

Annexure - 1

ACCOUNT OPENING KIT

INDEX

S.No.	Name of the Document	Brief Significance of the Document	Page No
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES			
1	Account Opening Form	A. KRA- KYC form - Document captures the basic information about the constituent and an instruction/check list.	3 – 13
		B. Document captures the additional information about the constituent relevant to trading and demat account and an instruction/check list.	17 – 24
2	Rights and Obligations of Stock Brokers, Sub-brokers and Clients	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).	39-46
3	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities market.	47-51
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Geojit BNP Paribas Financial Services Ltd.			Corporate Identity Number: L67120KL1994PLC008403
Registration no. & date			
Exchange/Segment/Registration No/Reg. date			Compliance Officer name/phone/e-mail id
NSE/Cash/INB231337230 /02.04.2009	BSE/Cash/INB011337236 /05.05.2009	MSEI/Cash/INB261337233 /01.10.2013	Zacharia K G 0484- 2901000 compliance@geojit.com
NSE/F&O /INF231337230 /02.04.2009	BSE/F&O /INF011337237 /22.05.2009	MSEI/F&O /INF261337233 /01.10.2013	
NSE/CDS /INE231337230 /02.04.2009	BSE/CDS / INB011337236/22.01.2014	MSEI/CDS /INE261337230 /20.11.2008	
Member Code:13372	Member Code:328	Member Code:1102	
Port Folio Manager : Reg no. INP000003203, Date : 16.02.2012			
Depository	NSDL - IN - DP-NSDL-24-97, date: 03.05.2013	CDSL - IN-DP-CDSL-648-2012, date : 02.01.2012	Indu K 0484- 2901000 indu_k@geojit.com
Investment Adviser	INA200002817, Date : 20.03.2015		
Research Analyst	INH200000345, Date : 20.04.2015		
AMFI reg. no & date	ARN 0098 , Date: 09.05.2012		
Reg. Office/Correspondence Address: 34/659-P, Civil Line Road, Padivattom, Kochi-682024, Phone: 0484-290100, Fax: 0484-2979695, Website: www.geojitbnpparibas.com			
CEO name, phone no & email id:	Mr. C J George, 0484 2901000, md@geojit.com		
For any grievance/dispute please contact Geojit BNP Paribas Financial Services Ltd at the above address or email id grievances@geojit.com and phone: 91-484-2901000. In case not satisfied with the response, please contact the concerned exchange(s) at the contact details given below:			
Exchange	Department	Email ID	Phone No.
National Stock Exchange of India Ltd	Investor Grievance Cell	ignse@nse.co.in	022-26598190
Bombay Stock Exchange Ltd	Investor Services	is@bseindia.com	022-22728138
Metropolitan Stock Exchange of India Ltd	Investor Complaints	investorcomplaints@msei.com	022 61129000 Ext. 9028

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INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity
7. For non-residents and foreign nationals, [allowed to trade subject to RBI and FEMA guidelines], copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC [Continuous Discharge Certificate] is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons [PEP] are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.
2. Utility bills like Telephone Bill [only land line]. Electricity bill or Gas bill Not more than 3 months old.
3. Bank Account Statement/Passbook-Not more than 3 months old.
4. Self-declaration by High Court Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/ Scheduled Co-operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/ Parliament/Document issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertaking, Schedules Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians [which are duly notarized and/or apostilled or consularised] that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions clarifications to PAN [*Sufficient documentary evidence in support of such claims to be collected.]

1. In case of transactions undertaken on behalf of Central Government and /or State Government and by officials appointed by Courts e.g. Officials liquidator, Court receive etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds up to Rs. 50000/- p.a.
5. In case of Institutional clients, names, FIIs, Mfs, VCFs, FVCIs, Schedules Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institutions as defined under Section 4A of the Companies Act, 1956, Custodians shall verify the PAN Card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

B. Proof of Identity[POI]: List of documents admissible as Proof of identity:

1. PAN Card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN[listed in Section D].
2. Unique identification Number [UID] [Aadhaar] / Passport / Voter ID card / Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/regulatory authorities, Public Sector Undertakings, Schedules Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by banks.

C. Proof of Address [POA]: List of documents admissible as proof of Address: [* Documents having an expiry date should be valid on the date of submission.]

1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of Residence/Driving License/ Flat Maintenance bill/Insurance Copy.

E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, manager of a Schedules Commercial/Co-operative Bank or Multinational Foreign Banks [Name, designation & Seal should be affixed on the copy]
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.

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9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC [Continuous Discharge Certificate] is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons [PEP] are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.
2. Utility bills like Telephone Bill [only land line]. Electricity bill or Gas bill Not more than 3 months old.
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2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds up to Rs. 50000/- p.a.
5. In case of Institutional clients, names, FIIs, Mfs, VCFs, FVCIs, Schedules Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institutions as defined under Section 4A of the Companies Act, 1956, Custodians shall verify the PAN Card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

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Agreement of Residence/Driving License/Flat Maintenance bill/ Insurance Copy.

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F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, as mentioned below:

Types of entity	Documentary requirements
Corporate	<ul style="list-style-type: none"> Copy of the balance sheets for the last 2 financial years (to be submitted every year). Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. Photograph, POI, POA, PAN of individual promoters holding control – either directly or indirectly. Copies of the memorandum and Articles and certificate of incorporation. Copy of the Board Resolution for investment in securities market. Authorized signatories list with specimen signatures.
Partnership firm	<ul style="list-style-type: none"> Copy of the balance sheets for the last 2 financial years (to be submitted every year). Certificate of registration (for registered partnership firms only). Copy of partnership deed. Authorized signatories list with specimen signatures. Photograph, POI, POA, PAN of Partners.
Trust	<ul style="list-style-type: none"> Copy of the balance sheets for the last 2 financial years (to be submitted every year). Certificate of registration (for registered trust only). Copy of Trust deed. List of trustees certified by managing trustees/CA. Photograph, POI, POA, PAN of Trustees.
HUF	<ul style="list-style-type: none"> PAN of HUF. Deed of declaration of HUF/List of coparceners. Bank passbook/Bank statement in the name of HUF. Photograph, POI, POA, PAN of Karta.
Unincorporated Association or a body of Individuals	<ul style="list-style-type: none"> Proof of Existence/Constitution document. Resolution of the managing body & power of Attorney granted to transact business on its behalf. Authorized signatories list with specimen signatures.
Banks/Institutional Investors	<ul style="list-style-type: none"> Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. Authorized signatories list with specimen signatures.
Foreign Institutional Investors (FII)	<ul style="list-style-type: none"> Copy of SEBI Registration certificate. Authorized signatories list with specimen signatures.
Army/Government Bodies	<ul style="list-style-type: none"> Self-certification on letter head. Authorized signatories list with specimen signatures.
Registered Society	<ul style="list-style-type: none"> Copy of Registration Certificate under Societies Registration Act. List of Managing Committee members. Committee resolution for persons authorized to act as authorized signatories with specimen signatures. True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.

Details of Promoters / Partners / Karta / Trustees and Whole Time Directors Forming A Part of Know Your Client (KYC) Application Form for Non-individuals

Name of Applicant PAN of the Applicant

Sl. No.	PAN	Name	DIN (For Directors) / UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.	Whether Politically Exposed	Photograph
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	

Name & Signature of the Authorised Signatory(ies) Date

D	D	M	M	Y	Y
---	---	---	---	---	---

PEP: Politically Exposed Person **RPEP:** Related to Politically Exposed Person

– Intentionally left blank –

Details of the Ultimate Beneficial Owner (natural person) in case of Non-individual account

Client Type: Company / Partnership / Unincorporated Associations / Body of Individuals / Trust

Sl. No.	Name	PAN	Related Entry	Relationship with the entity	Address of beneficial owner	Email Address	Contact Nos.
Branch Seal		Employee Code:		Employee Name:			
Date:		Place		Signature			

Please use additional copies of this form if required.

PERSONAL INFORMATION

Share your Personal information with us to serve you better

Your Name											
No. of Dependents											
Name of					DOB	Contact Number		Email ID		PAN	
Name of											
	Employment : Pvt Sector / Public Sector / Govt / Business / Professional / Agriculture / retired / Housewife / Student / Others										
Children											
	Employment : Pvt Sector / Public Sector / Govt / Business / Professional / Agriculture / retired / Housewife / Student / Others										
Children											
	Employment : Pvt Sector / Public Sector / Govt / Business / Professional / Agriculture / retired / Housewife / Student / Others										
Children											
	Employment : Pvt Sector / Public Sector / Govt / Business / Professional / Agriculture / retired / Housewife / Student / Others										
Number of Earning members in Family			Monthly Income (Family)			Below Rs 1 lac / 1-5 lac / 5-10 lac / 10-25 lac / Above 25 lac					
Do you have Insurance cover?	Yourself Your family		Yes / No Yes / No		Do you have Medical Insurance cover?		Yourself Your family		Yes / No Yes / No		
How many credit cards do you have					Type of Credit Card you use : Visa / Mastro / Others _____						
Your House	Own / Rent / Parents				Having Home loan		Yes / No				
No. of Property					Property Value						
Which model mobile phone do you use											
Do you own a vehicle	Car / Motor Bike / Heavy vehicles				Vehicle loan ?		Yes / No				
Investments Deposit	Shares	M Fund	Bonds	Debentures	Kisan Vikas Patra		Fixed Deposits				
	NSC	Gold	Real Estate	Commodity	Cash	Others	Total Amt. Rs. _____				
Loan Requirements	Yes / No				If Yes, Purpose _____ Amt. Rs. _____						
Would you like to participate in investor Education Programs					Yes / No						
Would you like to receive more informations from us ?		Yes / No				If Yes, Preferred mode : email / Smart phone / Mobile					
Your Hobbies											
Would you like to recommend Geojit BNP Paribas to you friends / family ? If Yes, Please provide :											
1. Name of person :						Contact Number :					
2. Name of person :						Contact Number :					

FATCA QUESTIONNAIRE & DECLARATION FOR DETERMINING US STATUS

Section 1: US status evaluation

Sr. No	Evaluation Criteria	Guidance	Status (Please tick appropriately)
1	US National	Note 1	YES / NO
2	US resident	Note 2	YES / NO
3	Born in the USA	Note 3	YES / NO
4	US address	Note 4	YES/ NO
5	US telephone number	Note 5	YES / NO
6	Standing instruction to transfer money to an account with US address	Note 6	YES / NO
7	Power of attorney or signature authority in favour of a person with US address	Note 7	YES / NO
8	In care of or hold mail address as the only address	Note 8	YES/ NO

- If the answers to all the above is "NO" , then status is Non US Person
- If the answer to 1 to 2 is "YES" , Then status is US person (Customer to provide FORM W9)
- If the answer to any of question 3 to 8 is YES , then initial status is " US Indicia" in which case
 - Customer is to confirm whether he is a US Person OR Non US Person. If he confirms that he is a US Person, then customer to provide Form W9 as in (b) above
 - If not a US Person, then customer to provide Form W8 BEN. (If customer completes Form W8BEN then he is not a US Person)

Section 2 US status confirmation

Based on above the US Status :	Non US Person / US Person								
If US Person then TIN Number									

Section 3 : Customer Declaration

- In case of any material change in the circumstances affecting my/our US person status as per FATCA , I will inform such changes to **Geojit BNP Paribas Financial Services Ltd** within 30 days of such event
- I confirm that the above analysis is done in my presence and based on information provided by me, I agree with the US status documented above for my accounts.
- I hereby consent to the disclosure and reporting of any tax related information obtained or held by **Geojit BNP Paribas Financial Services Ltd** to any local regulatory or tax authority/ US authorities for FATCA purposes

Customer Name:

Customer Signature:

Trading Code :

(in case of Existing Customers)

I have verified the US status classification

Staff Name

Branch Manager / Supervisor

Seal & Signature

Disclosures

1. In congruity with industry standards & practice and our business requirements, our employees are incentivized, financially or otherwise, for the business generated through various financial products & services offered. However, we do not have an incentive structure that encourages sale of products that are in conflict with your interests. Earnest efforts have been made to introduce the most comprehensive products & services, keeping our client's best interest in mind. This disclosure is being made voluntarily, towards our initiative to eliminate conflict of interest situations.
2. Geojit disclose herewith that it currently does not undertake proprietary trading.

TRADING AND DEMAT ACCOUNT RELATED DETAILS

I/We request you to open the following account(s) in my/our name as per the following details.
(Please tick only one of the following options)

- ☐ Trading Account and NSDL Demat Account ☐ Trading Account only
☐ Trading Account and CDSL Demat Account ☐ NSDL Demat Account only
☐ CDSL Demat Account only

DP IDs: NSDL: ☐ IN300239 ☐ IN301637 CDSL: ☐ 12048900

Client ID (To be filled by Participant)							
Type of Demat Account	<input type="checkbox"/> Ordinary Resident	<input type="checkbox"/> NRI-Repatriable	<input type="checkbox"/> NRI-Non-Repatriable	<input type="checkbox"/> Margin	<input type="checkbox"/> Promoter	<input type="checkbox"/> HUF	<input type="checkbox"/> Others (please specify)
Type of Trading Account	<input type="checkbox"/> Ordinary Resident	<input type="checkbox"/> NRI-Repatriable	<input type="checkbox"/> NRI-Non-Repatriable	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership	<input type="checkbox"/> HUF	<input type="checkbox"/> Others (please specify)

A. SOLE/FIRST HOLDER DETAILS

SMS Facility (This facility is made mandatory to register Power of Attorney in demat account. Ensure that the mobile number is provided in the KYC Application Form.)

☐ Yes ☐ No

Name of the Trading A/C Holder	
Name of the First/Sole Holder (demat)	

B. OTHER DETAILS

Gross Annual Income Details (please specify)	Income Range per annum	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> 25-50 Lac <input type="checkbox"/> 50 Lacs to 1 Crore <input type="checkbox"/> 1-5 Crore <input type="checkbox"/> 5-10 Crore <input type="checkbox"/> > 10 Crore											
	Net-worth as on (date)	D	D	M	M	Y	Y	Y	Y	_____ (*Net worth should not be older than 1 year)			
If Mobile #/Email id used belongs to a different person, specify the relationship & PAN (Mark "SELF" in case of own Mobile #/Email id)	Dependent Relationship (TICK Correct One)					Dependent PAN							
	Mobile	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>								
	E-mail	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>								
Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others												
Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)												
Name of Employer/Establishment with full address													
Designation													

For definition of PEP, please refer instructions on the reverse side of KRA-KYC form.

C. SECOND HOLDER DETAILS

SMS Facility (This facility is made mandatory to register Power of Attorney in demat account. Ensure that the mobile number is provided in the KYC Application Form.)

☐ Yes ☐ No

Name of the Second Holder (demat)	
-----------------------------------	--

D. OTHER DETAILS

Gross Annual Income Details (please specify)	Income Range per annum	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> 25-50 Lac <input type="checkbox"/> 50 Lacs to 1 Crore <input type="checkbox"/> 1-5 Crore <input type="checkbox"/> 5-10 Crore <input type="checkbox"/> > 10 Crore											
	Net-worth as on (date)	D	D	M	M	Y	Y	Y	Y	_____ (*Net worth should not be older than 1 year)			
If Mobile #/Email id used belongs to a different person, specify the relationship & PAN (Mark "SELF" in case of own Mobile #/Email id)	Dependent Relationship (TICK Correct One)					Dependent PAN							
	Mobile	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>								
	E-mail	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>								
Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others												
Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)												
Name of Employer/Establishment with full address													
Designation													

For definition of PEP, please refer instructions on the reverse side of KRA-KYC form.

E. THIRD HOLDER DETAILS	
SMS Facility (This facility is made mandatory to register Power of Attorney in demat account. Ensure that the mobile number is provided in the KYC Application Form.)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of the Third Holder (demat)	

F. OTHER DETAILS																														
Gross Annual Income Details (please specify)	Income Range per annum <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> 25-50 Lac <input type="checkbox"/> 50 Lacs to 1 Crore <input type="checkbox"/> 1-5 Crore <input type="checkbox"/> 5-10 Crore <input type="checkbox"/> > 10 Crore																													
	D D M M Y Y Y Y _____ (*Net worth should not be older than 1 year)																													
If Mobile #/Email id used belongs to a different person, specify the relationship & PAN (Mark "SELF" in case of own Mobile #/Email id)	Dependent Relationship (TICK Correct One)																													
	Dependent PAN																													
	<table border="1"> <tr> <td>Mobile</td> <td>Self <input type="checkbox"/></td> <td>Spouse <input type="checkbox"/></td> <td>Dependent Child <input type="checkbox"/></td> <td>Dependent Parent <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>E-mail</td> <td>Self <input type="checkbox"/></td> <td>Spouse <input type="checkbox"/></td> <td>Dependent Child <input type="checkbox"/></td> <td>Dependent Parent <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Mobile	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>											E-mail	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>									
Mobile	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>																										
E-mail	Self <input type="checkbox"/>	Spouse <input type="checkbox"/>	Dependent Child <input type="checkbox"/>	Dependent Parent <input type="checkbox"/>																										
Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others																													
Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)																													
Name of Employer/Establishment with full address																														
Designation																														

For definition of PEP, please refer instructions on the reverse side of KRA-KYC form.

G. GUARDIAN DETAILS (In case the Sole Holder is a minor). - Applicable for Demat Account only	
Name (Mr./Ms.)	PAN _____ Provide a copy of the PAN card and original for verification
Relationship (if any)	Date of Birth* (of Minor) D D M M Y Y Y Y
Address (Submit valid Proof of Address)	
	PIN CODE: _____

* Provide attested copy of Birth Certificate.

H. BANK DETAILS	TRADING ACCOUNT	DEMAT ACCOUNT
Bank A/c No.	In case of NRIs, give PIS bank account details separately for trading A/C*	(In case of NRIs NRE/NRO SB A/C No)
Bank Sub-type	<input type="checkbox"/> Savings Account <input type="checkbox"/> Current Account <input type="checkbox"/> Others	<input type="checkbox"/> Savings Account <input type="checkbox"/> Current Account <input type="checkbox"/> NRE <input type="checkbox"/> NRO
Bank Name (Full name)		
Bank Branch Address (Write as per the manner discribed)	Building/Tower/Appartment/Palace/Chamber/Mansion	Building/Tower/Appartment/Palace/Chamber/Mansion
	Street/Road/Marg/Lane/Avenue/Rasta	Street/Road/Marg/Lane/Avenue/Rasta
	Area Name	Area Name
	City Name	City Name
	PIN CODE	PIN CODE
MICR Number		
IFSC Number		
In case of NRIs, RBI Reference No. *		
RBI Approval Date		D D M M Y Y Y Y

I. STANDING INSTRUCTIONS FOR DEMAT ACCOUNT		
I/We authorise you to receive credits automatically into my/our account	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Account to be operated through Power of Attorney (PoA) (If yes, ensure SMS alert facility is opted.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Download of Email ID to Issuer/R&T Agent	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I/We authorise you to send all communications/statements through the e-mail only*	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Address for communication/Corporate Benefits	<input type="checkbox"/> Local/Permanent Address <input type="checkbox"/> Correspondence Address/Foreign Address (Default option is Local Address)	

*All communication shall be sent at the email ID/correspondence address of the Sole/First holder only. Read Instruction 5 in page no.22 and ensure that email ID is provided in KYC Application Form. Please ensure the correctness of e-mail address in the KYC Application Form.

J. DEPOSITORY ACCOUNT DETAILS (Please see instruction No. 3 in page 22)				
Depository Participant Name	Depository Name (NSDL/CDSL)	Beneficiary Name	DP ID	Beneficiary ID (BO ID)

K. TRADING PREFERENCES

***Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.**

Exchanges	Segments			
NSE	Cash	(Full signature required)	Currency Derivative	(Full signature required)
	F&O	(Full signature required)	Debt Market	(Full signature required)
	Mutual Fund (MFSS)	(Full signature required)		
BSE	Cash	(Full signature required)	Currency Derivative	(Full signature required)
	F&O	(Full signature required)	Debt Market	(Full signature required)
MCX-SX	Cash	(Full signature required)	Currency Derivative	(Full signature required)
	F&O	(Full signature required)		(Full signature required)

If, in future, the client wants to trade on any new segment/new exchange, separate authorization/letter should be taken from the client by the stock broker.

L. DOCUMENTARY EVIDENCE OF FINANCIAL DETAILS FOR DERIVATIVE CLIENTS (For Derivatives Trading)				
<input type="checkbox"/> Copy of Tax Return	<input type="checkbox"/> Salary Certificate	<input type="checkbox"/> Net Worth Certificate	<input type="checkbox"/> Bank Statement for the last 6 months	Others, Please Specify

M. PAST ACTIONS	
Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/ constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years	

N. DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS

If client is dealing through the sub-broker, provide the following	Sub-broker's Name:					
	NSE SEBI Registration number					
	BSE SEBI Registration number					
	Registered office address					
	Phone		Fax		Website	
Whether dealing with any other stock broker/sub-broker (if case dealing with multiple stock brokers/sub-brokers,	Name of stock broker				Name of Sub-Broker, if any	
	Client Code				Exchange	
	Details of disputes/dues pending from/to such stock broker/sub-broker					

O. ADDITIONAL DETAILS

Whether you wish to receive Electronic Contract Note or Physical Contract Note (ECN) please specify	<input type="checkbox"/> Electronic Contract Note	<input type="checkbox"/> Physical Contract Note
Whether you wish to avail of the facility of internet trading/ wireless technology (please specify)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of years of Investment/Trading Experience		
In case of sole proprietor/partnership, please indicate the name and address of the firm		
SMS and email alerts to investors by stock exchanges. (Please tick whichever is applicable. If not ticked, assumed 'Not Required')	<input type="checkbox"/> SMS	<input type="checkbox"/> Email <input type="checkbox"/> Both <input type="checkbox"/> Not Required
I declare that I don't have	<input type="checkbox"/> Mobile	<input type="checkbox"/> Email
Any other information		

P. INTRODUCER DETAILS (optional)

Name of the Introducer	(Surname)	(Name)	(Middle Name)
Status of the Introducer	<input type="checkbox"/> Sub-broker _____ <input type="checkbox"/> Remiser _____ <input type="checkbox"/> Authorized Person _____		
	<input type="checkbox"/> Existing Client _____ <input type="checkbox"/> Others, please specify _____		
Address of the Introducer			
Phone Number		Signature of the Introducer	

Q. RELATIVE OF GEOJIT BNP PARIBAS EMPLOYEE (For Trading)

Are you a relative of Geojit BNP Paribas employee? Yes / No
If yes, please indicate your relationship with the employee _____ (Parent/Parent-in-law/Sibling/Spouse/Child)
Employee code _____ Employee name _____

R. OTHER DETAILS - NON-INDIVIDUALS

Is the entity involved / providing any of the following services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
For Foreign Exchange / Money Changer Services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Gaming / Gambling / Lottery Services (eg. Casinos, betting syndicates)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Money Lending / Pawning	<input type="checkbox"/> Yes	<input type="checkbox"/> No

S. NOMINATION (Please read the instruction given below before filling)
☐ I/We wish to make a nomination
(As per details given below)

☐ I/We do not wish to make a nomination
(Strike off the nomination details below)

I/We wish to make a nomination and do hereby nominate the following person in whom all rights and / or amount payable in respect of securities held in the Depository by me / us in the said beneficiary owner account shall vest in the event of my / our death.

1	Name of the Nominee (Mr./Ms.)														
2	Relationship with the Applicant (if any)														
3	Address of Nominee														
4	Contact Details of nominee	City/town village					PIN Code								
		State					Country								
		Tel. (Off.)					Tel. (Res.)								
		Fax No.					Mobile No.								
		Email ID													
5	Nominee Identification details (please tick any one from (a) to (f) and provide details of the same)														
(a)	<input type="checkbox"/> (i)	Photograph				Signature									
		<div style="border: 1px solid black; padding: 10px; text-align: center;"> Photograph of nominee (Signature of nominee across photograph) </div>				(ii)	x Signature of nominee								
(b)	<input type="checkbox"/>	PAN of nominee													
(c)	<input type="checkbox"/>	Aadhaar number of nominee													
(d)	<input type="checkbox"/>	Saving bank acciunt number of nominee, if maintained with the same Participant													
(e)	<input type="checkbox"/>	Copy of any proof of identity document (accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure JB)													
(f)		Demat account details of nominee					DPID								
							Client ID								
Sr. Nos. 6-11 should be filled only if nominee is a minor:															
6	Date of Birth (in case of minor nominee)						D	D	M	M	Y	Y	Y		
7	Name of Guardian (Mr./Ms.) (incase of minor nominee)														
8	Address of Guardian														
						City/town village					PIN Code				
						State					Country				
9	Contact Details of Guardian					Tel. (Off.)					Tel. (Res.)				
						Fax No.					Mobile No.				
						Email ID									
10	Relationship of Guardian with nominee														

11. Guardian Identification details (please tick any one from (a) to (f) and provide details of the same)																	
(a)	<input type="checkbox"/>	(i)	Photograph		Signature												
			<div style="border: 1px solid black; padding: 10px; text-align: center;"> Photograph of guardian (Signature of guardian across photograph) </div>		(ii)	x Signature of nominee											
(b)	<input type="checkbox"/>	PAN of guardian															
(c)	<input type="checkbox"/>	Aadhaar number of guardian															
(d)	<input type="checkbox"/>	Copy of any proof of identity document (accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure JB)															
(e)	<input type="checkbox"/>	Demat account details of guardian.	DP ID														
			Client ID														
(C) Name and Signature of Account holder(s)																	
	Account Holder(s)		Name							Signature of Account Holder(s)							
	Sole/First Holder									X							
	Second Holder									X							
	Third Holder									X							
(D) Signature of Witness for nomination																	
	Name of the Witness		Address							Signature of witness							
										X							
										D	D	M	M	Y	Y	Y	Y

Instructions:

- The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate, partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly all joint holders will sign the nomination form.
- A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
- The Nominee shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
- Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
- Transfer of securities in favour of a Nominee shall be valid discharge by the depository and the Participant against the legal heir.
- The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Nonindividuals including society, trust, body corporate, partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
- On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee.
- Send your queries to customercare@geojit.com or call our Customercare at Toll Free Line : 1800 425 5501, 1800 103 5501 (within India) or +91 0484 3911777 (Paid Line) Monday to Friday 8:30 A.M to 5:30 P.M. Saturdays : 10:00 A M to 1:00 P M
- Please submit the request in duplicate for acknowledgement.

T. DECLARATION

1. The rules and regulations of the Depository and Depository Participants/Capital Market 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 as are in force from time to time for such accounts. 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. In case of non-resident account, I/we also declare that I / we have complied and will continue to comply with FEMA regulations.
2. I/we understand and acknowledge the fact that I/we am/are at liberty to withdraw all or any of the information provided by me/us and the same shall be made by me/us in writing. I/we confirm and accept that such withdrawal shall entitle you to withdraw all or any of the services provided to me/us under the account opening documentation.
3. I/We acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".
4. 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.
5. I/We further confirm having read and understood the contents of the "Rights and Obligations of Stock Brokers, Sub-Brokers and Clients" as prescribed by SEBI and Stock Exchanges and the "Risk Disclosure Document for Capital Market and Derivatives Segments". 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.
6. * I/We acknowledge the receipt of copy of the document, "Additional Rights and Obligations for Broking and Other Products and Services." I / We understand and acknowledge that this is a voluntary (non-mandatory) document for availing value added products and services as provided by Geojit BNP Paribas Financial Services Ltd. and unconditionally agree to abide by the terms and conditions mentioned therein. I agree that I will receive an electronic copy/ physical copy of the said document after I am enrolled as a client of Geojit BNP Paribas Financial Services Ltd.




* *Strikeout if not applicable*

Place :

Date:

 (Full signature required)

Signature of Trading Account Holder

Name of holder(s)		Signature(s)
Sole/First Holder / Guardian (in case of minor) (Mr. / Mrs.)		 (Full signature required)
Second Holder (Mr. / Mrs.)		 (Full signature required)
Third Holder (Mr. / Mrs.)		 (Full signature required)

INSTRUCTIONS/ CHECK LIST

- Additional documents in case of trading in derivatives segments - illustrative list: Copy of ITR Acknowledgement Copy of Annual Accounts

In case of salary income - Salary Slip, Copy of Form 16.
Copy of demat account holding statement.

Net worth certificate.

Bank account statement for last 6 months.

Any other relevant documents substantiating ownership of assets. Self declaration with relevant supporting documents.

**In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.*

- Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.
- Demat master or recent holding statement issued by DP bearing name of the client.
- For individuals:
 - Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office.
 - In case of non-resident clients, employees at the stock broker's local office, overseas can do in-person' verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
- For receiving Statement of Account in electronic form:
 - Client must ensure the confidentiality of the password of the email account.
 - Client must promptly inform the Participant if the email address has changed.
 - Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.

FOR OFFICE USE ONLY

UCC Code allotted to the Client			
DP ID :	<input type="checkbox"/> IN300239	<input type="checkbox"/> IN301637	<input type="checkbox"/> 12048900 <input type="checkbox"/> Not Applicable
	Documents verified with Originals	Client Interviewed by	
Name of the Employee			
Employee Code			
Designation of the employee			
Date			
Signature			
Place			
<p>I/We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.</p>			
Signature of the Branch Manager Date :		Seal/Stamp of Authorized Intermediary (Branch/Sub-broker/Authorised Person)	

U. DETAILS OF LEAD GENERATOR FOR TRADING BENEFITS

Employee name	
Employee Code	
Lead ID	

SCHEDULE OF CHARGES FOR TRADING CLIENTS

EQUITY CASH SEGMENT							
Offline				Online (Not applicable for NRI clients)			
Delivery Brokerage		Intraday Brokerage	Daily Volume	Delivery Brokerage		Intraday Brokerage	
0.50%		0-25 Lac	0.05%	0.3%		0.03%	
		25-50 Lac	0.04%				
		50 Lac - 1 Cr	0.035%				
		1 Cr & Above	0.03%				
DERIVATIVE SEGMENT							
Stock Futures		Index Futures		Futures	Options (Lot wise)		Currency
0-25 Lac	0.05%	0-10 Lac	0.05%	0.03%	Intraday	Carry Forward	Same as offline
25-50 Lac	0.04%	10-50 Lac	0.04%		Rs 125 per lot	Rs 150 per lot	
50 Lac to 1 Cr	0.035%	50 Lac to 2 Cr	0.03%				
1 Cr & Above	0.03%	2 Cr to 5 Cr	0.025%				
		5 Cr and Above	0.02%	Minimum Brokerage of Online trades.			
Options (Lot wise)				Rs 20/- per contract or 1 paise per share whichever is higher. Both subject to maximum of Rs 0.25 per share/debenture or 2.5% of the contract price per share/debenture whichever is higher.			
				In case the contract note is delivered by post then Rs 20/- per contract or 5 paise per share whichever is higher. Both subject to maximum of Rs 0.25 per share/debenture or 2.5% of the contract price per share/debenture whichever is higher.			
Intraday		Carry Forward		Minimum Brokerage of derivative segment both offline and online trades.			
Rs 150 per lot		Rs 200 per lot		Rs 50/- per order for every off line order (executed) using the branch set up in Currency and F&O segment.			
Currency			Both subject to maximum of 2.5% of premium amount or 100 Rs per lot whichever is higher.				
Instrument	Symbol	Brokerage per lot (Rs.)		Brokerage in Expiry/Exercise/ Assignment of Derivative contracts			
FUTCUR	EURINR	12.50 (applicable on both sides)		Nil			
FUTCUR	GBPINR	15.00 (applicable on both sides)		SCHEDULE OF CHARGES FOR BARJEEL CLIENTS: Separate sheet attached			
FUTCUR	JPYINR	10.00 (applicable on both sides)					
FUTCUR & OPTCUR	USDINR	10.00 (applicable on both sides)					
The Brokerage for Interest Rate Futures segment (IRF) = 0.02% on the value of the contract.							
Minimum Brokerage of Offline trades.							
DCN + POA Clients: Rs.20 per order for every order (executed) or 1 paise per share whichever is higher, round off to two decimal places.							
NON-DCN/NON-POA Clients: Rs.20 per order for every order (executed), Rs 30/- per scrip or 5 paise per share whichever is higher, round off to two decimal places.							
Contract wise Rs.30/- Minimum applicable to Rajasthan/ UP/Delhi/ Punjab/Gujarat/ WB/MP/Jammu & Kashmir states.							
Both subject to maximum of Rs 0.25 per share/debenture or 2.5% of the contract price per share/debenture whichever is higher.							
Geojit BNP Paribas reserves the right to revise brokerage structure & other statutory charges as applicable under respective laws by display of the same on the trading website/customer care/direct communication. Old rate will be applicable for existing clients submitting this booklet as part of KYC updation.							
Statutory Charges (Applicable to Offline and Online Clients as the case may be)				Miscellaneous Charges			
Service Tax		14.5% of Brokerage		SMS Alert Service (Trading Tips)		Rs 100/- per month	
Securities Transaction Tax (STT)				Printed Statement Request		Rs 50/- per request (through ordinary post)	
Delivery in Cash		0.10%		Cheque Bounce/Cancellation		Rs 250/-	
Intraday in Cash only on selling side		0.025%		Interest on delayed Payments		22% per annum. Subject to change	
Futures only on selling side		0.01%		Charges for debiting shares from demat account/inter-settlement charges.		0.02% subject to a minimum of Rs 15/- and maximum of Rs 40/- per transaction if the delivery is through POA/Speed-e with DCN and 0.03% subject to a minimum of Rs 20/- and maximum of Rs 40/- per transaction if the delivery is through DIS or POA without DCN.	
Options only on selling side		0.017%		Inter settlement charges			
Sale of an option, where option is exercised		0.125%					
Exchange Levy and Stamp Duty		As applicable from time to time		RSDA for Electronic and Physical communication		RSDA for Electronic and Physical communication	
				0.02% subject to a minimum of Rs.15/- and maximum of Rs.40/- per transaction.		0.05% subject to a minimum of Rs.50/- and maximum of Rs.75/- per transaction.	
				0.02% subject to a minimum of Rs.20/- and maximum of Rs.40/- per transaction.		0.05% subject to a minimum of Rs.75/- and maximum of Rs.100/- per transaction.	

SCHEDULE OF CHARGES-DEPOSITORY SERVICES

Description of Charges	Regular Services Demat Account (RSDA)	Basic Services Demat Account (BSDA)
Account Opening Charge	Nil(Statutory Charges applicable)	Nil(Statutory Charges applicable)
Dematerialisation Charges	Nil + Courier charges @ Rs.35/- per request	Nil + Courier charges @ Rs.35/- per request
Rematerialisation Charges	Rs.10 for every hundred securities or part thereof; } or Rs.10 per certificate, whichever is higher } + courier charges Rs.35 per scrip. This is subject to a maximum of Rs.5 Lakh per request	Rs.10 for every hundred securities or part thereof; } or Rs.10 per certificate, whichever is higher } + courier charges Rs.35 per scrip. This is subject to a maximum of Rs.5 Lakh per request
Custody Charges	Nil	Nil
Transaction Charges {Late Submission of DIS i.e received on pay-in day, will be charged Rs.25/- per transaction}		
A – Market Trades	0.02 % subject to a minimum of Rs.15/- and maximum of Rs.40/- per transaction, if the delivery is through POA/Speed-e with DCN	0.05% subject to a minimum of Rs.50/- and Rs. 75/- maximum per transaction if the delivery is through POA/Speed-e with DCN
a) For transaction through Geojit Debit (Sales)	0.02% subject to a minimum of Rs.20/- and maximum of Rs.40/- per transaction, if the delivery is through DIS or POA without DCN	0.05% subject to a minimum of Rs.75/-and maximum Rs.100/- per transaction for Non DCN clients
Credit (Purchase)	Nil	Nil
b) For transaction through other brokers	0.02% subject to a minimum of Rs.50/- and maximum of Rs.100/- per Transaction	0.05% subject to a minimum of Rs.100/- and maximum of Rs.150/- per transaction
Debit (Sales)Credit	Nil	Nil
B – Off Market Trades	0.02 % subject to a minimum of Rs.20/- and maximum of Rs.40/- per transaction, if the receiving demat accounts is with Geojit BNP Paribas.If the receiving demat account is outside Geojit BNP Paribas, then 0.02% subject to a minimum of Rs.50/- and maximum of Rs.100/- per transaction	0.05 % subject to a minimum of Rs.50/- and maximum of Rs.75/- per transaction, if the receiving demat accounts is with Geojit BNP Paribas.If the receiving demat account is outside Geojit BNP Paribas, then 0.05% subject to a minimum of Rs.100/- and maximum of Rs.150/- per transaction
Credit	Nil	Nil
Pledge Charges		
Pledge creation	Rs.50/- per transaction	Rs.100/- per transaction
Pledge closure	Nil	Nil
Pledge Invocation	Rs.50/- per transaction	Rs.100 per transaction
Annual Maintenance Charges		
i. Resident Accounts Resident Accounts using electronic communication (DCN) New Clients	Rs.600/- Rs.450/- (Not applicable in first FY for new clients) Rs.600/- payable equally in 4 Quarterly Installments of Rs.150/- each for first FY	BSDA Type 1: Nil for holding value till Rs.50,000/-
ii. NRIs Accounts iii. NRI Accounts using electronic communication (DCN)	Rs.2000/- Rs.750/- (Not applicable in first FY/quarter for new clients)	BSDA Type 2: Rs.100/- p.a. for holding value from Rs.50,001 to Rs.2,00,000/-
Speed-e Advance	Rs.1000/- for clients who trade with other brokers	Holding value above Rs.2,00,000/- the tariff for RSDA will be applicable.
Speed-e AMC	Rs.100/-	
iv. Corporate Account	Rs.1250/-	

Additional printout of statements will be charged @Rs.25/- per statement per account

Note :

- ❖ All charges are exclusive of taxes, levies and other statutory charges.
- ❖ Charges are collected upfront by Cash/local cheque/DD or it will be debited to trading account of Sole/Joint demat account holder maintained with Geojit BNP Paribas.
- ❖ Interest of 18% p.a would be charged on the dues amount from the due date.
- ❖ For BSDA account value of holding will be determined on a daily basis ,account will be levied higher applicable AMC on value of holding exceeding prescribed limit from the next day of exceeding such limit.
- ❖ As and when an account becomes RSDA, automatically RSDA charges will be applied.

 (Full signature required)
(Sole /First Holder Signature)

 (Full signature required)
(Second Holder Signature)

 (Full signature required)
(Third Holder Signature)

POWER OF ATTORNEY FOR BROKING AND OTHER PRODUCTS & SERVICESTHIS **POWER OF ATTORNEY** MADE AT _____ THIS _____ DAY OF _____ 20__ BY:

_____ an Indian, residing at _____

_____ (hereinafter referred to as the

“ **Client**” or “ **Holder**”) which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include its executors, administrators, successors and assigns;

AND *

1) _____ an Indian, residing at _____

2) _____ an Indian, residing at _____

3) _____ an Indian, residing at _____

with Demat Account in the following manner a) DP ID _____ client ID _____

b) DPID _____ client ID _____ [hereinafter referred to as the “**Demat Account Holder**” or “**Joint Demat Account Holders***” as the case may be (*only when the Demat a/c is in joint names)], which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include its executors, administrators, successors and assigns of the **First Part**, IN FAVOUR OF **Geojit BNP Paribas Financial Services Limited**, a company incorporated under the provisions of the Companies Act, 1956, (hereinafter referred to as “**Geojit**”) having its registered office at Civil Line Road, Padivattom, Kochi – 682024, which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include its executors, administrators, successors and assigns by way of amalgamation and/or merger and registered as a stock broker of National Stock Exchange of India Ltd. (NSE) [SEBI registration number INB 231337230 in the Capital Market Segment with CMBP ID IN506594 & Pool account number 10000004/IN300239, 1204890000000319, NSCCL(MFSS) 1100001100017837, NSCCL (MFSS) CM BP ID IN565576], Bombay Stock Exchange Ltd. (BSE) [SEBI registration number INB 011337236 in the Capital Market Segment with CMBP ID IN603287 & Pool account number 10324155/ IN300239, 1204890000000283], MCX Stock Exchange Ltd. (MCX-SX) [SEBI Registration Number INB261337233 in the Capital Market Segment with CMBP ID IN473978 & Pool account number 14219233/ IN300239, 1204890000144856], of the **Second Part**.

WHEREAS :

1. Geojit BNP Paribas, in its capacity as a stockbroker entered into a Member Client Agreement(s) (the said “Agreement”) for providing the trading facilities on National Stock Exchange of India Ltd. (NSE) and Bombay Stock Exchange Limited (BSE) (collectively with the exchange) and for investment in various investment products in the nature of Mutual Funds, Bonds, IPOs, etc.;
2. The Client is desirous of availing such trading facilities and products & services provided/ to be provided by Geojit BNP Paribas online and or offline /and the MT Facility, subject to the terms and conditions stipulated by Geojit BNP Paribas and such other terms as may be amended from time to time on its website or otherwise under the said Agreement;
3. The Joint Demat Account Holders, hold jointly with the Holder a demat account with a Geojit BNP Paribas Financial Services Limited, a depository participant (“DP”)



(Full signature required)

First Holder in Demat A/c

(Full signature required)

Second Holder in Demat A/c

(Full signature required)

Third Holder in Demat A/c

4. As a consideration for providing the trading facility and also for availing the products & services to the Holder to transact under the said Agreement and to facilitate execution of all transactions, online and/or offline, the Holder and/or Joint Demat Account Holders agree to provide the power to Geojit to execute, confirm and complete all transactions of all deals for and on behalf of the said Parties and to give effect to the terms of the said Agreement and/or other deeds/ agreements executed in favour of Geojit and/or its affiliate concerns NOW THEREFORE THIS POWER OF ATTORNEY WITNESSETH THAT: We, the Parties of the First Part, do hereby nominate, appoint and constitute Geojit as our true and lawful attorneys to do, execute and perform or cause to be done, executed and performed, the following acts, deeds and things or any of them for and on my/our behalf namely:

AUTHORIZATION TO GEOJIT

1. To operate demat accounts, with the said DP, in the name(s) of "Holder" and "Joint Demat Account Holders" so far as reasonably practical to facilitate the transactions for purchase and sale of securities on the Exchanges in the name of the Holder and other products & services or combination thereof having the Holder as the sole/#first holder or any other holder, as Geojit may deem fit in its sole discretion with the said DP.(# delete if not applicable)
2. To sign and execute necessary documents, forms, agreements, undertakings, confirmations, declaration etc. and to accept terms & conditions, on my/our behalf for the purpose of operating such Demat Account(s).
3. To operate the Demat Accounts maintained with Geojit to meet all obligations of the Holder in terms of the said Agreement/s for transactions done/to be done on instructions of the Holder and to give other instructions relating to the Demat Account(s), for matters concerning the transaction in securities. In event the designated Demat Accounts with Geojit for carrying out transactions is closed or transferred, for any reason whatsoever, and the Holder instructs Geojit, in such manner as may be acceptable to Geojit, for substitution of new Demat Accounts in place of the demat Account as designated, all the terms and conditions of these presents shall likewise extend and apply to all such new/substituted Demat Accounts. This Power of Attorney would be deemed to extend to any Demat account opened by us in addition, substitution or replacement of the Demat account that gets linked to the Investment account with Geojit. This Power of Attorney would also be deemed to extend to block/mark lien on securities in the aforesaid Demat Account(s) or any other demat account(s) as may be opened from time to time in pursuance of these presents and/or to credit the Demat Account(s) with securities due to us.
4. We, the joint demat account holders, do hereby understand, agree and acknowledge that, by virtue of such joint holder ship, our names may also be required to be entered in the relevant application/ instruction forms that are being submitted for the purposes stated herein on behalf of the holder. We fully agree to such naming in the forms and further agree to hold Geojit harmless in any related queries by any Authorities or Regulators and also not to raise any claim or dispute against Geojit for such filling up of names.
5. To authorize, to instruct the said DP to debit our Demat Account(s), towards securities due to Geojit, and to discharge all obligation in this regard on our behalf to Geojit arising as a result of Agreement/s between Geojit and me/us. I/We hereby agree that the instruction of Geojit to the said DP to transfer the securities out of my/our Demat Account to the Demat Account of Geojit shall be deemed to have been my/ our instructions and the said DP have no necessity to enquire about the obligations towards which such transfers are effected by Geojit or any third party service provider.
6. To debit trading account/investment account towards monies/ fees/ charges /securities, etc. payable / due to Geojit, in relation to transactions in securities executed through Geojit, while carrying out the transaction for payment or otherwise or for subscribing to any products, services, facilitated by Geojit or any third party service provider, only debiting of investment account will be pursuant to the receipt of instruction from the client.
7. To do all things necessary for and incidental to availing /repayment of dues for such transactions in securities executed by the Holder including pledging of scrips, stocks, securities, bonds, debentures, mutual fund units, units of any collective investment scheme or any other security or financial instrument on behalf of me/us through Geojit for margins or other obligations or liabilities or releasing the pledge/ lien/block on the securities.
8. To apply for, redeem, and to do all things necessary, relevant and ancillary in this regards, for various investment products in the nature of Mutual Fund, Bonds, Insurance Policies, IPO's etc. and to effect necessary payment for the same pursuant to the receipt of instruction from the client.

 (Full signature required)

First Holder in Demat A/c

 (Full signature required)

Second Holder in Demat A/c

 (Full signature required)

Third Holder in Demat A/c

9. We expressly authorise Geojit to deposit/pledge securities in my/our Demat Account as collaterals with the exchange(s), in connection with to trades executed by me/us on the stock exchange through Geojit, if Geojit so desires to avail exposure against the said collaterals.
10. This PoA is executed on the firm understanding received from Geojit that, Geojit would return the securities or funds that would have been received by Geojit erroneously or without authority from me/us.
11. AND GENERALLY to do or cause to be done every other acts, deeds, matter or thing, as Geojit may deem necessary or expedient for the purpose of or in relation to these presents.
We hereby declare that all and every receipts made, executed or done for the aforesaid Products and Services by virtue of these presents shall be as good, valid and effectual to all intents and purposes whatsoever as if the same had been made, executed or done by us in our own name(s).
We hereby ratify and confirm and agree to ratify and confirm all that Geojit or any of their respective Officers shall do or cause to be done in or concerning the premises by virtue of these presents.
12. It is specifically made clear herein that this Power of Attorney shall be cancelled or revoked at any time without any notice from my/our side. However such cancellation or revocation shall not be applicable to those obligations arising out of the trades carried out prior to receiving request for cancellation or revocation of the POA. Such obligations owed by me/us shall be carried out by Geojit at its Liberty, for which I/we shall not raise any objection.
13. It is also made clear hereby that, by virtue of me/us executing this Power of Attorney, Geojit may send a consolidated summary of my/our scrip-wise buy and sell positions taken with average rates by way of an SMS/email on a daily basis, in addition to the normal documents being received from Geojit.

(full signature required)

Name:  *Signature of the Trading Account Holder*

Demat Account No.: a)

(full signature required)

Name: **X** *Signature of the Joint Demat Account Holder*

(full signature required)

Name: **X** *Signature of the Joint Demat Account Holder*

(full signature required)

Name: **X** *Signature of the Joint Demat Account Holder*

Demat Account No.: b)

(full signature required)

Name: **X** *Signature of the Joint Demat Account Holder*

(full signature required)

Name: **X** *Signature of the Joint Demat Account Holder*

(full signature required)

Name: **X** *Signature of the Joint Demat Account Holder*

** Strike off if not applicable

RUNNING ACCOUNT AUTHORISATION

In order to facilitate operations of my/our trading account opened, I /We would like to authorise Geojit BNP Paribas Financial Services Ltd (GBNPP) to maintain a running account, instead of settlement-to-settlement clearance of funds / securities due to me/us. I hereby authorize GBNPP to maintain a running account.

I/We shall prefer settlement of fund/securities once in A calendar quarter ☐ or A calendar month ☐ (tick any one)

Such settlement will be done by GBNPP on any day at its discretion in a calendar month or quarter as the case may be.

Further I/we authorize GBNPP to maintain a sum of Rs.10000 at all point of time towards charges on my Demat account and on other services.

I/We am/are aware that the authorization may be revoked by me/us any time at my/our own discretion without any advance notice. GBNPP may release the funds/securities to me/us on my/our on settlement date or on request or on revocation of authority, if sufficient margins in respect of my/our trading, across the Stock Exchange(s) and across the segment of the Stock Exchange(s) are available with GBNPP.

Name of the Client

Trade code.....

Branch Name

Place.....

Date.....



(Full signature required)

(Name & Signature of the Client)

MANDATORY FOR NRI CLIENTS**NRI UNDERTAKING**

To,
Geojit BNP Paribas Financial Services Ltd.
34/659-P, Civil Line Road, Padivattom, Kochi-682024.

Sub: Submission of contract note to PIS Bank

Dear Sir,

I, Mr./Ms., aged, S/D/W/

of, residing at.....

.....hereby agree and undertakes as follows:

- Whereas I have registered with M/s. Geojit BNP Paribas Financial Services Ltd, 34/659-P, Civil Line Road, Padivattom, Kochi-682024. as an NRI client as per the agreement executed on To be able to trade on the Indian Stock Exchanges.
- Whereas the Securities and Exchange Board of India (SEBI) and the Reserve Bank of India (RBI) have promulgated special rules and regulations applicable to NRIs who trade on Indian Stock Exchanges.
I hereby agree and undertake the following :
- I agree to submit the Contract notes to my Bank Branch, within 24 hrs of said trades.
- I understand and agree to abide by the SEBI/RBI rule that prohibits me from short-selling securities and netting of trades.
- I understand and agree to abide by the RBI regulation which requires that my PIS bank account be fully pre-funded. I undertake to always ensure that my PIS bank account tied to my trading account will have clear credit balance to cover the combined value of the stock/s to be purchased brokerage and all applicable statutory charges before executing trades.
- I undertake to abide by all other rules applicable to my trading in the Indian Stock Exchanges as an NRI, either existing or enjoined at a later date.
- In the event of my committing a breach of any of the above described regulations, Geojit shall be at liberty to deactivate my trading account and I shall not raise any claim or dispute against Geojit BNP Paribas Financial Services Ltd., for the said action.

Place:



(Full signature required)

(Name & Signature of the Client/ Authorised Signatory)

Date:

TRADING - CLIENT AUTHORIZATION TO THIRD PARTY

(Minor cannot be appointed)

Non-mandatory

To
Geojit BNP Paribas Financial Services Limited
34/659-P, Civil Line Road, Padivattom, Kochi-682024

I/We _____ Indian Resident/NRI, aged _____
years, S/o /D/o _____ residing at _____

being a client of Geojit BNP Paribas Financial Services Ltd with Trade Code _____ do hereby nominate, appoint
and authorize Mr./Mrs./Ms. _____ aged _____ years S/o / d/o _____
residing at _____

_____ hereinafter referred to as "Authorised Person" whose signature is
appended below, to act for me, as my attorney, in my name and on my behalf to do, execute and perform or caused to be done
all or any of the acts or things as envisaged in the Agreements executed by me with Geojit BNP Paribas Financial Services Ltd and
such things, hereinafter specifically mentioned.

1. To do transactions on my behalf in shares, securities, derivative contract and all other Products and/or services offered by Geojit.
2. To present cheques to meet the payment obligations arising out of the transactions done on my behalf and in my account.
3. To receive cheques on my behalf with regard to this.
4. To subscribe / unsubscribe to the Products and/or services introduced or offered by Geojit from time to time.

I request Geojit to act on the instructions of the Authorised Person. I agree, and undertake that Geojit shall not be held
responsible / liable for actions / inactions arising out of the said instructions.

I shall indemnify Geojit for any costs, losses, expenses, penalties and outgoings including legal fees and expenses incurred or
suffered by Geojit due to such authorization.

I agree and understand that Geojit does not have any means such as biometric passwords, etc. to confirm / authenticate the
authorized person acting under this Authorization.

I agree and confirm that the said authorization shall be cancelled or revoked only upon furnishing an advance written notice of 30
(thirty) days to Geojit which notice shall bear an acknowledgement of receipt by Geojit in writing specifically addressed to me.

I hereby ratify and confirm and agree to ratify and confirm all acts, deeds or the trades done or cause to be done by the Authorised
Person under this authority and shall be construed as acts, deeds or trades done by me.

Name of the Authorized Person (Self Certified Proof of Identity of the Authorized person to be submitted alongwith the said
Authorization)

(Signature of authorised person)

(Full signature required)

Address of the authorised person :
Landline number of authorised person :
Mobile number of authorised person :
Email ID of authorised person :
PAN of the authorised person :
Date of birth of the authorised person : DD MM YYYY

Photo of the
Authorized person

Signature of the
Authorized person
across the photo

Any one of the following documents may be submitted as Proof of Identity:
Passport Copy
Driving License
Pan Copy

Place:

Date:

Name:

 Signature of the Client
(full signature required)

UNDERTAKING FROM CLIENTS ON THE F & O SEGMENT FOR AVAILING EXPOSURE AGAINST HOLDINGS

I, Mr./Ms.....
aged.....S,D,W of.....,residing
at..... hereby undertakes as follows:

1. Whereas I have registered with Geojit BNP Paribas (GBNPP), as a client with client code
2. Whereas I have opted to avail exposure against holdings (of approved scrips as per GBNPP policy) in the F&O segment. I am aware and agree that trading in F&O involves daily settlement of MTM losses and a failure on my part to remit the same may result in the sale of the holdings by GBNPP.
3. I am also aware that the markets can be volatile as a result of which I may be called upon to pay additional margins by GBNPP. I understand and affirm that in the event of my failure to meet such enhanced margin requirements, within the time frame stipulated by GBNPP, it (GBNPP) can close out my positions and still if any outstanding amount are found payable to GBNPP the same shall be recovered by selling the said holdings from my DP Account. The timing and choice of shares and its price shall be at the discretion of GBNPP.
4. That in the event of the happening of the above, I shall not raise any claim or dispute against GBNPP.

Place.....

Date.....

 Name and Signature of Client
(Full signature required)

DECLARATION OF TYPES OF DEPOSITORY SERVICES

We, at Geojit BNP Paribas Financial Services Ltd., offer **Regular Services Demat Accounts (RSDA)** with normal depository services and **Basic Services Demat Account (BSDA)*** with limited Depository Services.

Both the services have different features as detailed below:

Regular Services Demat Account (RSDA)	Basic Services Demat Account (BSDA)
Lower Transaction Charges	Higher Transaction Charges.(See the attached for Charges)
Statement on demand with no additional charges	Only two Statements are free of cost. Rs25/- per additional physical Statement request
24/7 Customer Care support through our customer care website: www.geojitbnpparibas.com	Not eligible for Customer Care support
Email alert on transactions carried out in the account	No email alerts on transactions.
Free Monthly Transaction Statements.	Free Quarterly Transaction Statements.
Multiple Accounts facility for same person as first holder across all DPs and Depositories	Only one account across all DPs and Depositories is permitted
Call Centre Support from Monday to Saturday	No Call Centre Support

**BSDA eligibility: Only accounts with a holding value that is less than Rs 2,00,000 are eligible for BSDA and the investor should have only one DP Account across the depositories.*

You may opt for our **Regular Services Demat Account (RSDA)** with the features listed above even if your account is eligible for BSDA account status.

After reading the above, I/we hereby affirm that my/our account be classified as RSDA.

Signature(s):



(Full signature required)

Sole/First Holder



(Full signature required)

Joint Holder-1



(Full signature required)

Joint Holder-2

Date :

Place :

Form A
[See paragraph 5(b)]

**Declaration to be submitted by the investors to the depository
participants for availing the benefits under the
Rajiv Gandhi Equity Savings Scheme.**

Name of the Investor:
(first holder)

Address of the investor:

Permanent Account Number (PAN):

--	--	--	--	--	--	--	--	--	--

1. It is hereby certified that* —

(a) I do not have a demat account and I have not traded in any derivatives.

(b) I have demat account no _____ in Geojit BNP Paribas Financial Services Ltd.
(IN300239/IN301637/12048900)** depository participant but I have not traded in any equity shares or
derivatives in this account.

(c) I have a joint demat account no _____ in Geojit BNP Paribas Financial Services Ltd.
(IN300239/IN301637/12048900)** depository participant but I am not the first account holder.

2. I hereby declare that I have read and understood all the terms and conditions of the Rajiv Gandhi Equity Savings Scheme.
3. It is hereby verified that I am an eligible new retail investor for availing the benefits under the Rajiv Gandhi Equity Savings Scheme.
4. I undertake to abide by all the requirements and fulfill all obligations under the Scheme, and will comply with all the terms and conditions of the Scheme.
5. I understand that, in case I fail to comply with any condition specified in the Scheme, the benefits availed there under will be withdrawn and the tax shall be payable by me accordingly.



(Full signature required)

Signature of the Investor

Place:

Date:

* Tick whichever is appropriate.

** Strike off whichever DP ID is not applicable

**Account Opening
(Scan Based) Serial No.**

[illegible]

ADDENDUM FOR OPENING E-INSURANCE ACCOUNT

□ NRI

[illegible][illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y
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[illegible]

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AUTHORISED REPRESENTATIVE DETAILS

[illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

[illegible]

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Others ☐

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[illegible]☐ Yes ☐ No

(An Authorised Representative is a person appointed by e-Insurance Account holder who can access e-Insurance Account in the event of the holder's demise or in his incapacity to access the e-Insurance Account)

DECLARATION

The rules and regulations of Insurance Regulatory and Development Authority of India & Insurance Repository pertaining to an e-Insurance Account which are in force now have been read by me and I have understood the same and I agree to abide by and to be bound by the rules as are in force from time to time for such e-Insurance Account (eIA). I hereby declare that the particulars given herein are true, correct and complete to the best of my knowledge and belief, the documents submitted along with this application are genuine and I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any Notifications, Directions issued by any governmental or statutory authority from time to time. I authorise the Insurance Repository to send any policy and account related information through email and SMS on the contact details given by me. In case of any physical policies being issued by the Insurance Company from whom I obtain an e-policy, the address in the e-Insurance Account shall override the address provided for the physical policies. I understand that all the communication relating to any physical/ e-policy will be sent to the address registered with the Insurance Repository. I agree to inform the Repository of any changes in the details mentioned in this form and in case of delay the said repository shall not be liable in case it acts on the said information which has not been updated. Further, in case I update the details with the Insurance Company, I authorise them to submit the same to you for update in the e-Insurance Account and the said update will be applicable to all policies of any insurer that I hold/ will hold in the said account. I authorise the Repository to pass on the information to any Insurance Company that I have approached for availing of insurance cover.

I further agree that any false / misleading information given by me or suppression of any material fact will render my e-Insurance Account liable for termination and further action.

I hereby authorise the Insurance Repository / Insurance Company to disclose, share, remit in any form, mode or manner, all / any of the information provided by me to the respective Insurance Companies and / or to their authorised agents and representatives in which I may transact / have transacted including all changes, updates to such information as and when provided by me.

I hereby agree to provide any additional information / documentation that may be required by the Authorised Parties, in connection with this application. I hereby confirm that this is a unique e-Insurance Account opening application and I have not applied to the same Insurance Repository or any other Insurance Repository for an e-Insurance Account in the past.

I would like to receive my insurance policy and all the information related to the proposed insurance policy through Insurance Repository.

I am aware the details furnished by me, including KYC documents, for the KYC form and Account opening form will be used to open the eIA. I hereby give my consent for the same.

Name of eIA Holder

Signature of eIA Holder

FOR GEOJIT BNP PARIBAS OFFICE USE ONLY


Staff Name :	EIA. No. :
Employee Code :	Trade Code :
Signature :	Client ID :
Branch Seal :	Date :

Important Points

- An individual can hold only a single eIA
- This form is meant for an individual to open an e-Insurance Account (eIA)
- An eIA enables an individual to hold the various types of insurance policies in electronic format in a single account This will eliminate the need of holding the insurance policies in physical form
- This account will also act as a single point of contact for the policy holders to update their demographic details with all the insurance companies from where the policies are acquired.

NACH Important Instructions:

1. This mandate is an authorization to debit funds from your designated Bank account. Please ensure that it is signed by the respective account holder(s) of the Bank.
2. Signature(s) on the mandate should be as it appears in the Bank records of the Client(s). All holders as appearing in the Bank records would be required to sign the mandate.
3. Though it is signed, it's not necessary that mandate gets registered at Banks end as it all depends on the respective Bank's inclusion in NACH list. Also the Bank may reject the mandate based on their validations.
4. This mandate can be linked only to the Bank account Registered in your Trading account with us.
5. This mandate can take a maximum time of 20 days to register at Bank's end, so any requirement of funds during this period should be taken care of.
6. At any time you have the option to cancel this mandate.
7. The amount mentioned here is the maximum limit Geojit BNP Paribas can request to draw from your Bank account. Please ensure that the funds remain in the Bank account at the time of collection.

Debit mandate form NACH / ECS / DIRECT DEBIT																	
		UMRN				Date											
Tick (✓) <input checked="" type="checkbox"/> CREATE <input type="checkbox"/> MODIFY <input type="checkbox"/> CANCEL		Sponsor Bank Code				Utility Code											
I/We hereby authorize		Geojit BNP Paribas Financial Services Ltd				to debit (tickV)											
Bank a/c number		SB /CA /CC /SB-NRE /SB-NRO /Other															
with Bank		IFSC				or MICR											
an amount of Rupees		₹															
FREQUENCY <input checked="" type="checkbox"/> Mthly <input checked="" type="checkbox"/> Qtly <input checked="" type="checkbox"/> H-Yrly <input checked="" type="checkbox"/> Yrly <input checked="" type="checkbox"/> As & when presented					DEBIT TYPE <input checked="" type="checkbox"/> Fixed Amount <input checked="" type="checkbox"/> Maximum Amount												
Reference 1					Phone No.												
Reference 2					Email ID												
I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.																	
PERIOD		From <table border="1" style="display: inline-table; width: 150px; height: 20px;"></table> To <table border="1" style="display: inline-table; width: 150px; height: 20px; text-align: center;"> <tr><td>3</td><td>1</td><td>1</td><td>2</td><td>2</td><td>0</td><td>9</td><td>9</td></tr> </table> Or <input checked="" type="checkbox"/> Until Cancelled								3	1	1	2	2	0	9	9
3	1	1	2	2	0	9	9										
1. _____ 2. _____ 3. _____																	

* This is to confirm that the declaration has been carefully read, understood & made by me/ us. I am authorizing the User entity / corporate to debit my account.

* I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / corporate or the bank where I have authorized the debit.