalty of perjury, I/we certify that:

1. The number shown on this form is the correct taxpayer identification number of the applicant, and
2. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof, or
3. The applicant Is an applicant taxable as a tax resident under the laws of country outside India.

(ii) I/We understand that V Mathran & Co Private Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with CRS/FATCA. V Mathran & Co Private Limited is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

(iii) I/We agree to submit a new form within 30 days if any information or certification on this form gets changed.

(iv) I/ We agree as may be required by Regulatory authorities, V Mathran & Co Private Limited shall be required to comply to report, reportable details to CBDT or close or suspend my account.

(v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct and complete including the tax payer identification number of the applicant.

I/We hereby confirm that details provided are accurate, correct and complete

_____

Signature of the Client/(all) Authorised Signatory(ies)

Name-

Date-

EDIS / SPEED-E AUTHORIZATION ACKNOWLEDGEMENT

To
V Mathran & Co Private Limited,

I/We have been informed about the EDIS (Electronic Delivery Instruction System) and Speed-e facility offered by NSDL through V Mathran & Co Private Limited. I/We understand that:

- Each debit transaction through EDIS requires my/our TPIN authorisation.
- I/We should NOT share TPIN with anyone, including V Mathran staff.
- For details, refer to Section 5 (Demat Form) and www.nsdl.co.in

□ I/We have read and understood the EDIS framework and agree to its terms.

✓_____
Signature Of Client

OPTION FORM FOR ISSUE OF DIS BOOKLET

To
V Mathran & Co Private Limited
DP ID IN305058
Dear Sir / Madam,

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

☐ **OPTION 1:**

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our NSDL account though I / we have issued a DDPI / registered for eDIS / executed PMS agreement in favour of / with _____(name of the DDPI holder / Clearing Member / PMS manager) for executing delivery instructions for settling stock exchange trades [settlement related transactions] effected through such DDPI holder / Clearing Member / by PMS manager for executing delivery instructions through e-DIS.

OR

☐ **OPTION 2:**

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

Yours faithfully,

Signature of the Client: ✓_____ ✓_____ ✓_____
First Holder **Second Holder** **Third Holder**

MUTUAL FUND SERVICES REGISTRATION FORM

To,
V Mathran & Co Private Limited

I/We am/are registered clients of V Mathran & Co Private Limited and request activation of the Mutual Fund Services Facility through the Exchange platforms, including BSE StAR MF and NSE MF Invest.

I/We authorize V Mathran & Co Private Limited to use the KYC and client information already submitted for my/our trading account for the purpose of registration under the Mutual Fund Services Facility.

I/We hereby declare and agree that:

1. I/We wish to invest in Mutual Fund schemes through BSE StAR MF and/or NSE MF Invest.
2. The KYC and other information submitted by me/us remains true, complete and unchanged as on the date of this declaration.
3. I/We shall read and understand the Scheme Information Document (SID), Key Information Memorandum (KIM), Scheme Related Documents and all applicable disclosures before investing in any Mutual Fund scheme.
4. I/We understand that Mutual Fund investments are subject to market risks and that all investment decisions shall be made solely by me/us.
5. I/We agree to comply with the rules, regulations, circulars and guidelines issued by SEBI, AMFI, BSE, NSE and other applicable regulatory authorities from time to time.
6. I/We shall promptly notify V Mathran & Co Private Limited of any change in my/our KYC information.
7. I/We understand that V Mathran & Co Private Limited acts only as a facilitator/distributor and shall not be responsible for the performance of any Mutual Fund scheme.

I/We therefore request V Mathran & Co Private Limited to enable Mutual Fund transaction facilities in my/our account.

✓_____
Signature Of Client

ADDITION OF AADHAAR DETAILS

'I/We do hereby solemnly declare that the detail herein above submitted by me/us is/are true to my/our knowledge.
I/We voluntarily give my/our consent to 'V Mathran & Co Private Limited to use my/our Aadhaar Details to authenticate from UIDAI and link the Aadhaar Number to all my/our existing/new accounts with your DP.

	NAME	AADHAAR											
Sole/First Holder													
Second Holder													
Third Holder													

Signature of the Client: ✓ _____ ✓_____ ✓_____

First Holder **Second Holder** **Third Holder**

CLIENT ACKNOWLEDGEMENT OF DOCUMENTS RECEIVED

To
V Mathran & Co Private Limited
204 Vaishno Chambers
6 Brabourne Road
Kolkata – 700001

Subject: Acknowledgement of Receipt of Account Opening Documents

I/We hereby acknowledge and confirm that:

☐ I/We have received a copy of the duly completed and executed Account Opening Form, including my/our Trading Account Code (UCC) and Demat Account Client ID.

☐ I/We have received, read and understood the following documents, either in physical or electronic form:

- Rights & Obligations Document
- Risk Disclosure Document (RDD)
- Guidance Note
- Policies & Procedures
- Most Important Terms & Conditions (MITC)
- Policy on Voluntary Freezing / Blocking of Trading Account
- Tarriff Sheet
- PMLA Declaration

☐ I/We confirm that the email address and mobile number registered with V Mathran & Co Private Limited are correct and shall be used for regulatory communications, contract notes, statements and alerts.

☐ I/We understand that the above documents are also available on the company's website and may be updated from time to time in accordance with applicable regulatory requirements.

☐ I/We agree to promptly inform V Mathran & Co Private Limited of any change in my/our contact details or other account information.

Client Details

Particulars	Details
Client Name	_____
Trading Account Code (UCC)	_____
Demat Client ID	_____

Client Signature

Signature: ✓_____

Name: _____

Date: _____