Please fill in ENGLISH and in BLOCK LETTERS with black ink

Application No.

## pentad securities

#### A. IDENTITY DETAILS

1. Name of Applicant		
Father's / Spouse Name		
Mother's Name	ol Status OSituals OManical	
2. A. Gender: Male Female Transgender B. Marita		
_	dian Other(ISO 3166 Country Code)	0
4. Status: Resident Individual NRI Foreign N	NationalFPI	
AADHAAR PAN		(Attached SEBI Registration Certificate)
6. Specify the proof of identity submitted PAN Other	specify	
B. ADDRESS DETAILS		
1. Correspondence/Residence Address/Overseas address for N	IRI/Foreign Individual:	
City/Town/Village		
State	Country	PIN
2. Contact Details Tele (Home/Off.)	Mobile No.	
E-mail ID :		SMS Facility: Yes No
I hereby declare that the aforesaid mobile no./ and or email id who is my (spouse, dependa		
3. Specify the proof of address submitted for correspondence and Passport Aadhaar Registered Lease/Sale Agreement of Residen		*Latest Bank A/c Statement/Passbook
	est Gas Bill Others ( <u>Please specify</u> )	
Proof of Address Identification No.	Issuing Authority	Place of Issue/Country
4. Permanent Address (mandatory for NRI If different from about	ove)	
City/Town/Village		
State	Country	PIN
5 Specify the proof of address submitted for correspondence a  Passport Aadhaar Registered Lease/Sale Agreement of Resider  *Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Bill *L		*Latest Bank A/c Statement/Passbook
Proof of Address Identification No.	Issuing Authority	Place of Issue/Country
FIOOI OF Address identification No.	issuing Authority	Trace or issue/country
DE	CLARATION	
• I/ We hereby declare that the details furnished above are true and co you of any changes therien, immediately . In case any of the above	-	
/ we are aware that I/ we may be held liable for it.		
$\bullet$ I/We hereby consent to receiving information from registered KRA	through SMS/Email on the above registered	ed number/Email address.
• I am / We are also aware that the Aadhaar OVD based KYC, my KYC		
sharing my/our masked Aadhaar card with readable QR code or my		th passcode and as applicable, with
KRA and other intermediaries with whom I have a business relation	nship for KYC purposes only	
FOR OFFICE USE ONLY Date:	Place:	
In-Person Verification Carried out by	7	
Employee Name : Adheena Xavier Employee Code : 318		F2
Designation: Customer Executive	AMC/Intermediary name OR code	Signature of Applicant
Adheria	(Originals Verified) Self Certified Docum	nent copies received
Cigmotuno	(A sets d) Tours souther of d	

# आयकर विभाग INCOME TAX DEPARTMENT



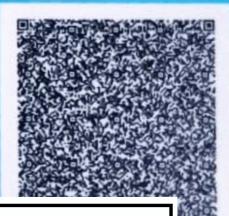
# भारत सरकार GOVT. OF INDIA



नाम /Name ADITHYA R K

स्थायी लेखा संख्या कार्ड Permanent Account Number Card

BSFPA9283B



पिता का नाम / Father's Name SUKUMARAN ADIYODI

जन्म की तारीख / Date of Birth 09/01/1998



PENTAD SECURITIES PRIVATE LIMITED

ORGINAL SEEN AND VERIFIED

EMPLOYEE NAME : ADHEENA XAVIER

EMPLOYEE CODE : 318

DESIGNATION :CUSTOMER EXECUTIVE

DATE : 04/02/2025

SIGNATURE





### ഭാരത സർക്കാർ

#### Government of India

ആദിതൃ ആര് കെ Adithya R K

PENTAD SECURITIES PRIVATE LIMITED

ORGINAL SEEN AND VERIFIED

EMPLOYEE NAME : ADHEENA XAVIER

EMPLOYEE CODE : 318

DESIGNATION :CUSTOMER EXECUTIVE

. 04/02/2025 DATE

SIGNATURE



mmm milwmi / DOB: 09/01/1998 സ്ത്രി / Female

0091



ആധാർ - സാധാരണക്കാരന്റെ അവകാശം



### ഭാരതിയ സവിശേഷ തിരിച്ചറിയൽ അതോറിറ്റി

## Unique Identification Authority of India

മേൽവിലാസം: D/O: സുകുമാരൻ അടിയോടി, രാവാരികണ്ടി, നടുവണ്ണൂർ നടുവണ്ണൂർ, കാവിൽ, കോഴിക്കോട് കേരേല, 673614

Address: D/O: Sukumaran Adiyodi, ravarikandy, Naduvannur, Naduvannur, Kavil, Kozhikode, Kerala, 673614

PENTAD SECURITIES PRIVATE LIMITED

ORGINAL SEEN AND VERIFIED

EMPLOYEE NAME : ADHEENA XAVIER

EMPLOYEE CODE : 318

DESIGNATION :CUSTOMER EXECUTIVE

DATE : 04/02/2025

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0091







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PENTAD SECURITIES PRIVATE LIMITED

ORGINAL SEEN AND VERIFIED

EMPLOYEE NAME : ADHEENA XAVIER

EMPLOYEE CODE : 318

:CUSTOMER EXECUTIVE DESIGNATION

Alberra

: 04/02/2025 DATE

SIGNATURE



SUKUMARAN ADIYODI

Nall and stress or pursue

INDIRA

PRABUL DAS SIVADASAN RAJITHA

RAVARIKANDY HOUSE, KAVIL POST

NADUVANNUR, KOZHIKODE

PIN:673614, KERALA, INDIA

god await or v. of cash and all all the property ( Dates V6126191 Widen/Fleto

19/01/2022

KOZHIKODE

K02074936890123



#### **Personal Bank Account**

Statement of Account with Allied Irish Banks, p.l.c.

Branch

6 Pearse St., Kinsale, Co. Cork.

National Sort Code

93-40-89

Account Name

ADITHYA RAVARIKANDY

9026B101

ADITHYA RAVARIKANDY 11 HILLCREST CAPPAGH KINSALE CO. CORK Telephone 021-4772157 Account Number 17946-041

Page Number

12

Date of Statement **20 Jan 2025** 

This is an eligible deposit under the Deposit Guarantee Scheme. For more information, please see the 'Deposit Guarantee Scheme - Depositor Information Sheet' which is available from your branch or on our website - www.aib.ie

IBAN: IE60 AIBK 9340 8917 9460 41 (BIC: AIBKIE2D)

Authorised Limit At Date Of Statement: Nil

Date	Details		Debit €	Credit €	Balance €
6 Dec 2024	BALANCE FORWARD Interest Rate Lending @ 11.850%  *MOBI ONLINE SAVER  *MOBI .		300.00 1000.00	1000.00	612.93
10 Dec 2024	*MOBI RENT  *MOBI ONLINE SAVER  *MOBI		300.00	270.00	12.93
23 Dec 2024 30 Dec 2024 6 Jan 2025	FEE-QTR TO 29NOV24 934089-17946041 *MOBI RENT	PENTAD SECUR ORGINAL SEEN A EMPLOYEE NAM EMPLOYEE COI DESIGNATION DATE SIGNATURE	AND VERIFIED  ME : ADHEEN  DE : 318	IA XAVIER MER EXECUTIV	/E
7 Jan 2025 9 Jan 2025	TAX REVCOM059916830NA2 IE25010746597579 *MOBI ONLINE SAVER 03-873090780044001		4000.00	1100.00 2866.51 1570.60	0.21
10 Jan 2025 14 Jan 2025	*MOBI ONLINE SAVER  *MOBI ONLINE SAVER  *MOBI ONLINE SAVER  *MOBI ONLINE SAVER  *MOBI .		1500.00 70.81 250.00	250.00	70.81 0.00 0.00

'TxnDate' (transaction date) shows the date an instant payment is received (i.e. the Calendar Day) and more information is available at www.aib.ie/sepaqanda and www.aibni.co.uk/sepaqanda

If you use our online banking services, you can find more information about your payments in the payment logs.

If you are a business customer, you can ask us to review your credit facilities, security and any alternative arrangements that you may have with us. To set up this annual review meeting contact your Relationship Manager or local branch.

For Important Information and Standard Conditions regarding your account log onto www.aib.ie/standardconditions

Your Authorised Limit is subject to the terms and conditions referred to in your letter of sanction, (including any set-off, if applicable).

Overdrawn balances are marked dr

Thank you for banking with us.