Agreement Between A Participant And A Person Seeking To Open A Beneficial Owner's Account

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Statement of Account

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3. The Participant shall furnish to the Beneficial Owner a statement of his/its account at the end of every month if there has been even a single entry or transaction during that month, and in any event once at the end of each ¹ [quarter]. Such statement shall be in the form specified in Operating Instructions. The Participant shall furnish such statements at such shorter periods as may be required by the Beneficial Owner on payment of such charges by the Beneficial Owner as may be specified by the Participant.

to the Participant on their respective due dates or within fifteen days of the same being demanded (where no such due date is specified)l, the Participant shall be entitled to charge interest on the amount remaining outstanding or unpaid ¹[not exceeding 18%] per Annum or part thereof. On such continued default, the Participant after giving two days notice to the Beneficial Owner shall have a right to stop processing of instructions of Beneficial Owners til such time he makes the payment along with interest if any.

Beneficial Owner shall intimate change of particulars

4. The Participant shall not e liable or responsible for any loss that may be caused to the Beneficial Owner by reason of his/its failure to intimate change in the particulars furnished to the Participant from time to time, unless notified by the Beneficial Owner.

Participant not liable for claims against Beneficial Owner

5.CDSL shall not be liable to the Beneficial Owner in any manner towards losses, liabilities and/or expenses arising from the claims of third parties or for any fees, charges, taxes, duties, levies or penalties levied, imposed or demanded by any Central, State, statutory or revenue authority in respect of securities credited to the Beneficial Owner's account.

Authorised Representative

6. Where the Beneficial Owner is a body corporate or a legal entity, it shall, simultaneously with the execution of the Agreement furnish to the Participant, a list of officials authorized by it, who shall represent and interact on its behalf with the Participant. Any change in such list including additions, deletions or alterations thereto shall be forthwith communicated to the Participant.

Closure of Account

7. The Beneficial Owner, may, at any time terminate this Agreement by calling upon the Participant to close his/its account with the Participant in the manner and on the terms and conditions set out in the Bye Laws and the procedure laid down in the Operating Instructions. In the event of termination of this Agreement the Beneficial Owner shall either get the securities transferred to some other account or get the same rematerialised.

¹ Inserted by SEBI direction vide letter no. MRD/CDSL/VM/29238/04 date 24.12.2004 Legal Dept/22.09.2004 Legal Dept/22.09.2004

Stamp Duty

8. Any stamp duty (including interest or penalty levied thereon) payable on the Agreement and/or on any dead, document or writing executed in pursuance hereof between the parties hereto shall be borne and paid by the Beneficial Owner.

Force Majeure

9.Notwithstanding anything contained herein or in the Bye Laws, neither party hereto shall be liable to indemnify or compensate the other for any breach, non-performance or delay in performance of any obligations under the Agreement or for any harm, loss, damage or injury caused to the other due to causes reasonably beyond its control including but not limited to tide, storm, cyclone, flood, lightning, earthquake, fire, blast, explosion or any other act of God, war rebellion, revolution, insurrection, embargo or sanction, blockade, riot, civil commotion, labour action or unrest including strike, lock-out or boycott, interruption or failure or any utility service, enemy action, criminal conspiracy, act of terrorism or vandalism, sabotage, or intrusion, or any other irresistible force or compulsion.

Service of Notice

10. Any notice or communicate required to be given under the Agreement shall not be binding unless the same is in writing and shall have been served by delivering the same at the address set out hereinabove against a written acknowledgment of receipt thereof or by sending the same by pre-paid registered post at the aforesaid address or transmitting the same by facsimile transmission, electronic mail or electronic data transfer at number or address that shall have been previously specified by the party to be notified. Notice given by personal delivery shall be deemed to be given at the time of delivery. Notice given by post in accordance with this clause shall be deemed to be given at the commencement of business of the recipient of the notice on the third working day next following its posing. Notice sent by facsimile transmission, electronic mail or electronic data transfer shall be deemed to be given at the time of its actual transmission.

Arbitration

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11. The parties hereto shall, in respect of all disputes and differences that may arise between them, abide by the provisions relating to arbitration and conciliation specified under the Bye Laws.

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Jurisdiction

12. The parties hereto agree to submit to the exclusive jurisdiction of the courts in______

Governing Law

13. The Agreement shall be governed by and construed in accordance with the laws in force in India.

IN WITNESS WHEREOF the parties hereto have hereunto set and subscribed their respective hands/seals to this Agreement in duplicate on the day, month, year and place first hereinabove mentioned.

Signed and delivered by		
	#	(Witness)
(For and behalf of Inter-connected Stock Exchange of India L	_td.)	
	Name —	
Signed and delivered by	Address	
<u>X</u>		
First Holder (for and on behalf of the BO)		
X	#	
Second Holder		(Witness)
X	Name —	
Third Holder	Address	

Inter-connected Stock Exchange of India Limited

International Infotech Park, Tower 7, 5th Floor, Vashi, Navi Mumbai - 400 703. Tel.: (022) 2781 2812 / 6794 1100 • Fax: (022) 2781 2794 • DP-ID No. 23400

Depository Participant Name / Address / DP ID

Application Form for Opening a Demat Account

(For entities other than Individuals)

(To be filled by the Depository Participant)

Application	on No.									Date	D	D	M	M	Υ	Υ	Υ	Υ
DP Intern	al Ref	erenc	e No.															
DP ID	1	3	0	2	3	4	0	0	CI	lient ID								

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

I/We request you to open a Demat Account in my/our name as per the following details: -

Name						
Search Name						
Correspondence Address						
City		State				
Country		PIN				
Telephone No.		Fax No	D.			
PAN/GIR No.						
IT Circle Ward / District						
E- mail ID						
MAPIN Code						
Registered Office Address (If different from Correspondence Address)						
City		State				
Country		 PIN				
Telephone No.		Fax No).			
E- mail ID			_			

Other Holders - Second Holders Details

First Name										
Middle Name										
Last Name										
Father/Husband Name										
Title	□ M	r. 🔲 Mrs	. 🔲 Ms		Other		Suffi	ix		
Permanent Address										
City				S	State					
Country				F	PIN					
PAN/GIR No.										
IT Circle Ward / District										
Date of Birth										
E- mail ID	D [) M	M Y	Υ	Y					
MAPIN Code										
Other Holders - Third Holder	's Deta	ils								
First Name										
Middle Name										
Last Name										
Father / Husband Name										
Title	□ м	r. 🔲 Mrs	. 🔲 Ms		Other		Suffi	ix		
Permanent Address										
Termunent Address										
City				S	state					
Country				F	PIN					
PAN/GIR No.										
IT Circle Ward / District										
Date of Birth										
E- mail ID	D [D M I	M Y	Υ	Y					
MAPIN Code										
Topo of Account (Disease tisks		!!								
Type of Account (Please tick			cable)				-	Sub	Statı	
Status Body Corporate Banks Trust Mutual Fund COC					☐ FII	CM				
			Clearing Ho			(Specify)	To be	e fille	ed by	the DP
Date of Incorporation		D D	M	1 Y	Υ	YY				
SEBI Registration No. (If Applic	able)			S	EBI Regist	ration date D	D M	M	Υ	YYY
ROC Registration No. (If Applic	able)			R	OC Regist	ration date D	D M	M	Υ	Y Y Y
RBI Registration No. (If Applica	ble)			R	BI Approv	al date D	D M	M	Υ	Y Y Y
Nationality		☐ Inc	lian [Oth	ners (spe	ecify)				
I / We authorize you to receive	credits	in my / ວເ	ır accour	nt		_				
without any instruction from r						Yes			No	
Account Statement Requirement	ent	Daily	,	Wee	kly	☐ Fortr	nightly	Ţ	_ Mc	onthly
Do you wish to receive dividend / interest directly in to your bank account given below through ECS?										

Bank Details

					_						
Bank Code (9 digit											
MICR code)											
Bank Name											
Branch											
Bank Address											
City			State			PIN					
Account number											
Account type	Savin	g	🔲 Cur	rent		Credi	t Card				
T											
For OCBs											
Foreign Address											
City	-			Ctoto	_						
Country	-			State	+						
Country Tolophone Number	-			PIN	+						
Telephone Number	-			Fax N	0.						
E-mail ID	-										
Indian Address											
City				State	Т						
Country	-			PIN	+						
Telephone No.	_			Fax N	$\frac{1}{2}$						
E-mail ID	_			Taxit	<u>. </u>						
Currency	+										
RBI Reference No.	+		RRI Aı	proval Dat	<u></u>	D	DI	M N	1 Y	Υ	ΥΥΥ
RBI Reference No.			1	ор. ото 2 от							. .
Clearing Members Deta		filled by	CMs only	y)							
Name of the Stock Exchan	ige										
Name of the CC / CH											
Trading Id											
Clearing Member ID											

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

	First / Sole Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Designation			
Signature			
Passport size Photograph	(Please sign across the photograph)	(Please sign across the photograph)	(Please sign across the photograph)

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(Perforated Card)

	First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Specimen Signature			

======= (Please Tear Her	e) =========
(To be filled by the Depository Participant)	

Inter-connected Stock Exchange of India Limited

International Infotech Park, Tower 7, 5th Floor, Vashi, Navi Mumbai - 400 703. Tel.: (022) 2781 2812 / 6794 1100 • Fax: (022) 2781 2794 • DP-ID No. 23400

Acknowledgement Receipt

Application No.: Date:	
We hereby acknowledge the receipt of the Account Opening Application Form from: -	
Name of the Sole / First Holder	
Name of Second joint Holder	
Name of Third joint Holder	