



ACML CAPITAL MARKETS LTD.

Member :BSE (CASH,F&O), NSE(CURRENCY, CASH, F&O), NSDL DP, CDSL DP.

SEBI Registration Numbers:INZ000260134, INZ000260134,
NSDL- IN 302461, CDSL- 13015200, CIN NO. U67120GJ2000PLC037431, GST NO: 24AADCA4629D1Z4.

Regd. Office : Kamdhenu Complex, Opp. Sahajanand ,College,Panjara Pole, Ambawadi,
Ahmedabad-380015. Phone : 079-2630 9434, 26308875, 26309619 / 20.
Web Site: www.acml.in, Investor Grievance E-mail: info@acml.in

NON INDIVIDUAL CLIENT - ACCOUNT OPENING FORM

Corporates / Partners / LLP / Trust / Society

Authorised Person ACML ID :

Authorised Person :

NSE:CAPITAL MARKET_SUB, ,

BSE:CAPITAL MARKET_SUB,

NSE AP REG No :

CM Registration No :

CF Registration No :

FNO Registration No:

CO Registration No :

AP REG No :

Address :

Email :

Phone/Mobile No.:

Trading UCC :

Client BO ID : _____

First Holder PAN

Second Holder PAN

Third Holder PAN

ACML Official Details

NSE, BSE Compliance Officer : Vipul Patel Phone: 07926302611 Email: COO@ACML.IN

NSDL Compliance Officer : Pinkesh Joshi Phone: 07926308875/9958 Email: ACMLDPNSDL@YAHOO.COM

CDSL Compliance Officer : Jayant Patel Phone: 07926308875/9958 Email: CDSL@ACML.IN

Principal Officer : Manish Thaker Phone: 07926309432/9958 Email: MANISH.THAKER@ACML.IN

For ACML Use Only



ACML

Address for Communication / Corporate Registered / Permanent Address
 Benefits (Default Option is Regd. Address) Correspondence Address / Foreign Address

Income Range or Network

Income (Annum) : Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs 25Lacs-1 Cr >1 Cr
 Network (as on) : is Rs..... should not be older than 1 year

BANK ACCOUNT DETAILS :

Client Name As Per Bank Account : _____

BANK ACCOUNT TYPE: SAVING CURRENT CC OD
 NRI NRO OTHER

BANK ACCOUNT NO:

MICR CODE: **IFSC CODE :(RTGS/NEFT)**

BANK NAME _____

Branch Name _____

BANK ADDRESS: _____

CITY _____ **PIN CODE:** **BRANCH CODE :** _____

INVESTMENT AND TRADING EXPERIENCE (No. Of Years)

STOCK MARKET : Year DERIVATIVES : Year OTHER INVESTMENT : Year

FINANCIAL PROOF FOR F&O:

Copy Of It Return Salary Slip Bank A/c Statement (last 6 Months)
 Self Declaration Along With Relative Supporting Documents Copy Of Annual Accounts

Other (please Specify) : _____

TRADING PREFERENCE: (PLEASE SIGN IN RELEVANT BOXES WHERE YOU WISH TO TRADE)

<p>BSE CASH Sign Of Client : _____ (Sign with Stamp)</p>	<p>NSE CASH Sign Of Client : _____ (Sign with Stamp)</p>
<p>NSE CDS Sign Of Client : _____ (Sign with Stamp)</p>	<p>NSE F&O Sign Of Client : _____ (Sign with Stamp)</p>
<p>NSE CDS Sign Of Client : _____ (Sign with Stamp)</p>	<p>BSE CDS Sign Of Client : _____ (Sign with Stamp)</p>



ACML

Details of Partners / Promoters / Wholetime Directors / Trustees

Name		<p>PHOTOGRAPH</p> <p>Please affix Your recent passport size photograph sign across it</p>
Address :		
City / Town / Villge	Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
DOB : __ / __ / ____	Mobile : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
PAN : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
DIN : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>		X Signature with Stamp

Details of Partners / Promoters / Wholetime Directors / Trustees

Name		<p>PHOTOGRAPH</p> <p>Please affix Your recent passport size photograph sign across it</p>
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DOB : __ / __ / ____	Mobile : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
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Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>		X Signature with Stamp

Details of Partners / Promoters / Wholetime Directors / Trustees

Name		<p>PHOTOGRAPH</p> <p>Please affix Your recent passport size photograph sign across it</p>
Address :		
City / Town / Villge	Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
DOB : __ / __ / ____	Mobile : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
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Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>		X Signature with Stamp



ACML

Details of Partners / Promoters / Wholetime Directors / Trustees

Name	<p style="text-align: center;">PHOTOGRAPH</p> <p style="text-align: center;">Please affix Your recent passport size photograph sign across it</p>
Address :	
City / Town / Villge	
Pin Code	
DOB : __ / __ / ____	
Mobile :	
PAN :	
DIN :	X Signature with Stamp
Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>	

Details of Partners / Promoters / Wholetime Directors / Trustees

Name	<p style="text-align: center;">PHOTOGRAPH</p> <p style="text-align: center;">Please affix Your recent passport size photograph sign across it</p>
Address :	
City / Town / Villge	
Pin Code	
DOB : __ / __ / ____	
Mobile :	
PAN :	
DIN :	X Signature with Stamp
Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>	

Details of Partners / Promoters / Wholetime Directors / Trustees

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Address :	
City / Town / Villge	
Pin Code	
DOB : __ / __ / ____	
Mobile :	
PAN :	
DIN :	X Signature with Stamp
Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>	



ACML

Authorized Signatories (Corporate Account / Trust Account / LLP / Others - PI.Specify_____)

Name		<p align="center">PHOTOGRAPH</p> <p align="center">Please affix Your recent passport size photograph sign across it</p>
Address :		
City / Town / Villge	Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
DOB : ___ / ___ / _____	Mobile : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
PAN :	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
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Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>		

Authorized Signatories (Corporate Account / Trust Account / LLP / Others - PI.Specify_____)

Name		<p align="center">PHOTOGRAPH</p> <p align="center">Please affix Your recent passport size photograph sign across it</p>
Address :		
City / Town / Villge	Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
DOB : ___ / ___ / _____	Mobile : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
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Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>		

Authorized Signatories (Corporate Account / Trust Account / LLP / Others - PI.Specify_____)

Name		<p align="center">PHOTOGRAPH</p> <p align="center">Please affix Your recent passport size photograph sign across it</p>
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City / Town / Villge	Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
DOB : ___ / ___ / _____	Mobile : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
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Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person <input type="checkbox"/>		



ACML

A. ADDITIONAL INFORMATION/ FATCA-CRS DECLARATION (FIRST HOLDER / TRADING HOLDER)

ARE YOU A CITIZEN OR TAX RESIDENT OF ANY OTHER COUNTRY OTHER THAN INDIA? YES No

IF YES, PLEASE INDICATE ALL THE COUNTRIES IN WHICH YOU ARE RESIDENT FOR TAX PURPOSE.

COUNTRY	TAX IDENTIFICATION NUMBER	IDENTIFICATION TYPE


B. Additional Information: Regarding Any Actions/proceedings Initiated / pending (First Holder / Trading Holder

Details Of Any Actions/proceedings Initiated / pending /taken By Sebi /stock Exchange/ Any Other Authority Against The Applicant /constituent Or Its Partneres / Promoters/whole Time Directors / Authorised Person Incharge Of Dealing In Security During The Last Three Years (attached Copy:)

YEAR	AUTHORITY NAME	ORDER REF NO

C. POLITICALLY EXPOSED PERSON RELATED TO POLITICALLY EXPOSED PERSON Not Applicable

Certification: I/WE have understood the information requirements of above A, B, and C (read along with the FATCA & CRS instructions) and hereby confirm that the information provide by me/us on A, B and C form are true,correct,and complete. I/WE also also confirm that I/WE have read and understood the FATCA & CRS terms and condiaions below and hereby accept the same.



 (Sign with Stamp)

DETAILS OF INTRODUCER

NAME :

NSE AP REG No :

BSE AP REG No :


ADDRESS: _____

City: _____ Pin Code : _____ State: _____

Country: _____ Mobile: _____ Email : _____

I am Giving Assurance for the following :

- * Family Flag as Per Email Consent, For Their Trading / Demat Account Registered With Acml.
- * I agree to receive SMS / Email alerts from Broker, Stock Exchanges and depositories on the above Mobile number / email id Instead of Physical
- * All Updates Applicable For E-confirmation Regarding Any Communication Under SEBI Authorities.

<p>Client Signature:</p> <p> _____ (Sign with Stamp)</p> <p>Original Verified Stamp Affixed by ACML Authorised Person</p> <p>ORIGINALS VERIFIED</p>	<p>Client Signature:</p> <p> _____ (Sign with Stamp)</p> <p>In Person Verification Stamp Affixed by ACML Authorised Person</p> <p>IN PERSON VERIFICATION</p>
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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 or untrue or misleading or misrepresenting. we are aware that we may be held liable for it. I / we acknowledge the receipt of copy of the document. " Rights and Obligations of the Beneficial Owner and Depository Participant"



ACML

Supplementary KYV Information & FATCA-CRS Declaration - Entities & HUF

(Please consult your professional tax advisor for further guidance on your tax residency, FATCA/CRS Guidance)

PAN* Name

Type of address given at KYC KRA Residential Residential or Business Business Registered Office

City of incorporation

Country of incorporation

Net Worth in INR. In ₹Lakhs Net Worth as on DD/MM/YYYY

(Date should not be older than one year)

Table with columns for services: Foreign Exchange/Money Changer Services, Gaming/Gambling/Lottery Services, Money Laundering/Pawning, and Any other information.

Entity Constitution Type Please tick as appropriate Partnership Firm HUF Private Limited Company Public Limited Company Society AOP/BOI Trust Liquidator Limited Liability Partnership Artificial Juridical Person Others specify

Please tick the applicable tax resident declaration

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

Table with columns: Country, Tax Identification Number, Identification Type (TIN or other, please specify)

In case Tax identification Number is not available, kindly provide its functional equivalent or Company Identification Number or Global Entity Identification Number.

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here

FATCA Declaration

(Please consult your professional tax advisor for further guidance on FATCA classification)

PART A (to be filled by Financial Institutions or District Reporting NFFEs)

Form for Part A including fields for GIIN, Name of sponsoring entity, and checkboxes for reporting status.

PART B (please fill any one as appropriate to be filed by NFEs other than Direct Reporting NFEs)

Form for Part B with four questions regarding publicly traded companies, related entities, active NFEs, and passive NFEs.

UBO Declaration

Category (Please tick applicable category) Unlisted Company Partnership Firm Limited Liability Partnership Company

Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust

Listed Company (Need not provide UBO details sought under) Others (Please specify _____)

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL tax identification Numbers for EACH controlling person(s).

Owner-documented FFI's⁵ should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E

Name - beneficial owner / controlling person	#Tax ID Type - TIN or other, please specify	Address - Include state, country, PIN/ZIP code & contact details
#Country - Tax Residency'	Beneficial Interest - in percentage	
#Tax ID No. - Or functional equivalent for each country'	#Type Code" - of controlling person	
1. Name	Tax ID Type	Address
Country	Beneficial Interest	
Tax ID No.	Type code	ZIP [][][][][][][][][] State Country
2. Name	Tax ID Type	Address
Country	Beneficial Interest	
Tax ID No.	Type code	ZIP [][][][][][][][][] State Country
3. Name	Tax ID Type	Address
Country	Beneficial Interest	
Tax ID No.	Type code	ZIP [][][][][][][][][] State Country

If passive NFE, please provide below additional details. (Please attach additional sheets if necessary)

PAN	Occupation Type - Service, Business	DOB - Date of Birth
City of Birth	Nationality	Gender - Male, Female, Other
Country of Birth	Father's Name -Mandatory if PAN is not available	
1. PAN	Occupation Type	DOB DD/MM/YYYY
City of Birth	Nationality	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/>
Country of Birth	Father's Name	
2. PAN	Occupation Type	DOB DD/MM/YYYY
City of Birth	Nationality	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/>
Country of Birth	Father's Name	
3. PAN	Occupation Type	DOB DD/MM/YYYY
City of Birth	Nationality	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/>
Country of Birth	Father's Name	

#Additional details to be filled by controlling persons with tax residency / permanent residency / citizenship / Green card in any country other than India:
 *To include, US, where controlling person is a US citizen or green card holder
 %In case Tax identification Number is not available, kindly provide functional equivalent.

"Refer 3(iii) of Part D | "Refer 3(vi) of Part D | "Refer 3(iv) (A) of Part D

FATCA Terms and Conditions

Towards compliance with tax information sharing laws, such as FATCA, 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 one subsequently. In certain circumstances we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Towards compliance with such laws, 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. 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).

If any controlling person of the entity is 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. Please note that you may receive more than one request for information if you have multiple relationships with ABC. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

Certification

I have understood the information requirements of this Form (read along with the instructions & Definitions) and hereby confirm that the information provided by us on this Form is true, correct, and complete. I also confirm that I have read and understood the FATCA Terms and Conditions above and hereby accept the same.

Name

Designation

Signature >> Place _____ Date ____/____/____

Power of Attorney by the Client (On Rs. 300 stamp paper / E - stamping)

(Amended as per SEBI Circular no. SEBI/HO/MIRSD/DOP/CIR/P/2020/28 dated February 25, 2020)

**ACML CAPITAL MARKETS LIMITED**

(Formerly ASE Capital Markets LTD.)

To all to whom these presents shall come I / We

First Holder Name :
Second Holder Name :
Third Holder Name :

 NSDL Client ID : I N 3 0 2 4 6 1

 CDSL Client ID : 1 3 0 1 5 2 0 0

Indian inhabitants send greetings,

Whereas I/We have a beneficiary account in the name and style of Individual/ HUF / Corporate/ Trust / Others (please specify).....(hereinafter referred to as the said 'Account') with ACML CAPITAL MARKETS LTD.(Formerly ASE Capital Markets Ltd.) (DP ID - IN302461 and 13015200) having DP Head Office at Kamdhenu Complex, Opp. Sahjanand College, Panjarapole, Ambawadi, Ahmedabad 380015.(hereinafter referred to as the DP) bearing SEBI Single Registration number IN- DP-427-2019 of DP and I/We am/are desirous of appointing agent/attorney to operate said account on my/our behalf in the manner hereinafter appearing.

Whereas I/We am/are (First Holder Name):

.....a registered client of ACML CAPITAL MARKETS LIMITED (Formerly ASE Capital Markets Ltd.) A Member of BSE Limited (Formerly, Bombay Stock Exchange Limited). and National Stock Exchange of India Limited bearing SEBI Single Registration Number INZ000260134.

Whereas due to reduction in trade cycle as well as exigency and paucity of time, it is not possible for me/us to give the Delivery Instruction on a daily basis/trade basis. I/We want to avail the facility of direct debit/credit of securities provided to the client of sub-broker/authorised person of ACML for smooth functioning of margin/settlement process.

Whereas I/We hereby confirm that I/We have read and understood the Risk Disclosure Document as prescribed by Securities and Exchange Board of India.

Now know we all and these presents witness that I/We, the above named do hereby nominate, constitute and appoint ACML having its registered office at Kamdhenu Complex, Opp. Sahjanand College, Panjarapole, Ambavadi, Ahmedabad-380015. as my/our true and lawful attorney(s) (hereinafter referred to as "The Attorney(s)") for me/us and on my/our behalf and in my/our name to do the following acts, deeds and things and exercise the following powers and authorities.

Sign of First / Sole Holder**Sign of Second Holder****Sign of Third Holder**

Sole/First Holder Signature

Second Holder Signature

Third Holder Signature

1. To do all such things and give such instruction as mentioned below concerning the said account as I/We Myself / ourselves could give if I / We was / we were personally present.
2. To instruct the DP to debit securities, mutual funds units etc. to the said account and or margin pledge or margin replodge the securities, mutual funds units etc. form the said account, and to give credit/transfer to the Pool A/c. Designated A/c. of ACML CAPITAL MARKETS LIMITED (Formerly ASE Capital Markets Limited.) to the extent of pay-in obligation as well as margins or margin trading obligation towards BSE, NSE and/or as a client of ACML CAPITAL MARKETS LIMITED.(Formerly ASE Capital Markets Limited)

Details of Demat Account, where securities can be moved :

DESCRIPTION OF Account		DESCRIPTION OF Account	
BSE POOL OP ID AND CLIENT ID	IN302461-10421253	NSDL CUSA A/C IN	302461 10799302
BSE POOL CM ID AND CMBPID	293-IN656608	BSE Early Pay-in A/c CDSL	1100001000018283
BSE CDSL PRINCIPAL A/C	1301520000001961	BSE HOUSE ACCOUNT	1100002900000011
BSE CDSL POOL A/C	1301520000001976	NSE HOUSE ACCOUNT	1000001100017837
NSE POOL DPID AND CLIENT ID	IN302461-10421001	CDSL CUSA A/C	1301520000204318
NSE POOL CM ID AND CMBPID	M51198-IN566737	NSDL TM/CM -Client Securities Margin Pledge	IN302461 : 10826866
NSE CDSL POOL A/C	1301520000004734	CDSL TM/CM- Client Securities Margin Pledge	13015200 00204599
NSE F&O Client Security Pledge A/c-HDFC	IN 301151 27166189	NSDL TM <small>Client Securities Under Margin Funding Account</small>	IN 302461 10826874
NSE CDS Clinet Security Pledge A/C	IN 302461 10407807	CDSL TM <small>Client Securities Under Margin Funding Account</small>	13015200 00204605

3. To pledge / replodge the securities in favour of ACML (TM & CM) and or Clearing Corporation respectively for the limited purpose of meeting my/our margin requirements in connection with the trades executed by me/us on the stock exchange through the ACML
4. And I/We hereby agree and confirm that the powers and authorities conferred by this power of attorney shall continue until I/We Have given in writing for revocation of the aforesaid power of attorney at any time without notice.
5. It is specifically understood and agreed between both the parties hereto that either party i.e.the client of "ACML" will be entitled/eligible to claim refund/return of securities, erroneously received or credited to either party's demat account or those securities to which either party is not entitled to receive from the other party.
6. I/We authorize ACML Capital Markets Ltd. (being a Stock Broker also) to send consolidated summary of my/our scrip wise buy/sell position taken with average rates by way of SMS/E-mail on a daily basis, notwithstanding any other document to be disseminated as specified by SEBI from time to time
7. And I/We, do hereby agree to ratify all lawful acts and things done by the said attorney(s) pursuant to the Powers herein above contained
8. By executing this POA, I revoke all earlier POA if any executed in favour of ACML.

IN WITNESS WHEREOF I/We, the above named have hereunto set my hands and Seals of
on this _____ day of _____ two thousand _____

Sign of First / Sole Holder

Sign of Second Holder

Sign of Third Holder

In the presence of Witness

Witness Name : _____ Signature _____

Address : _____

ACML Subbroker / Authorised Person Name : _____

Address : _____

Sub broker/AP Sign with Stamp _____

ACML Authorised Employee Name : _____

Designation : _____ Signature _____



ACML

DP and Trading Standing Instruction

- | | |
|--|----------------------|
| 1. I/we authorise ACML to receive credits automatically into my/our account. | Yes |
| 2. Account to be operated through Power of Attorney (POA) | Yes |
| 3. I/We would like to receive E-Statement
E-Mail / SMS consent to receive the contract note, Trade conformation, fund Ledger,
Trading security transaction statement, demat transaction statement, DP Holding ,
NSDL CAS and oher documents through e-mail registered with KYC details. | Yes |
| 4. I/We would like to receive the Annual Reports, AGM Notices and other
communication from Issuers & RTAs in physical form. | No |
| 5. I/We request ACML to enable Standing Instruction for Auto Pledge Confirmation. | No |
| 6. Authorization for running account Maintenance to hold and release client fund only. | Quarterly |
| 7. Address for communication / Corporate Benetifts (Default Option is Local Address.)
Dividend ECS consent for Depository Purpose | Local /
Permanent |
| 8. I Wish to recived dividnet/ interest directly into my bank account as given below
through ECS.(If not marked, the default option would be 'yes') [ECS is mandatory
for location modify by SEBI from time to time] . | Yes |
| 9. SMS/Email facility for receiving message of NSDL / CDSL / NSE / BSE /
KRA / CERSAI /ACML and any statutory authority if not in this. | Yes |

Sign of First Holder



Sign of Second Holder



Sign of Third Holder





ACML

Tariff Sheet Part-I : Cash and F & O Segment (Brokerage Slab)

NSE and BSE Cash Segment	Brokerage Slab	Delivery		Trading			
		Del. %	Del. Min	First leg %	Second Leg %	First Leg Min	Second Leg Minimum
NSE_CASH							
NSE_CASH							

BSE and NSE F&O :Segment	Brokerage Slab	Option per Lot	Future			
			First leg %	Second Leg %	First Leg Min	Second Leg Minimum

Tariff Sheet Part-II : Other Charges (Excluding Service Tax)

1. In case client needs any additional hard copy (printout), ACML shall levy charge of Rs. 10/- per page.
2. ACML reserves the right to change any charge from time to time, with prior notice as prescribed by relevant authority.
3. I/We have a trading account as well as a Demat account with ASE Capital Markets Ltd. (ACML-NSDL DP/CDSL DP). For the convenience of payment of all the charges, pertaining to my demat account, I/we hereby request you to debit my trading account with all the DP account charges, as and when the bill is raised by ACML (NSDL-Depository Participant) and /or ACML (CDSL-Depository Participant).
4. Further, I understand that in case of any non-compliance of the Bye Laws, Rules and Regulations as laid down by SEBI / Exchanges and/or the Depositories, and for any other matters that may be decided by ACML from time to time, ACML may charge penalty on me. Such penalty amount shall be directly debited to my account. I/We hereby request you to debit my trading account for the amount of penalty charges in my demat/trading account with you.
5. KRA Charges : (Actual Per PAN)

Sign of First Holder

Sign of Second Holder

Sign of Third Holder



ACML

SCHEDULE OF DEMAT CHARGES FOR NSDL/CDSL DEMAT ACCOUNT

Charge Detail	AMC Scheme
Annual Maintenance Charge other then Corporate	3000+ GST
Off Market Transfer within ACML DP	Rs.50/-
Off Market Transfer other than ACML DP	Rs.100/-
Market Instruction for ACML Trading Platform	Rs.20/-
Market Instruction (other then ACML PoolAC)	RS.100/-
Buy Back Instruction	Rs.50/-
Pledge/Hypothecation Creation	RS.100/-
Pledge/Hypothecation Closure	RS.100/-
Demat Request Charges + Actual Courier Charge ,Remate Request Charges + Actual remate Charges (UP to max 10 certificates , more than 10 certificates per certificate rs 5)	RS.250/- per folio**

Notes :

- All other charges will be billed on a monthly basis excluding AMC and Account Opening charge.
 - Please refer Right sand Obligations in Part-10A.
 - "All market instructions for transfer must be received latest by 4.00 p.m. on the previous working day prior to the pay in day as per SEBI guidelines. All off market instructions for transfer must be received atleast 24 hours before the execution date, Late instructions would be accepted at the account holder's sole risk and responsibility"
 - All other Charges are subject to revision from time to time.
 - Any service not quoted above will be charged separately, at the discretion of ACML.
 - GST and other statutory charges if applicable will also be charged extra. I/We have read and understood the "Schedule of Charges" prescribed above and agree to abide by the same.
 - POA, E Statement CAS by mail , Issuer's & RTA communication by mail is mandatory for 99.99 scheme and life time scheme if POA Will revoke in future Rs 350 + GST will be charged
- NOTE:** (Charges applicable for all clients) : · KRA Charge (Actual Per PAN) · Client Modification request for KRA purpose: Per request Rs.50/- Courier Charges for each additional dispatched (within Ahmadabad Rs.10 and out of Ahmadabad Rs. 25/-) · Rs.5/- charge additional per debit ISIN instruction (in case of without POA). Only 1st DIS book free and thereafter Rs.150/- Per book · DIS book stop request RS.200/- Any Additional Printing Charge Rs. 10/- per page. Rs.75/- additional charge per ISIN for DIS submitted on Pay-in Day. Freeze & Unfreeze Request : Rs. 50/- Per ISIN, · Cheque Dishonour : Actual + Rs. 100 per instance, Speed-e/Easiest (account of choice) Maintenance Charges Rs. 2000/- p.a. per user id. Bank modification rs 25, address change rs 35
 ** Rs. 250/- per folio for 99.99 and Rs 150 per folio for Life time or as per NSDL/CSDL whichever is higher + 50 courier charges per folio or actual courier charges whichever higher.
 E - Stamp certificate charge rs 310., in case E stamp purchased by ACML.

Please find enclosed: cheque No. _____ Bank Name _____
 Bank Branch _____ Dated _____ for Rs. _____

towards Demat Service charges as per above charge schedule.

Sign of First Holder

Sign of Second Holder

Sign of Third Holder

Authorised Person Signature



ACML

Sub: Confirmation note regarding KYC mandatory / non mandatory Clauses and requirement

I / We understand that only the documents mentioned below seriated at 1 to 8 are mandatory (Part 1 of KYC) and non mandatory document or requirements below seriated at 9 to 12 (Part 2 of KYC) i.e any additional clauses or documentations that are being executed are voluntary and at the discretion of the trading member and me/us in compliance of SEBI circular no. CIR/MIRSD/16/2011 dated August 22, 2011.

PART-I : MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES /DEPOSITORY

Sr.No.	Name of the Document	Brief Significance of the Document
1.	Account Opening Form Rights and Obligations	A. KYC form - Document captures the basic information about the constituent and struction/check list. B. Document captures the additional information about the constituent relevant to trading account and an instruction check list.
2.	Rights and Obligations (Trading Purpose)	Document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).
3.	Risk Disclosure (RDD)	Document detailing risks associated with dealing in the securities market.
4.	Guidance note	Document detailing do's and don'ts for trading on exchange, for the education of the investors.
5.	Policies and Procedures	Document describing significant policies and procedures of the stock broker (to be added by the stock broker).
6.	Tariff sheet (Trading A/c)	Document detailing the rate/amount of brokerage and other charges levied on
7.	Rights and Obligations (Demat A/c Purpose)	Right and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories.
8.	Teriff Sheet (Demat A/c)	Schedule of Demat charges (Mandatory Documents Prescribed by Depository)

PART-II : VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER/DP

1. Confirmation note regarding KYC mandatory/non mandatory requirement
2. Client running account authorisation
3. E-mail / SMS consent to receive the ECN and trade confirmation and DP Transaction
4. Additional documents and agreement require for NSDL Demat Account
5. (A) POA in favour of ACML (under voluntary requirement)
(B) Various format for opening Trading and Demat account purpose
(C) Client In-Person verification portion (Mandatory Documents)

I / We also understand that in order to avail special facility, I / We may have to execute further documents relating to such special facility provided by the Member which are voluntary and I / We need not execute such documents if I / We do not wish to avail the said facility. Further, I / we have read, understood and executed KYC document and all the documents attached to the KYC and shall be binding upon me / us.

Sign of First Holder

Sign of Second Holder

Sign of Third Holder



ACML

Client Declaration With Email Read receipt

The rules and regulations of SEBI, Stock Exchanges, Depository and the Depository Participant pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules & regulations as are in force from time to time for such accounts. I/We also declare that the particulars given by me/us are true to the best of my/our knowledge as on the date of making such application. I/We further agree that any false/misleading information given by me or suppression of any material fact will render my/our account liable for termination and further action. I hereby declare that the details furnished above are true and correct to the best of my 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/We am/are aware that I/We may be held liable for it.

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.

4. I/We hereby confirm that I/We have complied with, and shall continue to comply with, Foreign Exchange management Act, 1999 and rules and regulations issued there under and other applicable laws (Point No. 4 : Applicable only for NRI account).

5. I/we take full responsibility for violation of any rules, regulations or requirements of any authority including SEBI, BSE, NSE, NSDL, CDSL and ACML in relation to operation of trading/Demat account in the name of minor. Further I/we will not use this trading/Demat account for buying of securities in the secondary market. We will ensure that this trading account is used only for selling of existing share holdings (Point No. 5 : Applicable only for Minor account).

6. I/We have read and understood the Securities and Exchange Board of India's guide lines on pledging of shares in dematerialised form as regulated by SEBI (Depositories and Participants) Regulations, 1996 and Depositories Act, 1996.

Email Read receipt Acknowledgement

I/we have received the photocopies of all document i.e. KYC form, Right and obligation, Risk disclosure document, and all other document executed by me/us from the member upon registration of Trading/Demat Account.

Client Name: _____

Place : _____ Date : _____

I/We have received following documents in registered mail as attachment. All these Documents have been carefully read by me/us.

Sr. No.	Document Received in Mail	No. Of page
1	E-MAIL / SMS CONSENT TO RECEIVE THE CONTRACT NOTE, TRADE CONFIRMATION, FUND LEDGER, TRADING SECURITY TRANSACTION STATEMENT, DEMAT TRANSACTION STATEMENT, DP HOLDING STATEMENT AND OTHER DOCUMENTS THROUGH E-MAIL REGISTERED WITH KYC DETAILS	3
2	INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM	4
3	RIGHTS AND OBLIGATIONS OF STOCK BROKERS, SUB-BROKERS AND CLIENTS AS PRESCRIBED BY SEBI AND STOCK EXCHANGES	7
4	RISK DISCLOSURE DOCUMENT FOR CAPITAL MARKET AND DERIVATIVES SEGMENTS	4
5	GUIDANCE NOTE - DO'S AND DON'TS FOR TRADING ON THE EXCHANGE(S) FOR INVESTORS	3
6	POLICIES AND PROCEDURES IN ADDITION TO MANDATORY DOCUMENTS	6
7	RIGHTS AND OBLIGATION OF BENEFICIAL OWNER AND DEPOSITORY PARTICIPANT AS PRESCRIBED BY SEBI AND DEPOSITORIES (NSDL-IN-302461/CDSL-13015200)	4
8	DETAILS OF INVESTOR GRIEVANCE CELL / ARBITRATION	2
9	MEMBER-CLIENT AGREEMENT FOR INVESTOR BASE INTERNET TRADING	2

Please sign in black ink only Name(s) of holder(s) Signature(s)

Sign of First Holder

Sign of Second Holder

Sign of Third Holder

