

Trading Authorization Form – Voluntary

Date:

Spark Family Office and Investment Advisors (India) Private Limited

No. 1, 3rd Floor, First Crescent Park Road,
Gandhi Nagar, Adyar, Chennai – 600 020

Sub: Trading Authorization Form

Ref: Trading Account: _____

1. This is reference to my aforementioned Trading Account with Spark Family Office and Investment Advisors (India) Pvt Ltd (hereinafter called SFO) opened by executing various KYC documents to trade on various exchanges
2. Due to nature of my work and my other pre-occupations, I am unable to personally trade / invest / give orders/ convey investment decisions effected through the aforementioned trading account.
3. Mr./Ms. _____ (Family Representative – FR) S/o, D/o, W/o. Mr./Ms. _____
Email Id of FR _____ aged about _____ years, residing at _____
_____ is my _____ (relationship) who has good knowledge of securities market and has got prior experience with respect to investment in securities market and I have full faith and confidence in him. As such I hereby appoint and authorize Mr./Ms. _____ as my FR in relation to taking investments decisions, investing / trading in securities through the trading account being opened by me with SFO.
4. Any instructions given to or received from Mr. / Ms. _____ (Name of the person to be Authorized) in connection with the said trading account will be treated as instructions given to or received from me.
5. I, further, hereby undertake to honour all obligations arising out of the orders placed by Mr. / Ms. _____ (Name of the person to be Authorized) by virtue of this authority letter and I indemnify and shall keep Spark Family Office and Investment Advisors (India) Pvt Ltd. indemnified from any and all losses arising out of such orders.

PLEASE READ CAREFULLY

NOW THROUGH THIS AUTHORIZATION LETTER I do hereby nominate, appoint and constitute Mr. /Mrs. _____ as my true and lawful FR to do the following acts, deeds and things on my behalf:

1. To buy, sell or in any manner trade in or deal with (including but not limited to setting off, alteration or closing out of transactions and freezing of the account) securities (as defined in Section 2h of the Securities Contracts Regulation Act, 1956 which includes equity, derivatives) on the NSE, BSE and / or any other stock exchange(s) my FR thinks fit through my aforementioned trading account.
2. To the extent permitted by SFO, place orders with SFO for the aforesaid purposes and to the extent permitted by SFO to cancel revoke or alter such orders, to acknowledge contract notes and any other documents as may be required by SFO.
3. To receive and give / effect trade confirmations, SMS confirmations, email confirmations, letters / notices payment/receipt instruction and any other communications including margin shortfall and squaring up of open position due to margin shortfall from and to SFO (in addition to the documents / confirmations received and executed / effected by me) and to sign all documents in relation to investing / trading in securities.
4. I assume full and complete responsibility for all the investment decision (s) / transaction (s) effected by the FR and that I am not entitled to hold SFO, its officers, directors, employees, agents and affiliates for any loss / liability arising out of the investment decision (s) and / or transaction (s) effected by the FR on my behalf. I confirm that I will receive all trade details / obligation details etc. pertaining to my trading account, from my FR as and when trades / transactions were affected in my account and undertake to confirm trades / statement of accounts as and when called upon to do so.
5. I hereby agree that I shall not alter or revoke this Trading Authorization without 30 days prior written notice to my FR as well as to SFO and that the revocation or alteration shall not affect acts deeds or things done by my FR in relation to SFO or in relation to the securities transactions prior to such revocation or alteration being communicated to SFO.


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Signature of Sole/First Holder

AND I hereby agree to ratify and confirm all and whatsoever my FR shall lawfully do purport to do or cause to be done by virtue of this Letter of Authorization.

Important Information

'Family Representative' would mean self, spouse, dependent children and dependent parents.

I agree and confirm	I accept, agree & confirm
Signature of Sole/First Holder 	Signature of FR
Mobile number of Client	Mobile number of FR
Landline number of Client	Landline number of FR
E-mail ID of Client	E-mail ID of FR

'Family Representative' would mean self, spouse, dependent children and dependent parents.

Name of Branch Manager/Authorised Person _____

Signature of Branch Manager/Authorised Person _____

Passport photograph of
FR to be affixed with
sign across the
photograph

Note : Family Representative PAN Proof required with signature & Branch/AP's IPV

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