

Request Letter for activation of Dormant Trading Account

To
M/s Indbank Merchant Banking Services Ltd.
1st Floor, Khiviraj Complex- 1,
No.480, Anna Salai, Nandanam, Chennai
600035

Date: _____

Dear Sir,





Sub: Request for reactivation of the Trading Account.

Ref: Client Name: _____

Trading Account No: _____

I/We, having the above referred Trading Account maintained with you based on duly filled and signed Client Registration Form along with the relevant KYC supporting documents provided by me/us at the time of Opening the Trading Account. Due to some unavoidable reasons, I/we could not place/execute any trades/orders in the said account, since last 24 months, resulting in the account been kept under "Inactive" mode at your end. However, I/we have decided to start the trading activity and hence request you to kindly reactivate the Account to enable me/us to trade in the account. My/Our KYC details are separately given in the CKYCR form along with required document proof.

1. I/ we request you to activate my/our Trading Account for the following Trading Segments: (Please sign for the segments you want to activate)

Stock Exchange	Market Segment/s	
NSE	Cash 	*F&O 
BSE	Cash 	_____
MF	Cash 	

2. *I/We am enclosing here with the proof for latest financial information. **(Compulsory for activation for derivatives trading)**
- Last Six Months Bank Statement
 Net worth Certificate
 Latest IT Return
 Latest DP Holding Statement
 Form 16/ Latest Salary Slip
 Latest Balance Sheet

3. Gross Annual Income and Net worth Details (Income Range per annum):
- Below Rs. 1 Lakh
 1 Lakh to 5 Lakh
 5 Lakh to 10 Lakh
 10 Lakh to 25 Lakh
 25 Lakh to 1 Crore
 > 1 Crore

Net worth (Amount in Rs): _____



Signature of Client

TRADING ACCOUNT RELATED DETAILS
(For Individuals)

A. BANK ACCOUNT DETAILS

1	Bank Name												
2	Branch Address												
3	Bank A/c No												
4	Bank A/c Type	Resident	Savings A/c	<input type="checkbox"/>	Current A/c	<input type="checkbox"/>	Others (Please specify, _____)						
		NRI	NRE		NRO								
5	MICR Code												
6	IFSC Code												

B. DEPOSITORY ACCOUNT DETAILS

1	Depository Participant Name												
2	Depository Name												
3	Beneficiary Name												
4	DP Id												
5	Beneficiary Id (Client BO Id)												

C. DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS

Whether dealing with any other Stock Broker/Sub-Broker (if case dealing with multiple Stock Brokers/Sub-Brokers, provide details of all)

1	Name of Stock Broker		SEBI Reg No	
2	Name of Sub-Broker, if any		SEBI Reg No	
3	Client Code			
4	Exchange	Fax	Website	

Details of disputes/dues pending from/to such Stock Broker/Sub-Broker:

--

D. ADDITIONAL DETAILS

1. Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify):

Physical Contract Note	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Digital Contract Note	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Email Id:			

2	Whether you wish to avail of the facility of Internet Trading/ Wireless Technology (please specify):	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	Number of years of Investment / Trading Experience:		
4	Any other information:		
5	In case of Non-Individuals, Name, Designation, PAN, UID, Signature, Residential Address and Photograph of Persons authorized to deal in securities on behalf of company/firm/others has to be provided separately.		

E. VERBAL ORDER ACCEPTANCE AUTHORISATION

I/We have been / shall be dealing through you as my / our broker on the Capital Market, Mutual Fund and/or Futures & Options Segments / Currency Derivative Segments. As my / our broker i.e. agent I / we direct and authorize you to carry out trading / dealings on my / our behalf as per instructions given below.

I/We agree and acknowledge that it is advised and preferred you that I/We give instructions for order placement/ modification and cancellation in writing and to avoid disputes, I/we must give instructions in exactly the format given below in duplicate (carbon copy / photocopy) and take signatures of your duly authorized officers at the branch along with your company stamp on the carbon/photocopy of the instructions in acknowledgement of receipt of my/our instructions.

However as I/We shall be dealing by ordering over phone and even if we visit the branch, the fluctuations in market are so rapid that it is not practical to give written instructions for order placement/modification and cancellation, I/We hereby authorize you to accept my / my authorized representative's verbal instructions for order placement / modification and cancellation in person or over phone (fixed line) and execute the same.

F. DECLARATION

1. 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.
2. 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.
3. I/We further confirm having read and understood the contents of the "Rights and Obligations document(s) and Risk Disclosure Document". 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.

Place:

Date:



Signature of Client

G. For Office Use Only

Documents Accepted by:		Documents Verified by:
Branch		
Name of the Employee		
Employee Code		
Designation of the Employee		Activation Done by:
Date		
Signature		

H. RUNNING ACCOUNT AUTHORIZATION (VOLUNTARY DOCUMENT)

For facilitating smooth operations in the aforesaid account and for administrative convenience, I/We authorize IBMBS Ltd:

1. To maintain a running account, instead of settlement to settlement clearance of funds and securities due to me/us.
2. To settle across segments and across Stock Exchanges.
3. **Please note that I/We would like the mandatory settlement of the funds and securities (if applicable) as indicated below. (Tick against your preference)**

Quarterly**Monthly**

4. Further, in case I/We have any outstanding obligation on the settlement date, IBMBS Ltd may retain the requisite securities / funds towards such obligations.
5. Also, in respect of Derivative Market transactions, apart from the margin liability as on the date of settlement, IBMBS Ltd may also retain additional margin requirement of maximum up to 125% of margin requirement on the day of settlement to take care of any margin obligation arising in next 5 days.
6. To retain an amount up to Rs.10,000/- (net amount across segment and across stock Exchanges) while settling funds, whenever transactions have taken place in my/our Trading Account at least once during the previous quarter / month.
7. This authorization for maintaining a running account may be revoked by me/us at any time and IBMBS Ltd shall act upon such revocation request, on receipt of the original revocation request at the service branch of IBMBS Ltd.
- 8 I/we will bring any dispute arising from the Statement of funds or securities to the notice of IBMBS Ltd within 7 working days from the date of receipt of funds/securities statement, as the case may be.

**Signature of Client**

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual
Important Instructions:

- A) Fields marked with ** are mandatory fields. E) List of State / U.T code per Indian Motor Vehicle Act, 1988 is available at the end.
 B) Please fill the form in English and in BLOCK letters. F) List of two character ISO 3166 country codes is available at the end.
 C) Please fill the date in DD-MM-YYYY format. G) KYC number of applicant is mandatory for update application.
 D) Please read section wise detailed guidelines / instructions at the end. H) For particular section update; please tick (✓) in the box available before the section number and strike off the sections not required to be updated.


For office use only (To be filled by financial institution)

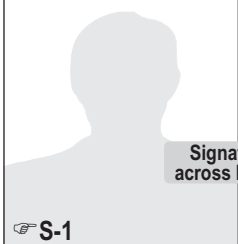
 Application Type* New Update

 KYC Number (Mandatory for KYC update request)

 Account Type* Normal Simplified (for low risk customers) Small

 1. PERSONAL DETAILS (please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PAN NO* <input type="text"/>	
Aadhar No. (UID)*	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Gender*	<input type="checkbox"/> M-Male <input type="checkbox"/> F-Female <input type="checkbox"/> T-Transgender			
Marital Status*	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Others			
Citizenship*	<input type="checkbox"/> IN-Indian <input type="checkbox"/> Other (ISO 3166 Country Code <input type="text"/> <input type="text"/>)			
Residential Status*	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin			
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector) <input type="checkbox"/> O-Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student) <input type="checkbox"/> B-Business <input type="checkbox"/> X-Not Categorized			

PHOTO

 Signature across Photo
S-1

 2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED* mandatory only if section 2 is ticked)

 ISO 3166 Country Code of Jurisdiction of Residence*

 Tax Identification Number or equivalent (if issued by jurisdiction)*

 Place/City of Birth* ISO 3166 Country Code of Birth*

3. PROOF OF IDENTITY (PoI)*

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

<input type="checkbox"/> A- Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> B- Voter ID Card	<input type="text"/>								
<input type="checkbox"/> C- PAN Card	<input type="text"/>								
<input type="checkbox"/> D- Driving Licence	<input type="text"/>	Driving Licence Expiry Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> E- UID (Aadhaar)	<input type="text"/>								
<input type="checkbox"/> F- NREGA Job Card	<input type="text"/>								
<input type="checkbox"/> Z- Others (any document notified by the central government)	<input type="text"/>	Identification Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> S- Simplified Measures Account - Document Type code	<input type="text"/>	Identification Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 4. PROOF OF ADDRESS (PoA)*
 4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction **D** at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Passport Driving Licence UID (Aadhaar) Voter Identity Card NREGA Job Card

Simplified Measures Account - Document Type code Others

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T. Code* ISO 3166 Country Code*

 4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS* (Please see instruction **E** at the end)

Same as Current / Permanent / Overseas Address details

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T. Code* ISO 3166 Country Code*

 4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES*

(Applicable if section 2 is ticked)

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Address

Line 1*

Line 2

Line 3 City / Town / Village*

State* ZIP / Post Code* ISO 3166 Country Code*

S-3

9. ATTESTATION / FOR OFFICE USE ONLY
 Originals verified and self - Attested Document copies received

IN-PERSON AND KYC VERIFICATION CARRIED OUT BY
INSTITUTION ON DETAILS

Date	
Employee Name	
Employee Code	
Employee Designation	
Employee Branch	
Signature of Employee	

Name	
Code	
INSTITUTION STAMP	

APPLICATION FOR CHANGES IN CLIENT MASTER

To Indbank Merchant Banking Services Limited (DP ID. IN300597 /IN303093)

From

My DP Account No.

Trading Code

Kindly make necessary changes in my/our DP Account as per details given below.

ADDRESS DETAILS (Proof to be enclosed) (<input type="checkbox"/> Local or Permanent / <input type="checkbox"/> Correspondence / <input type="checkbox"/> Both)	
Existing	New
Pin code	Pin code

* Update above address in Nominee Details. Yes No

BANK DETAILS (Proof to be enclosed)

Bank A/C Type		
Bank A/C No.		
Bank Name		
Bank Address.		
		Pin code
MICR / IFS Code		
PAN Details	<i>1st holder</i>	<i>2nd holder</i>
ADHAR Details	<i>1st holder</i>	<i>2nd holder</i>
Date Of Birth	<i>1st holder</i>	<i>2nd holder</i>
Others Details (if any)		

PHONE NO. , MOBILE NO. AND EMAIL ID

Phone No.	
Mobile No. (1st Holder)	Belongs to <input type="checkbox"/> Me/ <input type="checkbox"/> My * Family
Mobile No. (2nd Holder)	Belongs to <input type="checkbox"/> Me/ <input type="checkbox"/> My * Family
Mobile No. (3rd Holder)	Belongs to <input type="checkbox"/> Me/ <input type="checkbox"/> My * Family

I/We would like to have the statement of Transaction / Holding / Bill e-mailed to me/us at the following e-mail id

Email Id. (1st Holder)		Belongs to <input type="checkbox"/> Me/ <input type="checkbox"/> My * Family
Email Id. (2nd Holder)		Belongs to <input type="checkbox"/> Me/ <input type="checkbox"/> My * Family
Email Id. (3rd Holder)		Belongs to <input type="checkbox"/> Me/ <input type="checkbox"/> My * Family

I/We the under mentioned Beneficial Holders hereby agree, undertake and declare that , the aforementioned services are provided by Indbank Merchant Banking Services Ltd subject to the Terms and Conditions mentioned herein and as amended from time to time.

TERMS & CONDITIONS FOR PROVIDING TRANSACTION AND HOLDING STATEMENTS BY E-MAIL

- I/We am/are aware that I/we will not receive the transaction statements in paper form and I/We agree that the transaction statements are sent by e-mail.
 - I/We will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the e-mail account and I/we shall immediately inform the DP about change in e-mail id ,if any
 - I/We am/are aware that the transaction statement may be accessed by other entities in case the confidentiality / secrecy of the login name and password is compromised and I/We agree and aware that DP shall have the right to terminate such service provided a written notice is given in advance and vice versa.
 - I/We agree that the above terms and conditions are in addition to and not in contravention of the terms and conditions forming a part of the "Agreement / Between The Participant And The Person Seeking To Open An Account With The Participant & Rights & Obligation of Beneficial Owner and DP" signed by me/us at the time of opening the Demat account with the Bank.
- Please do the needful at the earliest at my/our sole responsibility and activate the services as mentioned above for my/our DEMAT Account.

Signature

<i>Sole/1st holder</i>	<i>2nd holder</i>	<i>3rd holder</i>
------------------------	-------------------	-------------------

Verified and Accepted by : (For Office Use)

(Branch stamp, Emp name, code and Signature)

***'Family' as mentioned above has been defined as spouse, dependent children and dependent parent**

Enclosures:

- For Address Details Change - Self Attested copy of Address Proof
- For Bank Details Change – Copy of Cheque leaf (Name Preprinted) or Passbook front page with details or Latest Bank A/c Statement

Most Important Terms and Conditions (MITC)

(For non-custodial settled trading accounts)

1. Your trading account has a “Unique Client Code” (UCC), different from your demat account number. Do not allow anyone (including your own stock broker, their representatives and dealers) to trade in your trading account on their own without taking specific instruction from you for your trades. Do not share your internet/ mobile trading login credentials with anyone else.
2. You are required to place collaterals as margins with the stock broker before you trade. The collateral can either be in the form of funds transfer into specified stock broker bank accounts or margin pledge of securities from your demat account. The bank accounts are listed on the stock broker website. Please do not transfer funds into any other account. The stock broker is not permitted to accept any cash from you.
3. The stock broker’s Risk Management Policy provides details about how the trading limits will be given to you, and the tariff sheet provides the charges that the stock broker will levy on you.
4. All securities purchased by you will be transferred to your demat account within one working day of the payout. In case of securities purchased but not fully paid by you, the transfer of the same may be subject to limited period pledge i.e. seven trading days after the pay-out (CUSPA pledge) created in favor of the stock broker. You can view your demat account balances directly at the website of the Depositories after creating a login.
5. The stock broker is obligated to deposit all funds received from you with any of the Clearing Corporations duly allocated in your name. The stock broker is further mandated to return excess funds as per applicable norms to you at the time of quarterly/ monthly settlement. You can view the amounts allocated to you directly at the website of the Clearing Corporation(s).
6. You will get a contract note from the stock broker within 24 hours of the trade.
7. You may give a one-time Demat Debit and Pledge Instruction (DDPI) authority to your stock broker for limited access to your demat account, including transferring securities, which are sold in your account for pay-in.
8. The stock broker is expected to know your financial status and monitor your accounts accordingly. Do share all financial information (e.g. income, networth, etc.) with the stock broker as and when requested for. Kindly also keep your email Id and mobile phone details with the stock broker always updated.
9. In case of disputes with the stock broker, you can raise a grievance on the dedicated investor grievance ID of the stock broker. You can also approach the stock exchanges and/or SEBI directly.
10. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. You will not have any protection/recourse from SEBI/stock exchanges for participation in such schemes.

Client Signature

Trading Code: