




Change of Category ORDINARY TO NRI in Equity Demat and Trading A/c Individual NRI – Change of Type Subtype ORDINARY TO NRI Requirement Proof List

 **Notes:** - In NSDL – CDSL Demat And Trading Account form, write in English & Capital Letters with Black pen only & attach required All documents with proper Client Signature & also duly Verified Stamp with Signature and Identity of the person & Signature in my Presence By Branch Employee

❖ List of Document Require of (ORDINARY To NRI) Account

- 1) NSDL FORM ANNEXURE-A FILLUP – REQUEST FOR CHANG OF RESIDENTIAL STATUS FROM RI TO NRI
- 2) One Passport Size Color Photograph
- 3) NRI Client Individual CKYC form Required
- 4) PAN Card of NRI Client self attested copy
- 5) Copy of Address proof India & Overseas Both
 - A. Indian address proof self attested copy (Any one for Below)
 - (i) Full Pass Port (ii) PIO / OCI copy (iii) Aadhar Card (iv) Driving License (v) Voter ID card
 - B. Overseas Address proof self attested cop (Any one for Below)
 1. Full Pass Port 2. PIO / OCI copy 3. PIO / OCI copy 4. Overseas Live License with address
 5. India / Overseas Bank accent statement for overseas address (not more than 3 month old)
 6. Utility Bill Electricity / Gas / Post paid Mobile Bill (not more than 2 month old)
 7. India Bank letter mention in overseas Full address & Bank a/c details (A/c number, a/c name, branch name,)
 8. Overseas Rent Agreement on A/c Holder full name which not more than 3 month Attested bay Indian Embassy
- 6) Complete Full Passport of NRI Client (Date of Expiry Should be Beyond 6 Months)
- 7) Full pass port Copy all page with (Indian Embassy stamp required with date to arrival in India)
- 8) Copy of Valid Visa / work permit / Overseas resident card /
 - In case of Indian Pass Port Valid Visa (Work Permit / Student Visa / Employment Visa / Resident Permit)
 - In case of Foreign Pass Port Copy of PIO - Person of Indian Origin card and OCI - Overseas Citizens of India card
- 9) Bank Account proof NRI – NRE / NRO
 - (1) In case of NRE Bank proof (NRI – RE PATRIABLE A/c)
 - NRE SB Account Cancel cheque / Bank statement (not more than last 3 months old)
 - NRE - PIS Portfolio Investment Scheme permission Letter
 - NRE – PIS bank account detail with full bank a/c number and MICR and IFSC code proof
 - Constituents should furnish a Copy of RBI's Permission for Dealing in Securities from the respective designated (In case the account is on reparable basis with NRE account)
 - (2) In case of NRO Bank proof (NRI – NO – RE PATRIABLES A/c)
 - NRO Bank A/c opening date proof with details In Case of NRI – NO – RE PATRIABLES A/c.
 - NRO – Bank account detail with full bank a/c number and MICR and IFSC code proof
- 10) NRI FATCA/CRS Declaration in client all NRI detail fill up with client signature required
- 11) NRI Demat and Trading A/c Operation POA In Favor of Person Resident in India
 - POA Holder Photo Id proof and PAN Card Resident India
 - POA Holder Address Proof Resident In India –Aadhar card, Voter Id, Driving License, Pass Port (any one)



ONE OF
INDIA'S LEADING
FINANCIAL SERVICES FIRM

Corporate Office: - Marwadi Financial Plaza', 150 Feet Ring Road, Nana Mava Main Road Rajkot 360001



ANNEXURE A

REQUEST FOR CHANGE OF RESIDENTIAL STATUS FROM RI TO NRI														
To Marwadi Shares and Finance Ltd. Marwadi Financial Plaza, Nana Mava Main Road, Off 150 Feet Ring Road, Rajkot-360001. Gujarat (India)						Date	D	D	M	M	Y	Y	Y	Y
						DP ID	I	N	3	0	0	9	7	4
						Client ID								
Dear Sir/Madam, I/we are holding above demat account with you. As my/our residential status has (have) been changed from Resident Indian to Non Resident Indian, we request you to carry out the following changes in my/ our aforesaid demat account:														
A. Type and Sub-type														
1	Type	Current type				New type								
		Resident	<input type="checkbox"/>			NRI			<input type="checkbox"/>					
2	Sub-type	Current sub-type (please tick any one)				New sub-type (please tick any one)								
		Ordinary	<input type="checkbox"/>			Non-Repatriable			<input type="checkbox"/>					
		Promoter	<input type="checkbox"/>			Non-Repatriable – Promoter			<input type="checkbox"/>					
B. Other details														
1	RBI Approval Reference Number (mandatory)													
2	RBI Approval date (mandatory)													
3	I/we hereby declare that I/we have complied and will continue to comply with requirements under FEMA.													
		Name				Signature								
Sole/First holder														
Second holder														
Third holder														

Note: 1) Photocopy of relevant pages of current passport which evidences the change of residential status of Client along with Resident Visa/Work Permit/Employment Visa/Current Visa of any other type of visa.
 2) Copy of proof of foreign address (self attested & verified with original) of Client along with New C-KYC form



KYC | Mandatory
KNOW YOUR CLIENT (KYC)
APPLICATION Form (For Individuals Only)

To, Marwadi Shares and Finance Limited
Corporate Office: 'Marwadi Financial Plaza', Nana Mava Main Road, Rajkot-360 001
Registered office: X-Change Plaza, Office No. 1201 to 1205, 12th Floor,
Building No.-53E, Zone - 5, Road 5E, Gift City, Gandhinager - 382355, Gujarat

KYC Mode* : Normal EKYC OTP EKYC Biometric Online KYC Offline KYC Digilocker

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

Application Type New Update KYC Number

 Account Type Normal Minor Aadhar OTP Based EKYC (in non face to face mode) Account Number

1. PERSONAL DETAILS (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
Name (Same as ID Proof)*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father/Spouse Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Place of Birth	<input type="text"/>			
Gender*	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender		Marital Status* <input type="checkbox"/> Married <input type="checkbox"/> Unmarried	
Nationality*	<input type="checkbox"/> Indian <input type="checkbox"/> Other <input type="checkbox"/> (ISO) 3166 Country Code <input type="checkbox"/>		<input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National	
Residential Status*	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Government Sector Service		<input type="checkbox"/> Person of Indian Origin	
Occupation *	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired		<input type="checkbox"/> Business <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others	
PAN	<input type="text"/>		<input type="checkbox"/> Form No. 60 Furnished	

Please affix
the recent passport
size photograph

SIGNATURE /
THUMB IMPRESSION

2. PROOF IDENTITY AND ADDRESS TO BE ADDED (Please refer instruction B at the end)

1. CERTIFIED COPY OF OVD OR EQUIVALENT, e-documnet of OVD or OVD obtained through digital kyc process needs to be submitted (any one of the following OVDS)

<input type="checkbox"/> A- Passport Number	<table border="1" style="width: 100%; height: 15px;"></table>	Expiry Date <table border="1" style="width: 100%; height: 15px;"></table>
<input type="checkbox"/> B- Voter ID Card	<table border="1" style="width: 100%; height: 15px;"></table>	Expiry Date <table border="1" style="width: 100%; height: 15px;"></table>
<input type="checkbox"/> C- Driving Licence	<table border="1" style="width: 100%; height: 15px;"></table>	
<input type="checkbox"/> D-NREGA Job Card	<table border="1" style="width: 100%; height: 15px;"></table>	
<input type="checkbox"/> E-National Population Register Letter	<table border="1" style="width: 100%; height: 15px;"></table>	
<input type="checkbox"/> F-Proof of Possession of Aadhaar	<table border="1" style="width: 100%; height: 15px;"></table>	
I <input type="checkbox"/> E-KYC Authentication	<table border="1" style="width: 100%; height: 15px;"></table>	
II <input type="checkbox"/> Offline Verification Aadhaar	<table border="1" style="width: 100%; height: 15px;"></table>	
III <input type="checkbox"/> Identification Number	<table border="1" style="width: 100%; height: 15px;"></table>	

ADDRESS

Line 1*	<table border="1" style="width: 100%; height: 15px;"></table>	
Line 2	<table border="1" style="width: 100%; height: 15px;"></table>	
Line 3	<table border="1" style="width: 100%; height: 15px;"></table>	
District*	<table border="1" style="width: 100%; height: 15px;"></table>	City / Town / Village *
State Name*	Pin/Post Code*	<table border="1" style="width: 100%; height: 15px;"></table>
	Country Name*	<table border="1" style="width: 100%; height: 15px;"></table>

ADDRESS TYPE : Residential / Business Residential Business Registered Unspecified

3. CURRENT ADDRESS DETAIL (Please refer instruction B at the end)

1. CERTIFIED COPY OF OVD OR EQUIVALENT, e-documnet of OVD or OVD obtained through digital kyc process needs to be submitted (any one of the following OVDS)

<input type="checkbox"/> A- Passport Number	<table border="1" style="width: 100%; height: 15px;"></table>	Expiry Date <table border="1" style="width: 100%; height: 15px;"></table>
<input type="checkbox"/> B- Voter ID Card	<table border="1" style="width: 100%; height: 15px;"></table>	Expiry Date <table border="1" style="width: 100%; height: 15px;"></table>
<input type="checkbox"/> C- Driving Licence	<table border="1" style="width: 100%; height: 15px;"></table>	
<input type="checkbox"/> D-NREGA Job Card	<table border="1" style="width: 100%; height: 15px;"></table>	
<input type="checkbox"/> E-National Population Register Letter	<table border="1" style="width: 100%; height: 15px;"></table>	
<input type="checkbox"/> F-Proof of Possession of Aadhaar	<table border="1" style="width: 100%; height: 15px;"></table>	
I <input type="checkbox"/> E-KYC Authentication	<table border="1" style="width: 100%; height: 15px;"></table>	
II <input type="checkbox"/> Offline Verification Aadhaar	<table border="1" style="width: 100%; height: 15px;"></table>	
III <input type="checkbox"/> Identification Number	<table border="1" style="width: 100%; height: 15px;"></table>	

ADDRESS

Line 1*	<table border="1" style="width: 100%; height: 15px;"></table>	
Line 2	<table border="1" style="width: 100%; height: 15px;"></table>	
Line 3	<table border="1" style="width: 100%; height: 15px;"></table>	
District*	<table border="1" style="width: 100%; height: 15px;"></table>	City / Town / Village *
State Name*	Pin/Post Code*	<table border="1" style="width: 100%; height: 15px;"></table>
	Country Name*	<table border="1" style="width: 100%; height: 15px;"></table>

ADDRESS TYPE : Residential / Business Residential Business Registered Unspecified

4. CONTACT DETAILS (Communication will be done on provided Mobile no. and E-mail ID) (Telephone No. with STD Code) (Refer instruction C at end)

Tel. (Office)	<input type="text"/>	Tel. (Resi.)	<input type="text"/>
		Mobile	<input type="text"/>
E-mail ID	<input type="text"/>		
I Herely declare that the aforesaid mobile number and E-mail belongs to		Wish to Receive Electronic Contract Note Statements Ledgers etc.	
<input type="checkbox"/> Me	<input type="checkbox"/> Spouse	<input type="checkbox"/> Dependent Children	<input type="checkbox"/> Dependent Parents
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

5. REMARKS (if any)

<input type="text"/>
<input type="text"/>
<input type="text"/>

6. GUARDIAN DETAILS (In case of Minor Account)

Guardian Full Name	<input type="text"/>
Guardian PAN No.	<input type="text"/> Guardian Date of Birth: <input type="text"/> / <input type="text"/> / <input type="text"/>

7. APPLICANT DECLARATION

I/We hereby declare that KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/We under-take 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.

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

I am/We are also aware that OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other intermediaries with whom I have a business relationship for KYC purposes only.

Date : / / Place :



8. ATTESTATION / FOR OFFICE USE ONLY (BRANCH)

Documents Received Self Certified True Copies Notary IPV Done Date : / /

E-KYC Data Received from UIDAI Data REceived from Offline verification

Digital KYC Process Equivalent e-document.

Emp. No. Name Designation



9. INSTITUTIONAL DETAILS

Name **M A R W A D I S H A R E S A N D F I N A N C E L T D**

Ref. No. **1 0 0 2 3 8** Institution Code : **I N 1 8 5 8**



Instruction : (1) Please fill the form in English and in Block Letters (2) Please, read guidelines / detailed instructions overleaf (3) List of Two Character ISO-3166 country codes are available overleaf.



ONE OF
INDIA'S LEADING
FINANCIAL SERVICES FIRM

MARWADI
FINANCIAL SERVICES

Corporate Office: - Marwadi Financial Plaza', 150 Feet Ring Road, Nana Mava Main Road

Rajkot 360005

DECLARATION BY NRI

Client Code:- _____

Client ID:- _____

I, _____ am NRI hereby declare that my residential address is _____

_____. And I am giving my correspondence address which is having P O Box No. in case of any changes in address, I shall ensure to update the same in my trading/demat accounts.

Signature

Date: - _____

Place:- _____

FATCA/CRS Declaration

Trading Code		Demat ID	
Client PAN			

Client Name:	
Place of Birth:	
Country of Birth:	
Nationality:	
Do you satisfy any of the criteria mentioned below:	
a. Citizen of any country other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Tax Resident of ANY contry/ies other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. POA or mandate holder who has an address outside India	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Address and/or telephone number is of outside India	<input type="checkbox"/> Yes <input type="checkbox"/> No
If answer to the question “b” above is “Yes”, please provide the following information [mandatory], else directly go to declaration & acknowledgement.	
Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below:	
Country of Tax Residency 1	
Tax Payer Ref. ID No. 1	
Identification Type 1 (TIN or other, please specify)	
Country of Tax Residency 2	
Tax Payer Ref. ID No. 2	
Identification Type 2 (TIN or other, please specify)	

Declaration & Acknowledgement

- I hereby certify that I have declared my status as per the applicable FATCA/CRS rules in India as notified by Government of India/ Central Board of Direct Taxes/ Securities and Exchange Board of India/ Reserve Bank Of India.
- I certify that (i) I am taxable as a (U.S.) person under the laws of the United States of America 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. (This clause is applicable only if the account holder is identified as a U.S. person) OR I certify that I am taxable as a tax resident under the laws of country outside India. (This clause is applicable only if the account holder is a tax resident outside of India).
- I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief and that I have not withheld any material information/document, that may affect the assessment/categorization of the account as a US Reportable account/Other Reportable account or otherwise. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I am aware that I may liable for it.
- I undertake the responsibility to declare, disclose and recertify within 30 days any changes that may take place in the information provided in the account opening form, and signed by me as well as in the documentary evidence provided by me or if any certification becomes incorrect.
- I hereby authorize you to disclose, share, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same. I also agree that my failure to disclose any material fact known to me now or in future, may invalidate my application and the Financial Institution (FI) would be within its right to put restrictions in the operations of my account or take appropriate action permissible under the Indian regulations for the purpose or take any other action as may deemed appropriate if the deficiency is not updated /rectified by me within the stipulated period.
- I agree to furnish any particular/ information that is called upon me by the FI on account of any change to law either in India or abroad in the subject matter herein.
- In the event there is any tax demand (including interest (if any)) raised due to non-disclosure/inaccurate disclosure of information/document on my part, I undertake to pay the demand forthwith and provide the FI with all information/documents that may be necessary for any proceedings before GOI/RBI/SEBI/income tax Authorities.
- I permit/authorize the FI to collect, store, communicate and process information relating to my account with them and all transactions therein, by the FI and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential Information for compliance with any law or regulation whether domestic or foreign. I also understand that the account will be reported if any one of the aforesaid FATCA / CRS criteria for any of the account holders i.e. primary or joint (in case of demat account) are met.

Signature of Client: _____

Date of declaration: _____

FATCA / CRS Terms & Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian Financial Institutions to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Towards compliance with tax information sharing laws, such as FATCA and CRS, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s). Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days from the occurrence of the change in information.

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

Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

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

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA / CRS indicia
U.S. Place of Birth	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below) AND 3. Any one of the following documents: <ul style="list-style-type: none"> • Certified Copy of “Certificate of Loss of Nationality”; or • Reasonable explanation of why the customer does not have such a certificate despite renouncing citizenship; or • Reason the customer did not obtain U.S. citizenship at birth
Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a resident of any other country other than India; and 2. Documentary evidence (refer list below)
Telephone number in a country other than India	<p>Whether Indian telephone number is provided or not provided along with a foreign country telephone number</p> <ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a resident of any other country other than India; and 2. Documentary evidence (refer list below)

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

1. **Certificate of residence issued by an authorised Government body***
 2. Valid Identification issued by authorised Government body * (e.g., Passport, National Identity Card, etc.)
- * **Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.**

Signature of Client:

Date of declaration:

Account Details Addition / Modification Request Form (Trading & DP A/c)

Dear Sir/Madam,

I/We request you to make following additions/modifications to my/our account in your records.

I/We wish to update the below changes in C-KYC KRA Demat Trading A/c

NSDL DPID-IN300974	Client Id									Trading/Broking A/c.:	
CDSL DPID-12035100	Client Id										

Mother Name: _____ **Aadhar No:**

1 Income Details

Annual Income(Rs.) Upto 1 Lac 1-5 Lac 5-10 Lac 10-25 Lac 25-50 Lac 0.5-1Cr 1Cr & Above

Net worth as on date _____ : Rs. _____

2 Bank Details

Existing Details (Mandatory)	New Details
Bank Name:	Bank Name:
Branch Name & Address:	Branch Name & Address:
City: Pin Code:	City: Pin Code:
A/c No.:	A/c No.:
A/c Type: <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> OD/CC	A/c Type: <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> OD/CC
MICR* (Mandatory for DP):	MICR* (Mandatory for DP):
IFSC Code:	IFSC Code: <input type="checkbox"/> NEFT/ RTGS

Note: *9 digit code of the bank & branch appearing on the cheque issued by the Bank. For availing ECS facility, MICR code is mandatory

3 Mobile & Emaild

	<u>Tick should be Mandatory</u>
Mobile FirstHolder	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> DependentChildren <input type="checkbox"/> Dependentparents
Mobile SecondHolder	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> DependentChildren <input type="checkbox"/> Dependentparents
Mobile ThirdHolder	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> DependentChildren <input type="checkbox"/> Dependentparents
EmailID FirstHolder	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> DependentChildren <input type="checkbox"/> Dependentparents
EmailIDSecondHolder	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> DependentChildren <input type="checkbox"/> Dependentparents
EmailID ThirdHolder	<input type="checkbox"/> Me <input type="checkbox"/> Spouse <input type="checkbox"/> DependentChildren <input type="checkbox"/> Dependentparents

Despite the fact that I/we may have registered for DND (Do Not Disturb) with respective Mobile Service Provider, MSFL is authorized to send SMS on the above mentioned mobile number and I/we confirms that MSFL will not be held liable for sending any information on SMS and also authorizes MSFL to submit such undertaking before the TRAI or such other regulator or service provider for allowing MSFL to send SMS despite DND Status of the Client Mobile Number.

- **Client Option to received e-Statement ()**
- **Receive Annual Reports, AGM notices and other communications from Issuers & RTAs in Physical From ()**

4 Updating of e-mail for ECN in Broking/Trading Account:

I/We hereby give our consent and authorize you to send digital contract notes, bills, ledgers, statement of funds and securities/margins, transaction statements, Monthly/Quarterly statement of accounts/holding statement(s)/bills or other reports, Statement(s), related notices, Circulars, arrangement and such other correspondence, documents, records, by whatever name called (hereafter referred to as "statement(s)" issued from time to time on the

I hereby declare that the aforesaid mobile number and Email belongs to

Declaration:

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief.

Client Signature as per Broking			
Client Signature as per DP			
Client Name	First Holder	Second Holder	Third Holder

IDENTITY OF THE CLIENT(S) VERIFIED IN PERSON & SIGNED IN MY PRESENCE			
Emp./SB/AP Name :	_____	Emp./SB/AP Code:	_____
Signature :	_____	Date:	_____
		Place:	_____

Client Name: _____

Client Code: - _____

To,
Marwadi Shares and Finance Limited,
Marwadi Commodity Brokers Private Limited.
Marwadi Financial Plaza, 4th Floor,
Nana Mava Main Road,
Rajkot.

Dear Sir/Madam,

Sub.:- Consent for receiving funds payout through NEFT/RTGS and addition of bank (If required).

I/We hereby request you to add the bank and/or send my funds payout through NEFT/RTGS to my/our bank account on your records for payout purpose. For this purpose, I/We hereby provide following details to you;

1. Bank Name :- _____
2. Bank Account No. :- _____
3. Bank Account type :- Savings/Current
4. **IFSC Code** :- _____

I/We are also attaching herewith;

1. *Copy of cancelled cheque.*
2. *Latest copy of Bank Statement.*

This instruction for NEFT/RTGS shall supersede all/any prior instructions for NEFT/RTGS, if any, given by me/us.

Yours truly,

Thanking You.

(_____)



To,
Marwadi Shares and Finance Limited
 Marwadi Shares and Finance Limited,
 Marwadi Financial Plaza, 150 Feet Ring Road,
 Rajkot – 360001

From,

Client Name

Client Code

Demat A/c No

Demat Debit and Pledge Instruction

Sr. No.	Purpose	Signature(s) B01	Signature(s) B02	Signature(s) B03
1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker.	C ^{11.1} First Holder Sign	C ^{11.2} Second Holder Sign	C ^{11.3} Third Holder Sign
2	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	C ^{12.1} First Holder Sign	C ^{12.2} Second Holder Sign	C ^{12.3} Third Holder Sign
3	Mutual Fund transactions being executed on Stock Exchange order entry platforms.	C ^{13.1} First Holder Sign	C ^{13.2} Second Holder Sign	C ^{13.3} Third Holder Sign
4	Tendering shares in open offers through Stock Exchange platforms.	C ^{14.1} First Holder Sign	C ^{14.2} Second Holder Sign	C ^{14.3} Third Holder Sign

Particulars of Pool Account Nos. of MSFL

NSE CASH	CM BP ID : IN555383 – 10000893 and 12035100-00000091 (CM ID : M50838)	
NSE SLB	EPI A/C : 1100001100019631 CM BP ID : IN555383	
Client Unpaid Securities Pledge A/c. (CUSPA)	IN300974-13411826 (For NSDL) 12035100 00495064 (For CDSL)	
BSE CASH	CM BP ID : IN609100 – 10417755 and 12035100-00000163 (CM ID-910)	
BSE SLB	EPI A/C : 1100001100014825 CM BP ID : IN609100	
NSE MF CM BP ID	For NSDL-IN565576	For CDSL-M50838
BSE MF CM BP ID	For NSDL-IN620031	For CDSL-1100001000020972

Particulars of Margin Pledge Account Nos. of MSFL

TM/CM Client Securities Margin Pledge A/c.	IN300974-12814553 , 12035100 00373953
Client Securities Margin Funding A/c.	IN300974-12816362, 12035100 00374334

The demat account details given above and any other beneficial account/s in the name of MSFL maintained/required to be maintained in future for this purposes and/or clearing House, Clearing Corporation or the respective stock Exchange or any other account as may be deemed fit by MSFL in respect of transaction/order in the securities through MSFL in any segment of any recognized Stock Exchange.

Corporate Office: Marwadi Financial Plaza, Nana Mava Main Road, Off 150 ft Ring Road, Rajkot-360 001, Gujarat

Regd. Office: X-Change Plaza, Office No. 1201 to 1205, 12th Floor, Building No.-53E, Zone – 5, Road 5E, Gift City, Gandhinagar - 382355, Gujarat.

SEBI Reg. No.: INZ000174730 | **Membership No.:** NSE: 08760, BSE: 0910, MCX: 56410, NCDEX: 01280 | **IN-DP-476-2020** (NSDL DP ID: IN300974) (CDSL DP ID: 12035100) | **RESEARCH ANALYST:** INH000002186 | **AMFI:** ARN-42506 | **PFRDA:** POP22112015 | **CIN of MSFL:** U65910GJ1992PLC017544

Hereby declare that the mentioned HUF has following family members as co-parceners.

Sr. No.	Name of Members	Male/Female	Date of Birth	Relationship with Karta	Signatures