

Form Type



DM0001

Demat Branch Sole ID

LC Code

L G Code

Lead ID

I/We wish to open a new Non Resident Indian (NRI) Demat & Trading Account with Axis Securities Ltd.

Trading	Type	New Demat A/c	Existing Demat A/c in the name of Applicant (Axis Securities Ltd.-NSDL DP ID-IN304295)
1. NRE PIS <input type="checkbox"/>	PIS Repatriable	<input type="checkbox"/>	<input type="checkbox"/> A/C NO <input type="text"/>
2. NRO PIS <input type="checkbox"/>	PIS Non Repatriable	<input type="checkbox"/>	<input type="checkbox"/> A/C NO <input type="text"/>
3. NRE Non PIS <input type="checkbox"/>	Non PIS Repatriable	<input type="checkbox"/>	<input type="checkbox"/> A/C NO <input type="text"/>
4. NRO Non PIS <input type="checkbox"/>	Non PIS Non Repatriable	<input type="checkbox"/>	<input type="checkbox"/> A/C NO <input type="text"/>

1. Occupation of Holders (Please Tick)

1st : Private Sector <input type="checkbox"/>	Public Sector <input type="checkbox"/>	Govt.Service <input type="checkbox"/>	Business <input type="checkbox"/>	Professional <input type="checkbox"/>
Agriculturist <input type="checkbox"/>	Retired <input type="checkbox"/>	House-Wife <input type="checkbox"/>	Student <input type="checkbox"/>	Other <input type="checkbox"/>
2nd : Private Sector <input type="checkbox"/>	Public Sector <input type="checkbox"/>	Govt.Service <input type="checkbox"/>	Business <input type="checkbox"/>	Professional <input type="checkbox"/>
Agriculturist <input type="checkbox"/>	Retired <input type="checkbox"/>	House-Wife <input type="checkbox"/>	Student <input type="checkbox"/>	Other <input type="checkbox"/>
3rd : Private Sector <input type="checkbox"/>	Public Sector <input type="checkbox"/>	Govt.Service <input type="checkbox"/>	Business <input type="checkbox"/>	Professional <input type="checkbox"/>
Agriculturist <input type="checkbox"/>	Retired <input type="checkbox"/>	House-Wife <input type="checkbox"/>	Student <input type="checkbox"/>	Other <input type="checkbox"/>

2. Please tick, if applicable Politically Exposed Person (PEP) ☐ Related to (PEP) ☐

3. Trading Preference (Exchanges & Segments) (Tick) (Segment not chosen should be struck off)

NSE-Cash ☐

S1 of 7
1st Holder Signature

NSE-F&O ☐

S1 of 7
1st Holder Signature

BSE-Cash ☐

S1 of 7
1st Holder Signature

*If the client wants to trade in F & O segment, application, for allotment of NRI Client Code and Member – Constituent (Custodial Participant) Agreement are required to be submitted. The formats are available on the website www.axisdirect.in. Further, the client is required to submit an additional document on financial/income proof as prescribed.

4. Standing Instructions for DP

I/We authorize you to receive credits automatically into my/our account-PIS ☐ ☐ (If not indicated, standing instruction will be treated as “Yes” for NRE-PIS, NRO-PIS & NRO-Non PIS, and for NRE- Non PIS Standing instruction will be always “No”)

Account to be operated through power of Attorney (POA) ☐ ☐

I/We want to receive the Delivery Instruction Slip (DIS) booklet ☐ ☐ (if not indicated it will be treated as “No”)

5. Bank Details for Dividend Purpose & Debiting Charges (for Demat) & Trading A/c

NRE A/c

NRO Ac

NRE RBI Reference No.: RBI Approval Date

PIS A/c Details

A/c No.

Scheme Code

A/c No.

Scheme Code

I/We hereby authorize you to debit my/our above operative bank A/c with Axis Bank for all the charges relating to my/our demat account. Please treat this authorization as irrevocable till further instruction from my/our side is received in writing and duly acknowledged by you.

6. Nomination (Demat / Trading)

- ☐ I / We wish to make a nomination
(Please fill up attached nomination form)
- ☐ I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and Understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s) my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat which may also include documents issued by Court or other such competent authority based on the value of assets held in the trading / demat account.

7. Additional details

- Mode of receiving Demat statement and annual report : Physical ☐ Electronic ☐ Both ☐
Share the email ID With RTA ☐ Y ☐ N
- Account statement frequency: ☐ As per SEBI Regulation ☐ Daily ☐ Weekly ☐ Fortnightly ☐ Monthly
- I/We request you to send electronic transaction cum holding statement at the email ID ☐ Yes ☐ No
- I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any further instruction from my or our end (if not marked the default option would be "No") ☐ Yes ☐ No
- I/we hereby state : ☐ I do not have GST Number ☐ I have GST Number as _____ Name of State _____
- SMS alerty facility (Mandatory if POA is given) Mobile Number : +91- Same as mentioned in KYC form

8. Tariff Plan (Demat / Trading)

I/We read & understood the terms & conditions and wish to avail the following plan

(Pl. tick) ☐ Fixed Brokerage Plan ☐ Demat Tariff for retail ☐ Other Plan Code
(Trading)

Trading Account Opening
Charges - Rs. 2500/-

Fixed Brokerage Plan

Delivery (Each Leg)	Future (Each Leg)	Options (Each Lot)
0.75%	0.05%	Rs.100

9. Declaration

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. 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. I/We further confirm having read and understood the contents of Part B of the Account opening form comprising of Rights and Obligations of the Beneficial Owner and Depository Participant, Rights and Obligations of Stock Brokers, Sub Brokers & Clients, Rights and Obligations of Margin Trading, Risk Disclosure document, Investor Charter, Policy & Procedures, Guidance Note, Additional Terms and Conditions & Schedule of Charges. I / We do hereby agree to be bound by such provisions as outlined in these documents. I/We acknowledge the receipt of copy of above Part B document. I/We have also been informed that the standard set of documents has been displayed for information on www.axisdirect.in. The Rules and Regulations of the Depository and Depository Participant, pertaining to an account which are in force now, have been read by me/us and I/We have understood the same and I/We agree to abide by and to be bound by the rules as are in force from time to time for such account. I/We also declare that I/We have complied and will continue to comply with FEMA Regulation. I/We hereby undertake that I/We would comply with the guidelines prescribed by RBI vide its notification reference number FEMA 361/2016-RB dated 15th February 2016. I/We will not invest in securities prohibited for purchase vide above said RBI notification dated 15th February, 2016 or in any future RBI notification in this regard.

Date _____

Place _____

S2 of 7
1st Holder Signature

SH 1 of 4
2nd Holder Signature

TH 1 of 4
3rd Holder Signature

NRI Customers could call us on 91-22-61480809

OR write to

nri@axisdirect.in for Trading related query | dphep@axisdirect.in for Demat related query

In case of grievance, Customers could write to us at customer.grievance@axisdirect.in

Form Type



KR0001

☐ **NEW** ☐ **CHANGE REQUEST (Please tick ✓ the appropriate)**

Please fill the form in **ENGLISH** and in **BLOCK LETTERES**

(Please tick ✓ the box on left margin of appropriate row, where CHANGE / CORRECTION is required, and provide the details in the corresponding row)

Acknowledgement No.

A) IDENTITY DETAILS

- Name of the Applicant
- Father's / Husband Name
- a. Gender: ☐ Male ☐ Female 3 b. Marital status: ☐ Single ☐ Married
- c. Date of Birth
- a. Nationality ☐ Indian ☐ Other (Please specify)
- b. Status: ☐ Resident Individual ☐ Non-Resident ☐ Foreign National
- a. PAN 5. b. Aadhaar Number, if any
- Specify the proof of Identity submitted: ☐ PAN Card ☐ Any Other (Please Specify)

PHOTOGRAPH

Please affix
your recent
colour passport size
photograph

sign across
photograph

B) ADDRESS DETAILS

- Residence / correspondence Address ☐ Correspondence Address ☐ Residence Address
- Specify the proof of Address submitted for Residence / Correspondence Address:
- Contact Details Tel (Off)
- Fax No.
- Tel. (Res.)
- Mobile No.
- E-mail ID
- Permanent Address (If different from above. Mandatory for Non-Resident Applicant to specify overseas address)
- City / Town / Village PIN Code
- State Country

C) DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief, and I 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 aware that I may be held liable for it.

Date:

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Signature of the Applicant

OFFICE USE ONLY

- ☐
- Originals verified and Self-Attested Document copies received
-
- ☐
- In-Person-Verification (IPV) Done:
-
- Name of the Person
 - Designation
 - Name of Organisation

Signature of
The Authorised Signatory

Seal / Stamp
of the Branch

e. Date


OTHER KYC DETAILS FOR TRADING ACCOUNT (THIS DOCUMENT IS MANDATORY)
KYC KRA CONFIRMATION

I have already done my KYC KRA registration/documentation through a SEBI registered intermediary ☐ Yes ☐ No

BANK ACCOUNT (DETAILS)

NRE SB Account		NRO SB Account	
Name of Bank:		Name of Bank:	
Bank A/c No.:		Bank A/c No.:	
Type of Account:		Type of Account:	
Cust. Id:		Cust. Id:	
MICR Code:	IFSC Code:	MICR Code:	IFSC Code:
Branch Address:		Branch Address:	

OTHER ADDITIONAL DETAILS

- Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please tick): ☐ Physical ☐ ECN
- Specify your Email id, for ECN: Same as mentioned in KYC form
- Whether you wish to avail of the facility of internet trading/ wireless technology (please tick): ☐ Yes ☐ No
- Number of years of Investment/Trading Experience: _____ Any other information: _____
- Income Range per Annum : Rs ☐ < 1 Lac ☐ 1 to 5 Lac ☐ 5 to 10 lac ☐ 10 to 25 Lac ☐ More than 25 Lac **OR**
- Net-worth as on (date) (Optional) (Net worth should not be older than 1 year) Rs. _____

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: ☐ Yes ☐ No If yes, provide details : _____

DEALING THROUGH AUTHORISED PERSON

- Whether client is dealing through the Authorised person, ☐ Yes ☐ No (pl. tick). If Yes , provide the following details:
 Authorised person's Name: _____ SEBI Reg. No.: _____ Ph: _____
 Registered Off. Add.: _____ Fax: _____ Website: _____
- Whether dealing with any other Stock broker/Authorised person (in case dealing with multiple stock brokers/Authorised person) ☐ Yes ☐ No.
 (If Yes, provide details of all) Name of Stock Broker: _____ Exchange: _____
 Name of Authorised person, if any: _____ Client Code: _____
 Details of disputes/dues pending from/to such Stock broker/ Authorised person: _____

INTRODUCER DETAILS (OPTIONAL)

Name of the Introducer: _____ Phone No.: _____
 Address of Introducer : _____
 Status of the Introducer: Sub-broker/Remisier/Authorized Person/Existing Client/
 Others, please specify _____

Signature of the Introducer

FATCA - CRS DECLARATION

☐ I am a tax resident of india not resident of any other country **OR** ☐ I am a tax resident of the country/ies mentioned in the table below:
 Please indicate the country/ ies in which the entity is a resident for tax purposes and the associated Tax ID Numbers below:

City of Birth Country of Birth

Address Type of Tax Purpose ☐ Residential ☐ Business ☐ Registered Office

Country#	Tax Identification Number %	Identification Type (TIN or Other, please specify) %	Address for Tax Purpose		
			<input type="checkbox"/> Communication	<input type="checkbox"/> Permanent	<input type="checkbox"/> Please note the address below

Date: Place: _____

To also include USA, where the individual is a citizen/green card holder of USA

% In case Tax Identification Number is not available, kindly provide functional equivalent. **FATCA-CRS Certification:** I hereby understood the information requirements of this Form and hereby confirm that the information provided by me/us on this form is true, correct and complete and hereby accept the same.

Declaration: I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be held liable for it.

Signature



ANNEXURE TO TRADING ACCOUNT OPENING FORM

The execution of this document by the client is voluntary. However in case the client wish to avail of the online trading services with the linkage of Broking and Bank account, then execution of this document by the client is required in order to facilitate seamless and hassle free trading and settlement of transactions.

NON-MANDATORY DOCUMENTS

POWER OF ATTORNEY (THIS DOCUMENT IS VOLUNTARY)

This Power of Attorney ("Power of Attorney") is given on the _____ day of _____ 20____ by

a) The person(s) specified in the Schedule [A] hereinafter referred to as the "Bank Account Holder(s)"

WHEREAS:

A. The Client (the person set out in Schedule [C]) has read and understood the SEBI prescribed Rights and obligations and desirous of entering into a broking relationship with Axis Securities Limited(ASL), a company, incorporated under the provisions of the Companies Act, 1956, being a Member of BSE Limited, National Stock Exchange of India Ltd., MCX Limited & NCDEX Limited, having its registered office at Axis House, 8th Floor, Wadia International Centre, Pandurang Budhkar Marg, Worli, Mumbai - 400 025 (hereinafter called the "Stock Broker") for dealing in Securities and Commodities, broking services and other services as may be availed by the client from time to time.

B. The Bank Account Holders hold bank account/s with the bank (the "Bank"), and bearing bank account number/s as mentioned in the Schedule [B] hereunder under title "Bank Account Details" (hereinafter referred to as the "Bank Account");

C. The Bank Account Holder(s) are collectively referred to as the "Joint Account Holders"

D. To facilitate proper execution of the Client's transactions, the Joint Account Holder(s) are granting this power of attorney in favour of the Stock Broker for the purpose of executing instructions, orders or requests and/or handling obligations in respect of transactions made with the Stock Broker.

I. DEFINITIONS:

a) "Securities" includes "Securities" as defined under the Securities Contracts (Regulation) Act, 1956;

II. POWER OF ATTORNEY

I/We, the Joint Account Holders do hereby authorize/nominate/appoint the Stock Broker for the purpose hereof acting through any of its officers or employees or any sub-agents or delegates, to be my/our true and lawful agent and attorney for me/us and on my/our behalf (the "Attorney") and in my /our name from time to time to do and exercise or cause to be done and exercised all or any of the following acts, powers and authorities:

1. To operate and to transfer funds from the Bank Account in my/our name, for facilitating transactions in Securities /Commodities by the Stock Broker as a Stock Broker, for meeting my/ our settlement obligations/ margin requirements in connection with the trades executed by me/us on the Stock Exchange through the Stock Broker and for recovering any outstanding amounts due from me/ us to the Stock Broker arising out of my/ our trading activities on the Stock exchanges through the Stock Broker, towards any monies/ fees/ charges outstanding or payable by virtue of me /us using / availing / subscribing to any of the products/facilities/ services offered by the Stock Broker.

To block and/or hold and/or create lien on all or any of the monies lying in the Bank Account(s) in accordance with the instructions of the Stock Broker in accordance with the powers given hereby. To block and transfer funds for meeting obligations arising out and pursuant to I/we subscribing to such other products/facilities/services through the Stock Broker like mutual funds, public issues (shares as well as debt instruments), rights, offer of shares, tendering shares in open offers pursuant to my/our instructions, including applying for redemptions.

2. Transfer funds from the Bank account towards monies/fees/charges etc. due to the Stock Broker/Depository Participant/Principal payable by virtue of, I/We using/subscribing to any of the facilities/services availed by me/us, at my/our instance.

3. To sign necessary slips / forms / documents etc. which are required for performing the powers hereby conferred.

4. To comply and /or cause to be complied with all statutory and other requirements.

I/we hereby agree to ratify and confirm the acts of the said attorney done lawfully or cause to be done by virtue of these presents.

The Attorney is authorized to send to me / us consolidated summary of scrip wise buy and sell position taken by me/us with average rates by way of short messaging services or e-mails on a daily basis. The Bank accordingly is authorized and has consented to follow the instructions of my/our said Attorney with respect to the powers set forth with respect to my/our Bank Account.

The Attorney may appoint and remove at its discretion any authorized signatories for or under the Attorney in respect of all or any of the matters contained herein upon such terms and conditions as the Attorney may think fit.

The Stock Broker shall return to me/us the funds that may have been received by it erroneously or those fund that it was not entitled to receive from me/us.

This Power of Attorney (POA) shall continue in full force and effect until the Attorney shall receive intimation of revocation or in the event of the termination thereof by my/our death until the Attorney shall have received actual intimation thereof. The Attorney shall not act on any instructions received subsequent to the intimation of such revocation. However, such revocation shall not be applicable for any outstanding settlement/margin obligation arising out of the transactions carried out prior to receiving request for revocation of Power of Attorney.

Sole / 1st Holder

2nd Holder in Bank A/c.

(In case of joint bank account, signature of all holders is mandatory)

To induce Stock Exchanges, clearing corporation/house, mutual funds, body corporates, banks, approved intermediaries and registrars and share transfer agents (herinafter collectively referred as "Transfer Agent") or other third party to act, I/We hereby agree that any Transfer Agent or other third party receiving a certified true copy of this Power of Attorney may act upon it, and that revocation or termination hereof shall be ineffective as to such Transfer Agent or other third party, unless and until actual notice or knowledge of such revocation or termination shall have been received by such Transfer Agent or other third party.

I/We do hereby agree that in case the constitution is changed in case of non individual client, I/We shall execute a fresh POA to the satisfaction of the Stock Broker.

I/We specifically agree that any matter or issue arising hereunder shall be governed by and construed exclusively in accordance with the Indian laws. In respect of disputes arising out of transactions or matters governed by the relevant Stock Exchange(s), the same shall be subject to the regional arbitration centres of the relevant Stock Exchange(s). In all other cases, disputes shall be subject to the jurisdiction of the courts at Mumbai in India.

This Power of Attorney does not intend to give any exclusive rights to operate to Stock Broker on the Bank Account. The Stock Broker as my/our constituted Attorney may seek from the Bank information regarding my/our funds balances for the transactions effected/to be effected by me/us or on behalf of me/us through the Stock Broker and the Stock Broker may also provide transaction information to Bank, from time to time, in order to complete settlement of transactions. In case of merger/demerger of ASL with another entity/into another entity, the scheme of merger/demerger should be approved by High Court and one month prior intimation given to me/us about the corporate restructuring to facilitate me/us to continue or discontinue with ASL

Schedule 1 Stock Broker Bank Account Details

Bank Name	Axis Bank Limited				
Bank Account Numbers	910020019944317	910020019950516	912020040140939	918020023436910	918020023249622
	918020023038723	918020023510940	918020023113387		

Any other Account(s) of the Stock Broker substituted for or in addition to the above as may be notified on the website and/or by way of electronic mail and as decided by the Stock Broker from time to time. In case of any changes in the Bank accounts, the same shall be communicated accordingly.

SCHEDULE A - BANK ACCOUNT HOLDERS

Name of Bank Account Holders		
	First Holder	Second Holder



SCHEDULE B-BANK ACCOUNT DETAILS

Axis Bank LTD	NRE PIS		NRE Non PIS	
Axis Bank LTD	NRO PIS		NRO Non PIS	

SCHEDULE C-CLIENT DETAILS

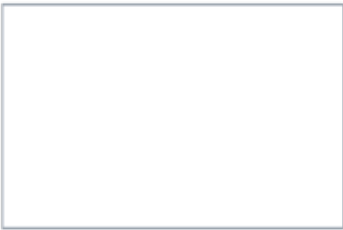
Name of the Client :	Client Code :
Address :	

IN WITNESS WHEREOF I/We have hereunto set and subscribed our respective hands on the day and date as first mentioned in the Schedule.

Sr. No.	Holder	Name	Signature
1	Sole/ 1st Holder		
2	2nd Holder in Bank Account		

Name of Witness :	Accepted for Axis Securities Limited
	

Address: _____ Place : _____ Date:



ANNEXURE - A

The execution of this document by the client is voluntary. However in case the client wish to avail of the online trading services with the linkage of Broking and Demat account, then execution of this document by the client is required in order to facilitate seamless hassle free trading and settlement of transactions.

NON-MANDATORY DOCUMENT
DEMAT DEBIT AND PLEDGE INSTRUCTION (THIS DOCUMENT IS VOLUNTARY)

I / We hold or in the process of opening Demat account with Axis Securities Limited (ASL), a depository participant (DP) Registered with SEBI (the “DP”).

Application No.	DEMAT ACCOUNT TYPE	<input type="checkbox"/> NSDL-IN304295
		<input type="checkbox"/> CDSL-12049200

DEMAT ACCOUNT DETAILS					
NRE PIS	Client ID		NRE Non PIS	Client ID	
NRO PIS	Client ID		NRO Non PIS	Client ID	

I/ We hereby authorizes ASL as follows:

Sr. No.	Purpose	Signature of Client(s)
1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same Stock Broker.	
2	Pledging / re-pledging of securities in favour of trading member (TM) / Clearing Member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	
3	Mutual Fund transactions being executed on Stock Exchange order entry platforms.	
4	Tendering shares in open offers through Stock Exchange platforms.	

Name of the client (Demat account First holder)	
Name of the client (Demat account Second holder)	
Name of the client (Demat account Third holder)	

Place : _____

Date:

The execution of this document by the client is voluntary. However in case the client wish to avail of the online trading services with the linkage of Broking, bank and demat account, then execution of this document by the client is required in order to facilitate seamless and hassle free trading and settlement of transactions.

TERMS AND CONDITIONS (THIS DOCUMENT IS VOLUNTARY)

1. The Client shall maintain such Margin as may be stipulated by Axis Securities Limited (ASL) from time to time. In case the Client does not provide the required Margin within the time frame stipulated by ASL, then ASL shall take such other action as it may think fit and proper. ASL may require the Client to pay additional Margin immediately in case of high volatility. 2. The Client undertakes to monitor the adequacy of the collateral and the market value of such collateral on a continuous basis. 3. ASL as risk containment measure shall have the discretion to square off/sell all or some of the client positions/collaterals/securities, without any notice to the client. 4. The Client is responsible for all orders, including any orders that may be executed without the required Margin in the Client's account. 5. ASL shall have the discretion to allow or disallow trading by the client in certain scrips / contracts / products / services. 6. No transaction request shall be assumed to be executed / modified until a confirmation from ASL is received by the Client. 7. The client authorizes ASL to close out the transactions in case the Client fails to make full payment to ASL or if there is debit in client's account with ASL. Also, ASL may square off open client's margin/leveraged positions in case the scrip price is nearing its daily price band or due to any adverse development concerning the client's position or scrip. 8. The client agrees that ASL shall not be liable for non-execution or delay in the execution of any order due to system/network issue or due to any reason beyond the control of ASL. 9. The client shall pay to ASL outstanding debit balance if any in his/her account from time to time without any delay. In case of delay, interest on delayed payment @ 18 % per annum shall be charged on outstanding amount including on interest amount already charged. 10. The losses incurred on client's account will be to the account of the client only. Neither ASL nor any of its employees/agents shall in any circumstances be liable for any loss, lost profits, cost, liability, expense or damage occurred to the client. 11. The client authorises ASL to obtain details in relation to the transactions and balances in respect of the securities held in his/her demat account for the purpose of collating and displaying details in the personalised portfolio watch page. The client acknowledges that the services under 'Portfolio Watch' being provided are as an add on facility and for client convenience only and ASL shall not be liable for any inaccurate display of data due to any unintended error etc. 12. The client authorizes ASL to deposit from time to time client's collateral and deposits with the Exchanges/Clearing Corporation for meeting client's margin requirements and other obligations. 13. The client authorises ASL to provide the communications through SMS and/or telephone calls on the registered mobile number(s), even if the clients contact number is registered with the National Do Not Call Registry etc. The client confirms that he/she shall not make any complaint to the TRAI/Service provider in relation to any call/communications received from ASL and shall not hold ASL liable. 14. The client authorizes ASL to place Mutual Fund transactions as per the instructions provided. 15. The client authorise ASL to set off outstanding in any of the account of the client against credits available or arising in any other accounts/segments/exchanges maintained with ASL. 16. The client authorizes ASL to use the client account details/KYC details/Bank Debit card details/registered telephone numbers/TPIN etc. as method of verification of the client's identity as the caller and then take orders, instructions from the caller over the phone. All such orders, instructions etc. shall be deemed to have been placed by the client and binding on the client. 17. The Client acknowledges that he/itis fully aware of and understands the risks associated with availing of the services for routing orders over the telephone including the risk of misuse and unauthorized use of his/its details and/or username and/or TPIN and/or Bank Debit card details by a third party. The Client agrees that he/it shall be fully liable and responsible for any and all unauthorized transactions and unauthorized use of the above. 18. The client shall not have recourse to dispute redressal mechanism/arbitration mechanism/investor protection schemes of the Stock Exchanges/SEBI, in case the client avails services under any schemes/leagues/competitions etc. offered by any third party/group company/associate of ASL, and concerning such services. 19. The client agrees that non-receipt of bounced mail notification by ASL shall amount to delivery of the contract note at the email ID of the client. 20. The Trading Member may keep the unutilised margin deposits of the client in bank deposits. However, no interest shall be passed on to the client earned for such deposits. 21. I have opted to receive Part B comprising of Rights & Obligations (Trading and Demat separately), Uniform Risk Disclosure document and Guidance Note etc. in the form of ☐ Physical ☐ Electronic (If the applicant does not select the check box, default option is physical for forms received in Physical and Electronic for others). 22. I/We hereby expressly consent to and authorize Axis Securities Limited (whether acting by itself or whether in an automated manner or otherwise), to seek/ share my personal information regarding my demat / bank account from/ with Axis Bank Limited including details of transactions effected by me/ us, and Funds/Securities (demat account) balances in relation of the securities held in my/our name, for the purposes of displaying such details on app/website of Axis Bank for the sake of my convenience and better viewing experience of my account balances on one platform, and for completing settlement of transactions.

RUNNING ACCOUNT AUTHORISATION

I/We hereby authorise ASL as follows, in respect of my/our trading account with ASL:
To maintain my account, on a running account basis, i.e. instead of paying to me/us any amounts representing payouts, settlement dues, marked to market profits on the settlement date, to retain, withhold, set-off and / or appropriate for such purposes and in such manner as ASL may deem fit, including towards settling outstanding obligations on a settlement date. I/We understand and agree that no interest will be payable to me/us on the deposits or amounts lying to my/our credit with ASL. This authorization may be revoked by me/us at any time by giving ASL written intimation.
I/We request you to settle my/our account on a ☐ Monthly ☐ Quarterly basis (If the client does not select the checkbox, default option is Quarterly)

1st Holder Signature

2nd Holder Signature

3rd Holder Signature

UCC code allotted to the client			
	Documents verified with Originals	Clients Interviewed by	In-Person Verification done by
Name of the Employee			
Designation & Employee Code			
Signature and Date			

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/uploaded on our website after customer login, 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.

Date:

DD

MM

YYYY

Signature of Authorised Signatory (ASL)

Seal/Stamp of the Stock Broker (ASL)

Form Type



DN001

FORM FOR NOMINATION

(To be filled in by individual applying singly or jointly)

Nomination Registration No. _____

Date: NSDL ☐ CDSL ☐ (Please select any one)Trading ID NSDL DP ID CDSL DP ID Demat Client ID **NOMINATION OPTION**

I/we the sole holder / joint holders hereby declare that :




- ☐ I wish to nominate Demat & Trading Account [As per details given below]
- ☐ I / We hereby confirm that I / we do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assests held in the trading / demat account.

NOMINATION DETAILS

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all securities held in the Depository by me / us in the said beneficiary owner account in the event of my / our death. This nomination shall supersede any prior nomination made by me/us and also any testamentary document executed by me/us.

Nomination can be made upto three nominees in the account.

		Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1	Name of the nominee(s) (Mr./Ms./Others)			
	First Name			
	Middle Name			
	Last Name			
2	Share of each Nominee			
A)	For NSDL	Equally <input type="checkbox"/> [If not equally, please specify percentage]	%	%
		Any odd lot after division shall be transferred to the first nominee mentioned in the form.		
B)	For CDSL	Percentage of allocation of securities		
		Residual Securities (please tick any one nominee. If tick not marked default will be first nominee):		
Note: Residual securities in case of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distributing of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.				
3	Relationship With the Applicant (If Any)			
4	Address of Nominee(s)			
	City:			
	State:			
	Pin:			
	Country:			
5	Mobile/Telephone No. of nominee(s)			
6	Fax No.			
7	Email ID of nominee(s)			
8	Nominee Identification details - [Please tick any one of following and provide details of same]			
	<input type="checkbox"/> Photograph & Signature			
	<input type="checkbox"/> PAN			
	<input type="checkbox"/> Aadhaar / UID			
	<input type="checkbox"/> Saving Bank account No.			
	<input type="checkbox"/> Proof of Identity			
	<input type="checkbox"/> Demat Account No.			
	DP ID			

9	Date of Birth	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y									
	Age																																	
Sr. Nos. 10-16 should be filled mandatorily if nominee(s) is a minor:																																		
10	Name of Guardian (Mr./Ms./Others)																																	
	First Name																																	
	Middle Name																																	
	Last Name																																	
11	Address of Guardian(s)																																	
	City:																																	
	State:																																	
	Pin:																																	
	Country:																																	
12	Mobile/Telephone No. of Guardian																																	
13	Fax No.																																	
14	Email ID of Guardian																																	
15	Relationship of Guardian with nominee																																	
16	Guardian Identification details – [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature	 Affix Colour Photograph of Guardian & Sign across Signature of Guardian										 Affix Colour Photograph of Guardian & Sign across Signature of Guardian										 Affix Colour Photograph of Guardian & Sign across Signature of Guardian												
	<input type="checkbox"/> PAN																																	
	<input type="checkbox"/> Aadhaar / UID																																	
	<input type="checkbox"/> Saving Bank account No.																																	
	<input type="checkbox"/> Proof of Identity																																	
	<input type="checkbox"/> Demat Account No. DP ID																																	
17	Name & Signature of Account Holder(s)	Sole/1st Holder										2nd Holder										3rd Holder												
	Name(s) of holder (s)																																	
	Signature(s) of holder (s)	Signature of 1st Holder										Signature of 2nd Holder										Signature of 3rd Holder												
18	Details of Witness for Nomination																																	
	Name of the Witness											Address of Witness										Signature of Witness												
	Place :											Date										D						D	M	M	Y	Y	Y	Y

Notes:

- 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 and 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(s) 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(s) shall be valid discharge by the depository and the Participant against the legal heir.
- Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees. The first nominee of Demat account will be considered as default nominee for Trading account.
- On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
- Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents.
- Savings bank account details shall only be considered if the account is maintained with Axis Bank Ltd.
- DP ID and client ID shall be provided where demat details is required to be provided.

LETTER OF AUTHORITY FOR NRE NON PIS TRANSACTIONS

I hereby authorize you to honour all claims in the form of contract notes for purchases received from my share broker M/s **Axis Securities Limited** having SEBI Registration no. **INZ000161633** and its registered office at **Axis House, 8th Floor, Wadia International Centre, Pandurang Budhkar Marg, Worli, Mumbai-400025**, who have been authorized by me/us to execute sale and purchase transactions of shares on my/our behalf.

I hereby authorize you to debit my NRE account no _____ to the equivalent value of the purchase contract received from the aforesaid Stock broker and issue a banker's cheque favoring my above mentioned Stock Broker / transfer to the above mentioned broker's account for the purchase value as and when such purchase contract are presented by the above broker to the Bank.

I further authorize you to accept and credit to my account cheques / transfer received from the said broker representing sale proceeds of shares sold on my behalf.

I hereby authorize you to disclose the outstanding balance in my above account to my above mentioned broker whenever required by them. I hereby authorize you to debit my SBNRE account No. _____ on account of purchase of NONPIS shares and for recovery of your charges on account of NONPIS transactions.

I hereby solemnly declare that I, my legal heirs, executors agree to indemnify and keep indemnified AXIS Bank from any claims of any nature including damages for following such a transaction based on this Letter of Authority.

I further confirm that I shall not raise any objection or a claim against AXIS Bank for acting on such instructions and in debiting and crediting my account. I confirm that I shall ratify all the credits and debits which AXIS Bank may carry out based on the instructions of this Letter of Authority and it shall be deemed as if the said transactions have been carried out by me.

I confirm that this Letter of Authority shall remain binding and irrevocable till such time this said Letter of Authority is revoked in writing by me. I confirm that notwithstanding the revocation AXIS Bank shall continue to be indemnified for all the actions done prior to the said revocation.

Schedule of Charges for Non PIS Transactions

Type	Normal	Prime	Priority	Burgundy	Burgundy Private
Non PIS Reporting Charges*	200	200	150	100	NIL
*Non PIS Reporting Charges will be levied per trade date –separate for purchase and sale					

Yours faithfully



Customer's Name & Signature

LETTER OF AUTHORITY FOR NRO NON PIS TRANSACTIONS

I hereby authorize you to honour all claims in the form of contract notes for purchases received from my share broker M/s **Axis Securities Limited** having SEBI Registration no. **INZ000161633** and its registered office at **Axis House, 8th Floor, Wadia International Centre, Pandurang Budhkar Marg, Worli, Mumbai-400025**, who have been authorized by me/us to execute sale and purchase transactions of shares on my/our behalf.

I hereby authorize you to debit my NRO account no _____ to the equivalent value of the purchase contract received from the aforesaid Stock broker and issue a banker's cheque favoring my above mentioned Stock Broker / transfer to the above mentioned broker's account for the purchase value as and when such purchase contract are presented by the above broker to the Bank.

I further authorize you to accept and credit to my account cheques / transfer received from the said broker representing sale proceeds of shares sold on my behalf.

I hereby authorize you to disclose the outstanding balance in my above account to my above mentioned broker whenever required by them. I hereby authorize you to debit my SBNRO account No. _____ on account of purchase of NONPIS shares and for recovery of your charges on account of NONPIS transactions.

I hereby solemnly declare that I, my legal heirs, executors agree to indemnify and keep indemnified AXIS Bank from any claims of any nature including damages for following such a transaction based on this Letter of Authority.

I further confirm that I shall not raise any objection or a claim against AXIS Bank for acting on such instructions and in debiting and crediting my account. I confirm that I shall ratify all the credits and debits which AXIS Bank may carry out based on the instructions of this Letter of Authority and it shall be deemed as if the said transactions have been carried out by me.

I confirm that this Letter of Authority shall remain binding and irrevocable till such time this said Letter of Authority is revoked in writing by me. I confirm that notwithstanding the revocation AXIS Bank shall continue to be indemnified for all the actions done prior to the said revocation.

Schedule of Charges for Non PIS Transactions

Type	Normal	Prime	Priority	Burgundy	Burgundy Private
Non PIS Reporting Charges*	200	200	150	100	NIL
*Non PIS Reporting Charges will be levied per trade date –separate for purchase and sale					

Yours faithfully



Customer's Name & Signature

LETTER OF AUTHORITY FOR PIS TRANSACTIONS

I hereby authorize you to honour all claims in the form of contract notes for purchases received from my share broker M/s Axis Securities Limited having SEBI Registration no. INZ000161633 and its registered office at Axis House, 8th Floor, Wadia International Centre, Pandurang Budhkar Marg, Worli, Mumbai-400025. who have been authorized by me/us to execute sale and purchase transactions of shares on my/our behalf.

I hereby authorize you to debit my NREPIS / NROPIS account no. _____ to the equivalent value of the purchase contract received from the aforesaid Stock broker and issue a banker's cheque favoring my above mentioned Stock Broker / transfer to the above mentioned broker's account for the purchase value as and when such purchase contract are presented by the above broker to the Bank.

I further authorize you to accept and credit to my account cheques / transfer received from the said broker representing sale proceeds of shares sold on my behalf.

I hereby authorize you to debit my SBNRE / SBNRO account no. _____ with highest balance and transfer the funds to my above NREPIS / NROPIS account as and when funds are required on account of purchase of shares through secondary markets and for recovery of charges / tax relating to my PIS accounts.

I shall report all secondary market transactions done through SEBI registered Stock Broker on recognized stock exchange and on the same day arrange to submit the original contract note of the transactions to the Bank from such Stock Broker.

I hereby solemnly declare that I, my legal heirs, executors agree to indemnify and keep indemnified AXIS Bank from any claims of any nature including damages for following such a transaction based on this Letter of Authority.

I further confirm that I shall not raise any objection or a claim against AXIS Bank for acting on such instructions and in debiting and crediting my account. I confirm that I shall ratify all credits and debits which AXIS Bank may carry out based on the instructions of this Letter of Authority and it shall be deemed as if the said transactions have been carried out by me.

I confirm that this Letter of Authority shall remain binding and irrevocable till such time this said Letter of Authority is revoked in writing by me.

I confirm that notwithstanding the revocation AXIS Bank shall continue to be indemnified for all the actions done prior to the said revocation.

I hereby authorize you to allow my above mentioned broker to have a “view only” access to my PLS account through i-connect.

I hereby authorize you to disclose the outstanding balance in my above account/s to my above mentioned broker whenever required by them.

Customer's Name & Signature

REVOCATION OF LETTER

Date:-
To,
Axis Bank Limited,
PIS operations Team,
Mumbai.
Dear Sir / Madam,
Subject: - Revocation of Letter of Authority/Mandate/given to M/S _____
Please be advised that, with immediate effect M/s _____ is no longer authorized to handle any of my trade transactions on my behalf. I have revoked their authority and have also notified the same to them.
You are requested NOT to honor any transactions initiated/given by M/s _____ on my behalf. Accordingly, you should immediately make a notation in your records to reflect the fact that M/s _____ has no more power to execute my trades.
You are also requested not to grant access to any of details or any of my personal information to them.
Incase of any further any clarifications on this matter, please contact me on below numbers. My account details are as below.
PIS account Number _____
Contact Number _____
Thanking you.

Customer's Name & Signature

Date:

D	D	M	M	Y	Y	Y	Y
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 Place: _____