

■ BAR CODING

Application No. ■



# Shaping Your Financial Future

Since 1982

[www.sushilfinance.com](http://www.sushilfinance.com)

For office use only

Client Name					
Inward Date		Branch Code		UCC Alloted	
Registration Date		DP ID	12028900	CLIENT ID	

Kindly ENSURE the following before sending the Account Opening Form (AOF) to us.

Sr. No.	Particulars	Please ✓ after rechecking
1	All details of <b>Applicant(s)</b> are duly filled in and tick marks done at required fields.	
2	<b>Interaction / Discussion</b> is done with the <b>Applicant(s)</b> personally before proceeding to the <b>AOF. DP and Brokerage Schemes</b> are explained to <b>Applicant(s)</b> and filled in.	
3	<b>Signature(s)</b> of the <b>Applicant(s)</b> are obtained at all the required places with consistency.	
4	<b>Signature(s)</b> of the <b>Applicant(s)</b> are matched with their <b>Signature(s)</b> on the PAN.	
5	<b>Name(s) and Address(es) of the Applicant(s)</b> are matched with the proofs given. <b>Name and DOB of the Applicant(s)</b> are matches with the IT site details.	
6	<b>Original Documents</b> of the <b>Applicant(s)</b> are Verified / Validity Checked.	
7	Copies of all supporting documents are <b>SELF ATTESTED</b> by the <b>Applicant(s)</b> . <b>Required income proof is given if opted for FO.</b>	
8	<b>IPV STAMP with Signatures</b> are affixed at the required places on the AOF and on all the copies of the documents submitted by the <b>Applicant(s)</b> .	
9	<b>Downloaded Mask Aadhaar</b> Copy(ies) of the <b>Applicant(s)</b> is/are attached, with the <b>QR code</b> clearly visible and also emailed separately. Address details given in the form must match with E-Aadhaar copy if Aadhaar is given as an address proof.	
10	PAN, Passbook/Cheque copy and all other supporting documents are clearly visible. (Picture, DOB, Name, IFSC Code, MICR, Branch details etc. are clear and readable.)	
11	<b>Signatures</b> of the <b>Applicant(s)</b> is/are obtained next to <b>Corrections / Overwritings</b> done, if any.	
12	<b>EMAIL IDs and MOBILE Numbers</b> provided belong to the <b>Applicant(s)</b> as per SEBI guidelines (Self, Spouse, Dependent Parents, Dependent Children)	
13	<b>Mandatory Nomination Form</b> is Obtained (Either <b>Part "A"</b> or <b>Part "B"</b> )	
14	Duly Signed DDPI (non-mandatory) is obtained. <b>Expiry date has been checked.</b>	
15	Client PAN to be mandatory linked with AaAdhar.	
16	<b>Booklet of Mandatory &amp; Non Mandatory Documents</b> given to client	

XX



Signature & Stamp of Authorized Person (AP)

#### IMPORTANT NOTE

- Do not use white ink. Do not overwrite. **Do not use multiple pens/color.**
- IPV to be done by AP only, incase of AP is registered in Individual capacity.
- **Client photograph must be recent. do not use old photograph.**
- IPV is valid for the period of 3 months only.
- In cases where client is providing thumb impression instead of signature please affixed left hand thumb impression for male clients and right hand thumb impression for female clients.

Please help us speed up the process and serve you better



## Instructions/Guidelines for filling Individual KYC Application Form

### A. General Instructions:

1. Self-attestation of documents is mandatory.
2. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant 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 below list 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 addresses 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/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in 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., Head of State or of Government, senior politician, senior government/judiciary/military officer, senior executive of state owned corporation, important political party official, etc.

### B. Proof of Identity (POI):

1. PAN card with photograph is mandatory for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License Letter issued by NPR / NREGA job card
3. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
4. Mention identification / reference number if 'Z – Others (any document notified by the central government)' is ticked.
5. Others – Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory Regulatory Authorities, Public Sector Undertakings, Scheduled 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):

1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
2. Others includes – Utility bill which is not more than 3 months old of any service provider (electricity, landline telephone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India
3. Identity card/document with address issued by any of the following: Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members.
4. Self declaration of High courts/Supreme court judges, giving the new address in respect of their own accounts.
5. For FII/Sub account, Power of attorney given by FII/Sub account to the custodians (which are duly notarized and/or apostilled or consularized) that gives registered address should be taken.
6. Proof of address in name of spouse may be accepted.
7. Registered lease or Sale agreement/ Flat maintenance bill / Insurance copy / Ration card / Latest Property tax
8. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License Letter issued by NPR / NREGA job card

### D. Exemptions/Clarifications to PAN (\*Sufficient documentary evidence in support of such claims to be collected)

1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
3. Investors residing in the state of Sikkim.
4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
5. In case of institutional clients, namely FIIs, MFs, VCFs, FVCIs, Scheduled commercial bank, 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 Company Act 1956, custodians shall verify the PAN card details with the original PANs and provide duly certified copies of such verified PAN details to the intermediary.

### E. List of people authorized to attest the documents:

1. Authorized officials of Asset Management Companies (AMCs).
2. Authorized officials of Registrar & Transfer Agent (RTA) acting on behalf of the AMC.
3. KYC compliant mutual fund distributors affiliated to Association of Mutual Funds (AMFI) and have undergone the process of 'Know Your Distributor (KYD)'.
4. Notary Public, Gazette Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. 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.

## IN PERSON VERIFICATION

Particular	Documents Verified with Originals	Client Interviewed By	In-Person Verification Done by
Name of the Employee			
Employee Code			
Designation of the Employee			
Date			
Signature			

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.

\_\_\_\_\_  
Signature of the Authorised Signatory

Date: \_\_\_\_\_

\_\_\_\_\_  
Seal / Stamp of the Stock Broker

**KINDLY ENSURE BELOW MENTIONED SIGNATURES ARE PROPERLY SIGNED TO AVOID REJECTION OF FORMS.**

### Client Signature Index

Page No.	First Holder Sign.	Second Holder Sign.	Third Holder Sign.
Index Page 3	F1	--	--
4	F2 to F5	--	--
5	F6 - F7	--	--
6	F8	--	--
7	--	S1 - S2	--
8	--	S3	--
9	--	--	T1 - T2
10	--	--	T3
15	F9	--	--
17	F10	S4	T4
18	F11	S5	T5
21	F12	S6	T6
22	F13	--	--
24	F14	--	--
27	F15	--	--
28	F16	S7	T7
29	F17	--	--
31	F18	--	--
32	F19	--	--
DDPI (Separate Page)	F1 to F4	S1 to S4	T1 to T4
<b>Full Signature Required, do not put initials or short signature</b>			



## INDEX

### Mandatory

Particulars	Significance	Page No.
In-person Verification & Signature Index	Personal interaction with Applicant	2
Know Your Client KYC Form and Brokerage Sheet. DP Tariff (Mandatory for DP)	Profile of Client with Photograph along with details of Banking & DP, Annual Income, Experience and Preferred Segment of Dealing by Client as well as Introducers' details and Document detailing the rate/amount of brokerage and other charge(s) Fatca Declaration and authority for authenticate of Aadhar No. by Beneficiary owner. DP Tariff and Brokerage Structure. Declaration of Nominee.	4-23
Acknowledge From Client	Acknowledgement from client for receiving most important Terms & Condition (MITC). Acknowledgement from Client for receiving copy of mandatory documents prescribed by SEBI and voluntary documents. Disclosure of Minimum Mandatory Terms and Conditions and Most Important Terms Conditions (MITC) to Clients	24-28

### Voluntary

Authority for Running Account	Authority letter for maintaining running account with Broker for funds.	29
Authority for receiving digitally signed documents	Authorization for receipt of contract notes, bills, Statements of Funds and Securities etc. in digitally signed Electronic Form.	30-32
Availing SMS Facility	Registration for availing SMS facility for trading account.	
Undertaking Cum authority Letter	For ease of operation while trading	
Authority letter for adjustments	Authority to broker for adjustment for funds and securities in different Segment and Exchanges.	
Disclosure of Proprietary	Proprietary Trading Disclosure	
Client Defaulter Declaration	Undertaking by client that he has not been declared as defaulter by SEBI / Various Exchanges / Regulatory bodies / CIBIL etc.	
Authority for Mobile Trading	Securities Trading Using Wireless Technology	
Registration for Mutual Fund Service System (MFSS) Facility	For availing Mutual Fund facility.	
DDPI	Execution of Demat Debit & Pledge instruction (Separately Attached)	

### Mandatory Documents in Seperate Booklet as prescribed by SEBI

Rights and Obligations	Document stating the Rights & Obligations of stock broker / trading member, Authorised Person and client for trading on exchanges (including additional rights & obligations in case of interest / wireless technology based trading).	1-8
Combined Risk Disclosure Document	Risk Disclosure Documents (RDD) for (Capital market & Futures & Options segment) contains about brief of risk involved i.e. basic and other related risks in Capital Market.	9-14
Guidance Note	Do's and Don'ts for trading on exchange for education of investors.	15-17
Policies and Procedures	Document describing significant policies and procedures of the stock broker.	18-21
Rights and Obligations for opening Demat Account	Rights and Obligations of Beneficial Owner and Depository Participant	22-25
Proprietary Trading Disclosure	Disclosure of proprietary trading to clients by Broker	26
Bank verification	Format of letter to be obtained from bank for verification of signature, address, identity and bank details.	27
Investor Charter	Investor charter of DP and Stock Broker (Separately Attached)	

I / We have fully understood the distinction and details regarding the Mandatory / Voluntary and do hereby enter and sign the same and agree not to call into question the validity, enforce the ability and applicability of any voluntary agreement(s) / documents(s) or clauses within any voluntary / optional agreement(s) / document(s) under any circumstances whatsoever.

**F1**  
**XX**



First Holder Signature

## CLIENT PROFILE

**Mandatory**

Equity : ☐ Speculative ☐ Hedging ☐ Investment

Investment Experience : ☐ No Prior Experience  Years in Stocks  Years in Derivatives

Years in Commodities  Years in any other investment related field.

### Trading Preferences\*

Please Sign in the relevant box only where you wish to Trade and strike off the segment not chosen by you.  
**Sign in the First Box only If you wish to Trade in All Segments.**

Exchanges : BSE & NSE

All Segments	Cash / Mutual Funds / SLBM	F & O
<b>F2</b> <b>XX</b> 	<b>F3</b> <b>XX</b> 	<b>F4</b> <b>XX</b> 
<b>*If you do not wish to Trade in any of the Segments / Mutual Fund / SLBM, please mention below.</b>		

\*In future the clients wants to trade in any new segment/new exchange, separate authorisation/letter should be provided.

\*For SARAL Account please sign in F3 and F5 box only

DP CDSL	<b>F5</b> <b>XX</b> 
---------	----------------------------

### Savashare Clients (Internet and Mobile Trading)

Whether you wish to avail the facility of internet trading / wireless technology ☐ Yes ☐

Type of Product : ☐ WEB ☐ (EXE application having one time license fee.)

### Dealing through Remisier/Authorised Person/Branch

Name \_\_\_\_\_ Branch Code \_\_\_\_\_

Regd. Office Address \_\_\_\_\_

Mobile No. \_\_\_\_\_ Phone No. \_\_\_\_\_ Email ID \_\_\_\_\_

Authorised Person (AP) \_\_\_\_\_ Authorised Person (AP) \_\_\_\_\_

Regn. No. NSE \_\_\_\_\_ Regn. No. BSE \_\_\_\_\_

### Introduction (Optional)

The details furnished by Applicant is true to the best of my knowledge and belief.

Name \_\_\_\_\_

Address \_\_\_\_\_

Relation with client \_\_\_\_\_ Relation with TM. \_\_\_\_\_ Phone No. \_\_\_\_\_

Introducer's Trading A/c. \_\_\_\_\_ DP Account : **BO ID No.** 12028900

Introducer Status : ☐ Remisier ☐ Authorised Person ☐ Existing Client ☐ Others \_\_\_\_\_

Date \_\_\_\_\_

(Introducer Signature) In case of Firm,  
Corporate please affix company seal

**Sushil Financial Services Private Limited**

Regd. Office: 12 Homji Street, Fort, Mumbai- 400001 | Tel.: 022 40936000  
 SEBI No.: INZ000165135 | DP NO: IN-DP-504-2020 | DP ID: 028900  
 CIN: U67120MH1991PTC063438 | www.sushilfinance.com | info@sushilfinance.com

**Know Your Client (KYC)****Application Form (For Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

**Application Number:****Application Type\*:** ☒ New KYC ☐ Modification KYC**KYC Mode\*:** Please Tick (✓)
☒ Normal ☐ EKYC OTP ☐ EKYC Biometric ☐ Online KYC ☐ Offline EKYC ☐ Digilocker
**1. Identity Details** (please refer guidelines overleaf)**PAN\*** \_\_\_\_\_ (Please enclosed a duly attested copy of PAN)**Sole/First Holder Name\***

(same as ID proof)

**Maiden Name\*** (if any)**Fathers/Spouse's Name\*****Date of Birth\*****Mother's Name\*:** \_\_\_\_\_**Gender\***☐ Male ☐ Female ☐ Transgender**Marital Status\***☐ Single ☐ Married**Nationality\***☐ Indian ☐ Other \_\_\_\_\_**Residential Status\***

Please Tick (✓)

☐ Resident Individual☐ Non Resident Indian☐ Foreign National☐ Person of Indian Origin

Passport mandatory for NRIs and Foreign Nationals.  
 PIO selection is only for CKYC and not for KRA KYC.  
 Select NRI or Foreign National based on Nationality  
 of the individual)

**Proof of Address (POA) Please tick**

(Attested copy of any one POA for correspondence and permanent address each to be submitted)

☐ A — Aadhaar Card XXXX XXXX \_ \_ \_ \_ (QR Code must be clear on proof)☐ B — Passport Number \_\_\_\_\_ (Expiry Date) \_\_\_\_\_☐ C — Voter ID Card \_\_\_\_\_☐ D — Driving License \_\_\_\_\_ (Expiry Date) \_\_\_\_\_☐ E — NREGA Job Card \_\_\_\_\_☐ F — NPR \_\_\_\_\_☐ Z — Others \_\_\_\_\_ Identification No.: \_\_\_\_\_

(any document notified by Central Government)

**F6  
XX**

Please affix  
 recent  
 passport size  
 picture

Pl. Sign Across the photo

**2. Address Details\*****"A" Correspondence/ Current Local Address** (Please refer guidelines overleaf)

Line 1\*

Line 2

Line 3

City/Town/Village\*

District\*

Pin Code\*

State\*

Country\*

Telephone No.

Residence

Office

Address Type\*

☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Applicant Signature

**F7  
XX**

"B" Permanent Residence Address of applicant, (If Different than "A" / Overseas *Address) (Mandatory for NRI applicant)					
Line 1*					
Line 2					
Line 3					
City/Town/Village*		District*		Pin Code*	
State*		Country*			
Telephone No.		Residence		Office	
Address Type*	<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified				

**Proof of Identity (POI)** Submitted for PAN exempted cases **(Please tick)**

☐ A — Aadhaar Card      XXXX XXXX \_ \_ \_ \_ (QR Code must be clear on proof)  
☐ B — Passport Number      \_\_\_\_\_ (Expiry Date) \_\_\_\_\_  
☐ C — Voter ID Card      \_\_\_\_\_  
☐ D — Driving License      \_\_\_\_\_ (Expiry Date) \_\_\_\_\_  
☐ E — NREGA Job Card      \_\_\_\_\_  
☐ F — NPR      \_\_\_\_\_  
☐ Z — Others      \_\_\_\_\_ Identification No.: \_\_\_\_\_  
 (any document notified by Central Government)

**3. Contact Details (in CAPITAL)**

Email ID\* \_\_\_\_\_

**Relationship with Applicant**

☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parent


**4. Contact Details (in CAPITAL)**

Mobile\* \_\_\_\_\_

**Relationship with Applicant**

☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parent

**5. Applicant Declaration**

<p>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. I agree that any communication related to my trading and demat account should be sent to the above mentioned Mobile Number and E-mail id. I hereby consent to receiving information from Central KYC registry/ KRA through SMS/ Email on the above registered number/ email address.</p> <p>I am also aware that for Aadhar OVD based KYC, my KYC request shall be validated against Aadhar details. I hereby consent to sharing my masked Aadhar card with readable QR code or my Aadhar XML/ Digilocker XML file, along with passcode and as applicable with KRA and other intermediaries with whom I have a business relationship for KYC purposes only. I, hereby give my consent to download my KYC Records from the Central KYC Registry (CKYCR) / KRA, only for the purpose of verification of my identity and address from the database of CKYCR Registry / KRA.</p> <p>DATE: _____ (DD-MM-YYYY)      PLACE: _____</p>	<p><b>Applicant Signature</b></p> <p style="text-align: center;">F8 XX </p> <p style="text-align: center;">X Sign Here</p>
---	---

**6. For Office Use Only**

In-Person Verification (IPV) & KYC carried out by*	Intermediary Details*
Emp. Name _____ Emp. Code _____ Emp. Designation _____ Name of Organization _____ Emp. Signature _____ KYC / IPV Date _____	<p>AMC / Intermediary Name : <b>Sushil Financial Services Private Limited</b></p> <p> <input type="checkbox"/> Self certified document copies received (OVD)  <input type="checkbox"/> True Copies of documents received (Attested)         </p>



**Sushil Financial Services Private Limited**  
Regd. Office: 12 Homji Street, Fort, Mumbai- 400001 | Tel.: 022 40936000  
SEBI No.: INZ000165135 | DP NO: IN-DP-504-2020 | DP ID: 028900  
CIN: U67120MH1991PTC063438 | www.sushilfinance.com | info@sushilfinance.com

<b>Know Your Client (KYC)</b> <b>Application Form (For Individuals Only)</b> <small>Please fill the form in ENGLISH and in BLOCK letters Fields marked * are mandatory Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also</small>	<b>Application Number:</b>  <b>Application Type*:</b> <input checked="" type="checkbox"/> New KYC <input type="checkbox"/> Modification KYC
<b>KYC Mode*:</b> Please Tick (✓) <input checked="" type="checkbox"/> Normal <input type="checkbox"/> EKYC OTP <input type="checkbox"/> EKYC Biometric <input type="checkbox"/> Online KYC <input type="checkbox"/> Offline EKYC <input type="checkbox"/> Digilocker	

<b>1. Identity Details</b> (please refer guidelines overleaf)	
<b>PAN*</b>	_____ (Please enclosed a duly attested copy of PAN)
<b>Second Holder Name*</b> <small>(same as ID proof)</small>	_____
<b>Maiden Name<sup>+</sup></b> (if any)	_____
<b>Fathers/Spouse's Name*</b>	_____
<b>Date of Birth*</b>	_____ <b>Mother's Name<sup>+</sup>:</b> _____
<b>Gender*</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender <b>Marital Status*</b> <input type="checkbox"/> Single <input type="checkbox"/> Married
<b>Nationality*</b>	<input type="checkbox"/> Indian <input type="checkbox"/> Other _____
<b>Residential Status*</b> <small>Please Tick (✓)</small>	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin
<b>Proof of Address (POA) Please tick</b> <b>(Attested copy of any one POA for correspondence and permanent address each to be submitted)</b>	
<input type="checkbox"/> A — Aadhaar Card	XXXX XXXX _ _ _ _ (QR Code must be clear on proof)
<input type="checkbox"/> B — Passport Number	_____ (Expiry Date) _____
<input type="checkbox"/> C — Voter ID Card	_____
<input type="checkbox"/> D — Driving License	_____ (Expiry Date) _____
<input type="checkbox"/> E — NREGA Job Card	_____
<input type="checkbox"/> F — NPR	_____
<input type="checkbox"/> Z — Others	_____ Identification No.: _____ <small>(any document notified by Central Government)</small>
<div><div><b>S1 XX</b> </div><div>Please affix recent passport size picture  Pl. Sign Across the photo</div></div>	

<b>2. Address Details*</b>		<b>"A" Correspondence/ Current Local Address</b> (Please refer guidelines overleaf)	
Line 1*	_____		
Line 2	_____		
Line 3	_____		
City/Town/Village*	District*	Pin Code*	_____
State*	Country*	_____	
Telephone No.	Residence	Office	_____
Address Type*	<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified		

<b>Applicant Signature</b>	<b>S2 XX</b> 
<b>Page 7</b>	




<b>"B" Permanent Residence Address of applicant, (If Different than "A" / Overseas *Address)</b> (Mandatory for NRI applicant)					
Line 1*					
Line 2					
Line 3					
City/Town/Village*		District*		Pin Code*	
State*		Country*			
Telephone No.		Residence		Office	
Address Type*	<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified				

<b>Proof of Identity (POI)</b> Submitted for PAN exempted cases <b>(Please tick)</b>	
<input type="checkbox"/> A — Aadhaar Card	XXXX XXXX _ _ _ _ (QR Code must be clear on proof)
<input type="checkbox"/> B — Passport Number	_____ (Expiry Date) _____
<input type="checkbox"/> C — Voter ID Card	_____
<input type="checkbox"/> D — Driving License	_____ (Expiry Date) _____
<input type="checkbox"/> E — NREGA Job Card	_____
<input type="checkbox"/> F — NPR	_____
<input type="checkbox"/> Z — Others	_____ Identification No.: _____
(any document notified by Central Government)	

<b>3. Contact Details (in CAPITAL)</b>
Email ID* _____
<b>Relationship with Applicant</b> <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parent

<b>4. Contact Details (in CAPITAL)</b>
Mobile* _____
<b>Relationship with Applicant</b> <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parent

<b>5. Applicant Declaration</b>	
<p>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. I agree that any communication related to my trading and demat account should be sent to the above mentioned Mobile Number and E-mail id. I hereby consent to receiving information from Central KYC registry/ KRA through SMS/ Email on the above registered number/ email address.</p> <p>I am also aware that for Aadhar OVD based KYC, my KYC request shall be validated against Aadhar details. I hereby consent to sharing my masked Aadhar card with readable QR code or my Aadhar XML/ Digilocker XML file, along with passcode and as applicable with KRA and other intermediaries with whom I have a business relationship for KYC purposes only. I, hereby give my consent to download my KYC Records from the Central KYC Registry (CKYCR) / KRA, only for the purpose of verification of my identity and address from the database of CKYCR Registry / KRA.</p> <p>DATE: _____ (DD-MM-YYYY)   PLACE: _____</p>	<div style="text-align: center;"> <b>Applicant Signature</b>      X  Sign Here </div>

<b>6. For Office Use Only</b>	
<b>In-Person Verification (IPV) &amp; KYC carried out by*</b>	<b>Intermediary Details*</b>
Emp. Name _____ Emp. Code _____ Emp. Designation _____ Name of Organization _____ Emp. Signature _____ KYC / IPV Date _____	<div style="text-align: center;"> AMC / Intermediary Name :  <b>Sushil Financial Services Private Limited</b> </div> <input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested)



## Sushil Financial Services Private Limited

Regd. Office: 12 Homji Street, Fort, Mumbai- 400001 | Tel.: 022 40936000

SEBI No.: INZ000165135 | DP NO: IN-DP-504-2020 | DP ID: 028900

CIN: U67120MH1991PTC063438 | www.sushilfinance.com | info@sushilfinance.com

## Know Your Client (KYC)

## Application Form (For Individuals Only)

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

## Application Number:

Application Type\*: ☒ New KYC ☐ Modification KYC

## KYC Mode\*: Please Tick (✓)

☒ Normal☐ EKYC OTP☐ EKYC Biometric☐ Online KYC☐ Offline EKYC☐ Digilocker

## 1. Identity Details (please refer guidelines overleaf)

PAN\* \_\_\_\_\_ (Please enclosed a duly attested copy of PAN)

Third Holder Name\*

(same as ID proof)

Maiden Name<sup>+</sup> (if any)

Fathers/Spouse's Name\*

Date of Birth\*

Mother's Name<sup>+</sup>: \_\_\_\_\_

Gender\*

☐ Male ☐ Female ☐ Transgender

Marital Status\*

☐ Single ☐ Married

Nationality\*

☐ Indian ☐ Other \_\_\_\_\_

Residential Status\*

☐ Resident Individual☐ Non Resident Indian

Please Tick (✓)

☐ Foreign National☐ Person of Indian Origin

Passport mandatory for NRIs and Foreign Nationals.  
PIO selection is only for CKYC and not for KRA KYC.  
Select NRI or Foreign National based on Nationality  
of the individual)

## Proof of Address (POA) Please tick

(Attested copy of any one POA for correspondence and permanent address each to be submitted)

☐ A — Aadhaar Card

XXXX XXXX \_\_\_\_ (QR Code must be clear on proof)

☐ B — Passport Number

(Expiry Date) \_\_\_\_\_

☐ C — Voter ID Card☐ D — Driving License

(Expiry Date) \_\_\_\_\_

☐ E — NREGA Job Card☐ F — NPR☐ Z — Others

Identification No.: \_\_\_\_\_

(any document notified by Central Government)

T1  
XX

Please affix  
recent  
passport size  
picture

Pl. Sign Across the photo

## 2. Address Details\*

## "A" Correspondence/ Current Local Address (Please refer guidelines overleaf)

Line 1\*

Line 2

Line 3

City/Town/Village\*

District\*

Pin Code\*

State\*

Country\*

Telephone No.

Residence

Office

Address Type\*

☐

Residential/Business

☐

Residential

☐

Business

☐

Registered Office

☐

Unspecified

Applicant Signature →


T2  
XX

<b>"B" Permanent Residence Address of applicant, (If Different than "A" / Overseas *Address)</b> (Mandatory for NRI applicant)					
Line 1*					
Line 2					
Line 3					
City/Town/Village*		District*		Pin Code*	
State*		Country*			
Telephone No.		Residence		Office	
Address Type*	<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified				

<b>Proof of Identity (POI)</b> Submitted for PAN exempted cases <b>(Please tick)</b>	
<input type="checkbox"/> A — Aadhaar Card      XXXX XXXX _ _ _ _ (QR Code must be clear on proof)	
<input type="checkbox"/> B — Passport Number      _____ (Expiry Date) _____	
<input type="checkbox"/> C — Voter ID Card      _____	
<input type="checkbox"/> D — Driving License      _____ (Expiry Date) _____	
<input type="checkbox"/> E — NREGA Job Card      _____	
<input type="checkbox"/> F — NPR      _____	
<input type="checkbox"/> Z — Others      _____ Identification No.: _____	
(any document notified by Central Government)	

<b>3. Contact Details (in CAPITAL)</b>
Email ID* _____
<b>Relationship with Applicant</b> <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parent

<b>4. Contact Details (in CAPITAL)</b>
Mobile* _____
<b>Relationship with Applicant</b> <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Parent

<b>5. Applicant Declaration</b>	
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. I agree that any communication related to my trading and demat account should be sent to the above mentioned Mobile Number and E-mail id. I hereby consent to receiving information from Central KYC registry/ KRA through SMS/ Email on the above registered number/ email address. I am also aware that for Aadhar OVD based KYC, my KYC request shall be validated against Aadhar details. I hereby consent to sharing my masked Aadhar card with readable QR code or my Aadhar XML/ Digilocker XML file, along with passcode and as applicable with KRA and other intermediaries with whom I have a business relationship for KYC purposes only. I, hereby give my consent to download my KYC Records from the Central KYC Registry (CKYCR) / KRA, only for the purpose of verification of my identity and address from the database of CKYCR Registry / KRA.	<div style="text-align: center;"> <b>Applicant Signature</b>    </div> <div style="text-align: center;">       X        Sign Here     </div>
DATE: _____ (DD-MM-YYYY)    PLACE: _____	

<b>6. For Office Use Only</b>	
<b>In-Person Verification (IPV) &amp; KYC carried out by*</b>	<b>Intermediary Details*</b>
Emp. Name _____ Emp. Code _____ Emp. Designation _____ Name of Organization _____ Emp. Signature _____ KYC / IPV Date _____	AMC / Intermediary Name : <b>Sushil Financial Services Private Limited</b>  <input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested)

**Additional KYC Form for Opening a Demat & Trading Account (For Individuals)**
**(To be filled by the Depository Participant)**

Sushil Financial Services Pvt. Ltd. 12, Homji Street, Fort, Mumbai - 400 001. Depository Participant of Central Depository Services (I) Ltd. (CDSL) SEBI Registration No: IN-DP-504-2020	Application No.									
	Date									

DP Internal Reference No.														
DP ID	1	2	0	2	8	9	0	0	Client ID					

**I/We request you to open a Demat & Trading Account in my/our name as per following details**

Sole/First Holder's Name	PAN	
	UID	
	<b>UCC</b>	
	Exchange Name & ID	
Second Holder's Name	PAN	
	UID	
Third Holder's Name	PAN	
	UID	

In case of Firms, Association of Person (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of natural persons, the name of the Firm, Association of Person (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned beside.	
--	--

**Details of Guardian (in case the account holder is minor)**

Guardian's Name		
Relationship with the applicant	PAN	

**Other Details (First Holder)**

Status	Sub-Status	
Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual-Director
	<input type="checkbox"/> Individual Director Relative	<input type="checkbox"/> Individual HUF / AOP
	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Minor
	<input type="checkbox"/> Individual Margin Trading Account A/C (MANTRA)	<input type="checkbox"/> Others (Specify) _____
NRI	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable
	<input type="checkbox"/> NRI Repatriable Promoter	<input type="checkbox"/> NRI Non-Repatriable Promoter
	<input type="checkbox"/> NRI Depository Receipts	<input type="checkbox"/> Others (Specify) _____
Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository Receipts <input type="checkbox"/> Others (Specify)_____	

<b>Educational Qualification:</b>	<input type="checkbox"/> Under Graduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> Post Graduate	<input type="checkbox"/> Professional
-----------------------------------	---	-----------------------------------	--	---------------------------------------

<b>Occupation (Please tick ✓ any one and give brief details):</b>
<input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others (Please specify)_____

<b>Name of Employer (if employed) / Establishment (if self employed / business / professional / others)</b>	
Name of Employer / Establishment	Designation
Address	
City	State
Country	Pin Code
Tel. No.	Fax No.

➔	Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Fortnightly	<input type="checkbox"/> Monthly
➔	I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No				
➔	I/ We wish to receive dividend / interest directly in to my bank account as furnished through ECS [If not marked the default option would be 'Yes'] [ECS is mandatory for locations notified by SEBI from time to time ]	<input type="checkbox"/> Yes <input type="checkbox"/> No				
➔	I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No				
➔	I/We request you to send Electronic Transaction-cum-holding Statement at the email ID	<input type="checkbox"/> Yes <input type="checkbox"/> No				
➔	I/We would like to share the email ID with RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No				
➔	I/We would like to receive the Annual Report <input type="checkbox"/> Physical / <input type="checkbox"/> Electronic / <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be physical)					

**I understand that as per the guidelines prescribed by the SEBI, the client is required to share their financial information to the stock broker on periodic basis. In view of these guidelines, please find my financial details as mentioned below.**

**A. Income Range (Per Annum); (Tick where applicable)**

☐ Below Rs.1 Lac    ☐ Rs.1Lac to Rs.5Lacs    ☐ Rs.5Lacs to Rs.10Lacs    ☐ Rs.10Lacs to Rs.25Lacs    ☐ More than Rs.25Lacs

**OR NETWORTH Rs.** \_\_\_\_\_ **as on 31st March 20\_\_**

**B. Attach any of the following documents for trading in derivatives and currency derivative segment.**

☐ Copy of Demat A/c Holding statement   
 ☐ Bank A/c statement for last 6 months   
 ☐ Salary Slips   
 ☐ Copy of Income Tax Returns/Form 16   
 ☐ Any other relevant documents substantiating owner assets

**I/We would like to receive Contract Notes, bills, Statement of funds and securities, Electronic Transaction-cum-holding Statement, Annual Report etc.**

☐ Physical    ☐ Electronic **(Preferred)**

**Detail of any action taken/Proceedings initiated/Pending/Intiated by SEBI / Stock exchange/ any other Authority against the applicant/constituent or it's partners/promoters/whole time directors/authorised persons in charge of dealing in securities during the last three years.**

☐ No Action taken    ☐ Action taken    Please give details if any :.....

**Politically Exposed Person (PEP) Declaration:** Please tick if applicable (For Definition, please refer guidelines)

☐ Not Applicable    ☐ Politically Exposed Person    ☐ Related to a Politically Exposed Person

**Mode of Operation and option to receive the electronic communication by the Joint Demat Account Holders.**

**MODE OF OPERATION FOR EXECUTION OF TRANSACTIONS (Transfer, Pledge & Freeze)**

☐ Jointly    ☐ Anyone of the Holder

Consent for Communication to be received by first account holder/ all Account holder  
(Tick the applicable box. If not marked the default option would be **first holder**.)

<input type="checkbox"/> First Holder	<input type="checkbox"/> All Holder	Email
	<input type="checkbox"/> Second Holder	
	<input type="checkbox"/> Third Holder	



### Additional Details - Second Holder

Second holder's Name

#### Educational Qualification:

☐ Under Graduate ☐ Graduate ☐ Post Graduate ☐ Professional

**Detail of any action taken/Proceedings initiated/Pending/Initiated by SEBI / Stock exchange/ any other Authority against the applicant/constituent or it's partners/promoters/whole time directors/authorised persons in charge of dealing in securities during the last three years.**

☐ No Action taken ☐ Action taken

Please give details if any : \_\_\_\_\_

#### Occupation (Please tick ✓ any one and give brief details):

☐ Private / Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculture ☐ Retired

☐ Housewife ☐ Student ☐ Others (Please specify) \_\_\_\_\_

#### Name of Employer (if employed) / Establishment (if self employed / business / professional / others)

Name of Employer /  
Establishment \_\_\_\_\_ Designation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Pin Code \_\_\_\_\_

Tel. No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**I understand that as per the guidelines prescribed by the SEBI, the client is required to share their financial information to the stock broker on periodic basis. In view of these guidelines, please find my financial details as mentioned below.**

#### Income Range (Per Annum); (Tick where applicable)

☐ Below Rs.1 Lac ☐ Rs.1Lac to Rs.5Lacs ☐ Rs.5Lacs to Rs.10Lacs ☐ Rs.10Lacs to Rs.25Lacs ☐ More than Rs.25Lacs

**OR NETWORTH Rs. \_\_\_\_\_ as on 31st March 20 \_\_\_\_**

#### PEP (Politically Exposed Person) Declaration, Please tick if applicable (For Definition of Politically Exposed Person, please refer guidelines)

☐ Not Applicable ☐ Politically Exposed Person ☐ Related to a Politically Exposed Person

### Additional Details - Third holder

Third holder's Name

#### Educational Qualification:

☐ Under Graduate ☐ Graduate ☐ Post Graduate ☐ Professional

**Detail of any action taken/Proceedings initiated/Pending/Initiated by SEBI / Stock exchange/ any other Authority against the applicant/constituent or it's partners/promoters/whole time directors/authorised persons in charge of dealing in securities during the last three years.**

☐ No Action taken ☐ Action taken

Please give details if any : \_\_\_\_\_

#### Occupation (Please tick ✓ any one and give brief details):

☐ Private / Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculture ☐ Retired

☐ Housewife ☐ Student ☐ Others (Please specify) \_\_\_\_\_

#### Name of Employer (if employed) / Establishment (if self employed / business / professional / others)

Name of Employer /  
Establishment \_\_\_\_\_ Designation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Pin Code \_\_\_\_\_

Tel. No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**I understand that as per the guidelines prescribed by the SEBI, the client is required to share their financial information to the stock broker on periodic basis. In view of these guidelines, please find my financial details as mentioned below.**

#### Income Range (Per Annum); (Tick where applicable)

☐ Below Rs.1 Lac ☐ Rs.1Lac to Rs.5Lacs ☐ Rs.5Lacs to Rs.10Lacs ☐ Rs.10Lacs to Rs.25Lacs ☐ More than Rs.25Lacs

**OR NETWORTH Rs. \_\_\_\_\_ as on 31st March 20 \_\_\_\_**

#### PEP (Politically Exposed Person) Declaration, Please tick if applicable (For Definition of Politically Exposed Person, please refer guidelines)

☐ Not Applicable ☐ Politically Exposed Person ☐ Related to a Politically Exposed Person

## DP Scheme and Brokerage

### Brokerage Details

Brokerage and Levies	Scheme Code	1st LEG (%)	MIN - 1st LEG Rs. / Paise	2nd LEG (%)	MIN - 2nd LEG Rs. / Paise	Min Brok. Amt. (Option)
Cash	Trading					
	Delivery					
Derivatives	Trading					
	Future Settlement					
Derivatives	Trading					
	Option Settlement					
MFSS	Trading					
	Settlement					
SLB	Trading					
	Settlement					

Note :- An additional charges of Rs. 2.50 and statutory charges as applicable from time to time will be applicable per unique order executed through online trading platforms i.e. Mobile & Internet Trading.

### DP Tariff (Please select the scheme)

Mandatory for DP

SCHEMES →	INVESTOR <input type="checkbox"/>	ECONOMY <input type="checkbox"/>	CLASSIC(Only with Auto Pay In POA) <input type="checkbox"/>	PREMIUM <input type="checkbox"/>
A ) Documentation charges	NIL	NIL	NIL	NIL
B ) Account Maintenance** (AMC)	Rs. 400/- (Only First Year)	Rs. 300/-	Rs. 1049/-	NIL
Advance (Documentation + AMC) (A+B)	Rs. 400/-	Rs. 300/-	Rs. 1049/-	Rs. 3700/- (Deposit), Rs.3300/-, will be refunded on closing of the account
Dematerialisation	Rs. 75/- per request +Rs. 10/- per certificate	Rs. 75/- per request +Rs.10/- per certificate	Rs. 75/- per request +Rs.10/- per certificate	Rs. 75/- per request +Rs. 10/- per certificate
Transaction Charges				
Within SFSPL Off Mkt. Transaction	Min Rs.15 or .04%	Min Rs.15 or .04%	Min Rs.15 or .04%	Min Rs.15 or .04%
Within SFSPL On Mkt Transaction	Rs.35/- or .05%	Min Rs.20 or.04%	NIL	Rs. 25/-
Outside SFSPL (Sell)	Min Rs.35/or .04%	Min Rs.35/or .04%	Min Rs.35/or .04%	Min Rs.35/- or .04%
Rematerialisation	35/-	35/-	35/-	35/-
Pledge Creation	35/-	35/-	35/-	35/-
Pledge Closure	35/-	35/-	35/-	35/-
Pledge Invocation	Nil	Nil	Nil	Nil

- Transaction and holding statement will be mailed once in a month FREE of cost. ► Rates are subject to revision from CDSL.
- Statutory charges as applicable. ► Additional Statement will be charge @Rs10 per request.
- For CORPORATE Accounts\*\* additional Rs.500/- P.A. will be charged for AMC.

**F9  
XX**  
☞

First Holder Signature

**DP Details : (Mandatory for Equity Segment)**

(SUSHIL DP is mandatory for E-Broking)

**DEFAULT**

<input type="checkbox"/> CDSL	Client / B.O. ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	DP ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	DP Name	<input type="text"/>									
<input type="checkbox"/> NSDL	Client / B.O. ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	DP ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	DP Name	<input type="text"/>																	

**OPTIONAL**

<input type="checkbox"/> CDSL	Client / B.O. ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	DP ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	DP Name	<input type="text"/>									
<input type="checkbox"/> NSDL	Client / B.O. ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	DP ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	DP Name	<input type="text"/>																	

**# Bank Details : (This will be default for Trading Account of Sole / First Account Holder in whose name DP account will be open)****DEFAULT**Bank Account Type : ☐ Savings ☐ Current ☐ NRI ☐ NRE ☐ NRO ☐ Others \_\_\_\_\_

Bank Name : \_\_\_\_\_

Bank Account No.

Account Opening Date

IFSC Code (For NEFT / RTGS) :

MICR Code

Bank Branch  
Address

City

State

Pin Code

**OPTIONAL**Bank Account Type : ☐ Savings ☐ Current ☐ NRI ☐ NRE ☐ NRO ☐ Others \_\_\_\_\_

Bank Name : \_\_\_\_\_

Bank Account No.

Account Opening Date

IFSC Code (For NEFT / RTGS) :

MICR Code

Bank Branch  
Address

City

State

Pin Code

**Please Ensure**

(i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)

(ii) Photocopy of the Bank Statement having name and address of the BO

(iii) Photocopy of the Passbook having name and address of the BO, (or) (iv) Letter from the Bank.

- In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

## Annexure A: Nomination Form

Date	D	D	M	M	Y	Y	Y	Y
Sushil Financial Services Private Limited Regd. Off: 12 Homji Street, Fort, Mumbai-400001 Tel: +91-22-40778000   Email: dp@sushilfinance.com SEBI No: INZ000165135   DP No: IN-DP-504-2020 DP ID: 028900   CIN:U67120MH1991PTC063438								
Client Code / UCC								
DP ID								
Nomination Reg. No.								

I/We wish to make a nomination in my/our above mentioned Demat/Trading Account. (As per details given below)

### Nomination Details

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.




## Mandatory Details

Sr. No.	Nomination can be made upto three nominees in the account.		Details of 1 <sup>st</sup> Nominee	Details of 2 <sup>nd</sup> Nominee	Details of 3 <sup>rd</sup> Nominee
1	Name of the nominee(s) (Mr./Ms.)*				
2	Share of each Nominee	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.		
3	Relationship With the Applicant ( If Any)				
	Date of Birth of Nominee (if minor) ➡			Name of Guardian. (if Nominee is minor) ➡	

### Non Mandatory Details

(Note: Guardian details to be provided if nominee is minor along with birth certificate of minor)

Sr. No.	Details	Details of 1 <sup>st</sup> Nominee	Details of 2 <sup>nd</sup> Nominee	Details of 3 <sup>rd</sup> Nominee
4	Address of Nominee(s)/ Guardian in case of minor City / Place State & Country / PIN Code			
5	Mobile / Telephone No. of nominee(s) / Guardian in case of minor			
6	Email ID of nominee(s)/ Guardian in case of minor			
7	Nominee/Guardian(in case of minor) 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 <input type="checkbox"/> Saving Bank Account No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat A/c ID			

	Sole / 1st Holder	2nd Holder	3rd Holder
Name			
Signature	<b>F10</b> 	<b>S4</b> <b>XX</b> 	<b>T4</b> <b>XX</b> 

\* Signature of witness, along with name and address are required, if the account holder(s) affixes thumb impression, instead of signature




Name of the witness	Address	Signature



## **Annexure B: Declaration for opting-out of nomination**

(To be filled-in if Nomination Not Required)

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my/our MF Folio / 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 MF Folio / Trading / Demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the MF Folio / Trading / Demat account.

	Sole / 1st Holder	2nd Holder	3rd Holder
Name			
Signature	<b>F11</b> 	<b>S5 XX</b> 	<b>T5 XX</b> 

* Signature of witness, along with name and address are required, if the account holder(s) affixes thumb impression, instead of signature		
Name of the witness	Address	Signature

Note:

This nomination shall supersede any prior nomination made by the account holder(s), if any.

The intermediary shall provide acknowledgment of the nomination form to the account holder(s)

This space is intentionally kept blank

## **Terms And Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL**

**(Annexure 2.4 of Operating Guidelines)**

### **[SMS Alerts will be sent by CDSL to BOs for all Debits]**

#### **Definitions:**

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
2. 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. 'BO' means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

#### **Availability:**

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

#### **Receiving Alerts:**

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.

5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.

6. The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at [complaints@cdslindia.com](mailto:complaints@cdslindia.com). The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.

7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.

8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.

9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.

**Fees:**

Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.

**Disclaimer:**

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository gives no warranty with respect to the quality of the service provided by the service provider. The Depository will not be liable for any unauthorized use or access to the information and/ or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by any third person.

**Liability and Indemnity:**

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

**Amendments:**

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

**Governing Law and Jurisdiction:**

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in Mumbai.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. I/ We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purposes of generating SMS Alerts by service provider, to be sent to the said mobile number.

I/We have read and understood the terms and conditions mentioned above and agree to abide by them and any amendments thereto made by the depository from time to time. I/ we further undertake to pay fee/ charges as may be levied by the depository from time to time.

I / We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the BOs would be required to take up the matter with their DP.

I/We am/ are aware that mere acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service.

I/We provide the following information for the purpose of REGISTRATION / MODIFICATION (Please cancel out what is not applicable).

**B.O. ID**

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

Sole / First Holder's Name : \_\_\_\_\_

Second Holder's Name : \_\_\_\_\_

Third Holder's Name : \_\_\_\_\_

**Mobile Number on which messages are to be sent**

+91										
-----	--	--	--	--	--	--	--	--	--	--

Above mobile number is registered in the name of Mr. / Mrs. \_\_\_\_\_

and related to me as ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parents

**Email ID on which communications are to be sent**

--

Above Email ID is registered in the name of Mr. / Mrs. \_\_\_\_\_

and related to me as ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parents

(Please write only ONE valid email ID on which communication; if any, is to be sent)

F12  
XX  


**First Holder's Signature**

S6  
XX  


**Second Holder's Signature**

T6  
XX  


**Third Holder's Signature**

**Date**

**Place**

**Registration with Other Broker / Exchanges**

	Broker Name	Exchange	Client Code
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>

The information furnished above is true to the best of my/our knowledge and belief. I/We undertake to inform changes if any of the above points in writing immediately to the Broker/Exchange

**Details under FATCA and CRS (see instructions)**

(Please consult your professional tax advisor for further guidance on your tax residency, if required)

Particulars	1st Holder	2nd Holder	3rd Holder
Name			
PAN			
Nationality			
City of birth			
Country of birth			
Occupation			

Tax residence declaration – tick any one, as applicable to you:

☐ I am a tax resident of India and not resident of any other country

Or

☐ I am a tax resident of the country/ies mentioned in the table below

Particulars	Country <sup>#</sup>	Tax Identification Number <sup>%</sup>	Identification Type (TIN or Other <sup>%</sup> , please specify)
1st Holder			
2nd Holder			
3rd Holder			

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

<sup>%</sup> In case Tax Identification Number is not available, kindly provide functional equivalent<sup>\$</sup>

**Certification**

I have understood the information requirements of this Form (read along with the FATCA-CRS Instructions) and hereby confirm that the information provided by me on this Form is true, correct, and complete. I also confirm that I have read and understood the FATCA-CRS Terms and Conditions and hereby accept the same.

<b>Name</b>	
-------------	--

**F13  
XX**  


<b>Date</b>		<b>Place</b>	
-------------	--	--------------	--

--

First Holder Signature

**FATCA Terms and Conditions**

**Details under FATCA-CRS/Foreign Tax Laws:** Towards compliance with tax information sharing laws, such as FATCA and CRS, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Towards compliance with such laws, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).



## FATCA-CRS Instructions

If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Please note that you may receive more than one request for information if you have multiple relationships with Sushil Financial Services Private Limited. or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA/ CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	<ol style="list-style-type: none"> <li>Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes;</li> <li>Non-US passport or any non-US government issued document <b>evidencing nationality or citizenship</b> (refer list below); <b>AND</b></li> <li><b>Any one</b> of the following documents: <ol style="list-style-type: none"> <li>Certified Copy of "Certificate of Loss of Nationality or</li> <li>Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth</li> </ol> </li> </ol>
Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> <li>Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; <b>and</b></li> <li>Documentary evidence (refer list below)</li> </ol>
Telephone number in a country other than India	<p><b><i>If no Indian telephone number is provided</i></b></p> <ol style="list-style-type: none"> <li>Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; <b>and</b></li> <li>Documentary evidence (refer list below)</li> </ol> <p><b><i>If Indian telephone number is provided along with a foreign country telephone number</i></b></p> <ol style="list-style-type: none"> <li>Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; <b>OR</b></li> <li>Documentary evidence (refer list below)</li> </ol>
Standing instructions to transfer funds to an account maintained in a country other than India (other than depository accounts)	<ol style="list-style-type: none"> <li>Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; <b>and</b></li> <li>Documentary evidence (refer list below)</li> </ol>
Power of attorney/ signatory authority granted to a person with address in a country other than India	<ol style="list-style-type: none"> <li>Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; <b>and</b></li> <li>Documentary evidence (refer list below)</li> </ol>

List of acceptable **documentary evidence** needed to establish the residence(s) for tax purposes:

- Certificate of residence issued by an authorized government body\*
- Valid identification issued by an authorized government body\* (e.g. Passport, National Identity card, etc.)

**\* Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.**

**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.

**F14**  
**XX**  


Client  
Signature

### To the Esteemed Customer,

We, Sushil Financial Services Private Limited (SFSPL) Registered with SEBI as a Research Analyst referred here as (RA) having SEBI Registration No. INH000000867 dated 01-07-2015 and BSE Research Analyst Administration and Supervisory Body (RAASB) Enlistment No.5051. Minimum Mandatory Terms and Conditions related to our Research Services, along with the Most Important Terms and Conditions (MITC), including the associated rights and obligations, are outlined below.

SFSPL is also registered as a Stock Broker with SEBI having SEBI Registration No. INZ000165135, Member of BSE/NSE.

This document incorporates the minimum mandatory provisions contained in the SEBI circular SEBI/HO/MIRSD/MIRSD-PoD-1/P/CIR/2025/004 dated January 08, 2025 and MITC as per SEBI/HO/MIRSD/MIRSD-PoD/P/CIR/2025/20 dated February 17, 2025 and relevant amendments to the SEBI (Research Analysts) Regulations, 2014 ("RA Regulation") as applicable from time to time.

By subscribing to the research services and research reports as defined as per Regulation 2 of RA Regulation, clients acknowledges and agrees to the following terms and conditions:

### Terms and Conditions for Research Services

**1. Availing /Acceptance of Research Services:** By subscribing and acceptance to our research services, you confirm that you have elected to subscribe and avail yourself of these research services at your sole discretion. RA confirm that all research services shall be provided in accordance with the applicable provisions of the SEBI (Research Analyst) Regulations, 2014 ("RA Regulation") and other relevant laws as applicable from time to time.

**2. Obligations on Research Analyst (RA):** RA is bound by SEBI Act /RAASB, RA Regulations, and all the relevant rules and regulations of SEBI, and relevant notifications of Government, as may be in force, from time to time.

**3. Client Information and KYC:** The client must provide accurate and complete details as may be required by the RA in the prescribed format and submit necessary supporting documents for Know Your Client (KYC) Compliance including any other documents required, as may be made required by RAASB/SEBI from time to time.

RA shall collect, store, upload and check KYC records of the clients with KYC Registration Agency (KRA) as specified by SEBI from time to time.

**4. Standard Terms of Service::** "I /We have read and understood the terms and conditions applicable to a research analyst as defined under regulation 2(1) (u) of the SEBI (Research Analyst) Regulations, 2014, including the fee structure.

I/We are subscribing to the research services for our own benefits and consumption, and any reliance placed on the research report provided by research analyst shall be as per our own judgement and assessment of the conclusions contained in the research report.

I/We understand that -

- i. Any investment made based on the recommendations in the research report are subject to market risk.
- ii. Recommendations in the research report do not provide any assurance of returns.
- iii. There is no recourse to claim any losses incurred on the investments made based on the recommendations in the research report."

Declaration of RA that:

- i. We, Sushil Financial Services Private Limited (SFSPL) Registered with SEBI as a RA pursuant to the SEBI (Research Analysts) Regulations, 2014 having SEBI Registration No. INH000000867 dated 01-07-2015 and BSE (RAASB) Enlistment No.5051.
- ii. RA has registration and qualifications required to render the services contemplated under the RA Regulations, and the same are valid and subsisting;
- iii. RA services provided by us do not conflict with or violate any provision of law, rule or regulation, contract, or other instrument to which we are party or to which any of us property is or may be subject;
- iv. The maximum fee that may be charged by RA is 1.51 lakhs per annum per family of client.
- v. The recommendations provided by RA do not provide any assurance of returns.

### Most Important Terms and Conditions (MITC)

1. These terms and conditions, and consent thereon are for the research services provided by the RA and RA cannot execute/carry out any trade (purchase/sell transaction) on behalf of the client. Thus, the clients are advise not to permit RA to execute any trade on their behalf.

2. **Consideration and mode of payment:** The client shall duly pay to RA, the agreed fees for the services that RA renders to the client and statutory charges, as applicable. Such fees and statutory charges shall be payable through the specified manner and mode(s)/ mechanism(s).

The fee charged by RA to the client will be subject to the maximum of amount prescribed by SEBI/ RAASB from time to time (applicable only for Individual and HUF Clients).

For corporates, institutions, or accredited investors, fees may be negotiated bilaterally without the above limit, subject to fairness and reasonableness.

Note:

2.1. The current fee limit is Rs.1,51,000/- per annum per family of client for all research services of the RA.

2.2. The fee limit does not include statutory charges.

2.3. The fee limits do not apply to a non-individual client / accredited investor.

RA may charge fees in advance if agreed by the client. Such advance shall not exceed the period stipulated by SEBI; presently it is one year. In case of pre-mature termination of the RA services by either the client or the RA, the client shall be entitled to seek refund of proportionate fees only for unexpired period. RA shall not charge any breakage fee.

Fees to RA may be paid by the client through any of the specified modes like cheque, online bank transfer, UPI, etc. Cash payment is not allowed. Optionally the client can make payments through Centralized Fee Collection Mechanism (CeFCoM) managed by BSE Limited (i.e. currently recognized RAASB). If and when available, we will inform you of the optional Centralised Fee Collection Mechanism ("CeFCoM") and will be provided with necessary guidance and instruction on an optional 'Centralised Fee Collection Mechanism for RA' (CeFCoM) to facilitate fee payment.

3. **Risk factors:** Client has understood that investment in securities market are subject to market risks. Client has agrees that they have read all the disclaimers, disclosures, terms and conditions related documents carefully before investing. Client may consult a qualified financial advisor to understand suitability.

Any investment made based on recommendations in research reports are subject to market risks, and recommendations do not provide any assurance of returns. There is no recourse to claim any losses incurred on the investments made based on the recommendations in the research report. Any reliance placed on the research report provided by the RA shall be as per the client's own judgement and assessment of the conclusions contained in the research report.

The SEBI registration, Enlistment with RAASB, and NISM certification do not guarantee the performance of the RA or assure any returns to the client.

4. **Conflict of interest:** The RA is required to abide by the applicable regulations/ circulars/ directions specified by SEBI and RAASB from time to time in relation to disclosure and mitigation of any actual or potential conflict of interest. The RA will endeavor to promptly inform the client of any conflict of interest that may affect the services being rendered to the client. Full disclosures/disclaimers, shall be provided in each research report or at the time of giving a recommendation.
5. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. No scheme of this nature shall be offered to the client by the RA.
6. The RA cannot guarantee returns, profits, accuracy, or risk-free investments from the use of the RA's research services. All opinions, projections, estimates of the RA are based on the analysis of available data under certain assumptions as on the date of preparation/publication of research report.
7. **Termination of service and refund of fees:** The client agrees that RA may suspend or terminate rendering of research services to client on account of suspension/ cancellation of registration of RA by SEBI and shall refund the residual amount to the client. In case of suspension of certificate of registration of the RA for more than 60 (sixty) days or cancellation of the RA registration, RA shall refund the fees, on a pro rata basis for the period from the effective date of cancellation/ suspension to end of the subscription period.
8. **Grievance Redressal and dispute resolution:**

Step 1: Any grievance related to (i) non receipt of research report or (ii) missing pages or inability to download the entire report, or (iii) any other deficiency in the research services provided by RA, shall be escalated promptly by the client to the following Designated Person as per ('Grievance Redressal / Escalation Matrix') available on our website.

Designated Person for Grievance: Mr. Suresh Nemani

Contact Number: 022 - 40935000 | Email id: suresh.nemani@sushilfinance.com

Grievance Email id: compliance@sushilfinance.com

RA shall be responsible to resolve grievances within 7 (seven) business working days or such timelines as may be specified by SEBI under the RA Regulations. RA shall redress grievances of the client in a timely and transparent manner.

Any dispute between the RA and his client may be resolved through arbitration or through any other modes or mechanism as specified by SEBI from time to time.

Step 2: If the resolution is unsatisfactory, the client can also lodge grievances through SEBI's SCORES platform at [www.scores.sebi.gov.in](http://www.scores.sebi.gov.in)

Step 3: The client may also consider the Online Dispute Resolution (ODR) through the Smart ODR portal at <https://smartodr.in>.

9. **Mandatory Notice:** Clients shall be requested to go through Do's and Don'ts while dealing with RA as specified in SEBI master circular no. SEBI/HO/MIRSD-POD- 1/P/CIR/2024/49 dated May 21, 2024 or as may be specified by SEBI from time to time.

❖ **Do's**

- i. Always deal with SEBI registered Research Analyst.
- ii. Ensure that the Research Analyst has a valid registration certificate.
- iii. Check for SEBI registration number.
- iv. Please refer to the list of all SEBI registered Research Analysts which is available on SEBI website in the following link:  
<https://www.sebi.gov.in/sebiweb/other/OtherAction.do?doRecognisedFpi=yes&intmId=14>
- v. Always pay attention towards disclosures made in the research reports before investing.
- vi. Pay your Research Analyst through banking channels only and maintain duly signed receipts mentioning the details of your payments.
- vii. Before buying securities or applying in public offer, check for the research recommendation provided by your Research Analyst.
- viii. Ask all relevant questions and clear your doubts with your Research Analyst before acting on the recommendation.
- ix. Inform SEBI about Research Analyst offering assured or guaranteed returns.

❖ **Don'ts**

- i. Do not provide funds for investment to the Research Analyst.
  - ii. Don't fall prey to luring advertisements or market rumors.
  - iii. Do not get attracted to limited period discount or other incentive, gifts, etc. offered by Research Analyst.
  - iv. Do not share login credential and password of your trading and demat accounts with the Research Analyst
10. Clients are required to keep contact details, including email id and mobile number/s updated with the RA at all times.
11. The RA shall never ask for the client's login credentials and OTPs for the clients Trading Account Demat Account and Bank Account. Never share such information with anyone including RA. You shall keep your login information (including but not limited to username, password) confidential. You shall be liable for any unauthorized use of your account resulting from negligence or sharing of your credentials.
12. **Use of Artificial Intelligence ('AI') tools in RA services:** We may infrequently use Artificial Intelligence (AI) tools in our research services to enhance the quality and efficiency of the recommendations provided to clients which is in accordance with Regulation 24(7) of the SEBI (Research Analyst) Regulations, 2014. We may utilize certain AI tools to assist with transcript summarization, data retrieval (including publicly available information), analysis, company updates, and, to some extent, the refinement of research report content and presentation. All conclusions and opinions expressed in the research report are those of the Analyst, based on independent research and rational.
13. **Additional clauses:**
- You agree that you shall not reproduce, distribute, copy, sell, rent, or otherwise exploit our research content.
  - Any unauthorized use of our services shall constitute grounds for termination of Services and may lead to legal action against you.
  - All research reports and related information are confidential and intended solely for client use.
  - You agree to indemnify and hold harmless the RA, its officers, employees, and affiliates from any and all claims, damages, losses, or liabilities arising due to breach of these T&C or violation of any regulations/ law, unauthorized or improper use of your account.
  - Please refer and access research related Disclaimer & Disclosures on the link <https://www.sushilfinance.com/Disclaimer/research>

Name	
------	--

F15  
XX  
☞

--

To,  
**Sushil Financial Services Private Limited**  
 Regd. Office: 12, Homji Street, Fort, Mumbai - 400 001.

Date : \_\_\_\_\_

Dear Sir,

**Subject : KYC Document Booklet & Declaration for opening Trading and Depository Account**

1. I/we have furnished all the details required in the KYC form as per SEBI/Exchange/DP requirements. I confirm having read/been explained and understood the contents of the KYC documents which are provided to me in separate booklet. The KYC document booklet includes the following:
  - a) Rights and Obligations of the parties (including additional rights and obligations in case of internet and wireless technology based trading) prescribed by SEBI and Stock exchanges
  - b) Uniform Risk Disclosure Documents (RDD) prescribed by SEBI and Stock exchanges
  - c) Guidance note detailing Do's and Don'ts for trading in the Stock Exchanges
  - d) Policies and Procedures as prescribed by SEBI)
  - e) Rights and obligation of Beneficial Owner and Depository participant as prescribed by SEBI and Depositories to clients
  - f) Instruction Checklist for opening both trading and demat account
  - g) Internet & Wireless Technology based Trading facility provided stock brokers to clients
  - h) General Information for both trading & demat account
  - i) KYC Document Booklet and Declaration
  - j) Investor Charter of DP and Stock Broker
2. I/we understand and agree that any amendment/modifications as required by the exchanges/DP and/or regulators will be applicable to me at all point of time.
3. I/we understand that the KYC document booklet is in accordance of the exchanges and/or SEBI/DP requirements applicable for opening trading/DP account.
4. I/we have received the booklet with above mentioned contents.
5. I/we 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 termination and suitable action.
6. I/we confirm having read/been explained and understood the contents of documents in policy and procedure, Rights and obligations documents, Risk disclosure documents and demat tariff sheet and I/we do hereby agree to bound by such provisions as outlined in these documents. I/we have also been informed that a standard set of documents has been displayed for information on Stock Broker's / Depository Participant's designated website.
7. I/we have received and read copy of all above documents and agree to abide by the same and by the byelaws and all rules and regulations as in force from time to time.
8. I / We also agree to furnish such other information and/or documents as and when you and/ or the Exchanges and/or the SEBI may require from me /us. I/ We agree that if I/We fail to give such information, you shall have the right to cancel my /our registration and debar me/us from doing business both in the Capital Market (Cash) and Derivative Market (F&O) / SLBM and Mutual Fund Segment of the Exchanges. I/We am/are aware that I/we may be held liable for the appropriate action.
9. As I/we have submitted my /our address with P.O Box No.as Permanent and/or Correspondence address hence I/we hereby undertake to provide our new residential address to Sushil Financial Services Pvt Ltd whenever there is a change in my/our residential address **(Applicable for NRI Clients)**.
10. I /We hereby declare that I / We have complied with, and will continue to comply with FEMA regulations and other applicable laws as per the requirement. **(Applicable only for NRI clients)**

**F16  
XX**  


\*First Holder Signature

**S7  
XX**  


\*\*Second Holder Signature

**T7  
XX**  


\*\*Third Holder Signature



## Voluntary Documents

Date :

To,  
Sushil Financial Services Private Limited  
Regd. Office: 12, Homji Street,  
Fort, Mumbai - 400 001.

**Sub : Authority Letter for Running Account**

☐ Yes

☐ No

1. I/We hereby state that I/we are aware of the norms relating to Pay-in & Pay-out of Funds and Securities. In order to facilitate operations and banking convenience, I/We hereby authorize you to maintain my/our fund account with you on a running account basis instead of daily settlement of funds due to me/us. Further, the pay-out of funds may be retained by you for the purpose of margins/exposures/collateral/any other obligations due to you. I/We also understand and agree that any credit amount lying with you will not attract any interest. I/We further understand that in case of non-payment of dues by me/us upto T+1 day, the securities received towards payout which are not paid fully by me/us, those securities may be transferred to my/our demat accounts and auto pledge (without any specific instruction from me/us) shall be created in favour of "CLIENT UNPAID SECURITIES PLEDGE ACCOUNT (CUSPA)" as applicable from time to time. Further if at any time the I/we fails to meet the funds pay-in obligation within five trading days (5) from pay-out day(T+1) as per prescribed guidelines, then you shall liquidate the securities in the market to recover the debits/dues in my/our account including the penalty/interest /DP charges/ any other charges etc.
2. On my/our specific request you may release the funds due to me/us. While doing the funds settlement, you may retain the funds towards any outstanding obligations including such funds towards any other unbilled services/charges etc. on the settlement date and may also retain the funds expected to meet margin obligations calculated in the manner specified by the SEBI/ exchanges. The excess funds may be released to me /us at the time of funds settlement as per my/our given preference.
3. I/We hereby agree that you will settle my/our account of funds at least once in a calendar quarter/month. While settling the account you will send, in physical or electronic form, the "Retention Statement". I/we agree to bring to your notice any dispute arising from the 'Retention Statement' or settlement within 30 days from the date of settlement, failing which it is agreed by me/us that the "Retention Statement" as issued by you is proper and correct.

My/Our preference for actual settlement of Funds is a least: Calendar

Once in Calendar Quarter ☐ Once in a Calendar Month ☐

4. I/We understand that I/we may revoke this Authority at any point of time.
5. I/We shall be liable for all losses, damages and actions which may arise as a consequences of your adhering to and carrying out my/our directions given above and further agree that you shall not be liable for any claim for loss or profit or for any consequential, incidental, special or exemplary damages, caused by retention of such Funds in this regard.

Date	
------	--

**F17  
XX**  


--

First Holder Signature

## Voluntary Documents

- 1) **Sub: Authorisation for receipt of contract notes, bills, statement of funds / DP statement and securities etc. in digitally signed electronic form.** ☐ Yes ☐ No

I/We understand that, I/we have the option to receive the contract notes, bills, statement of funds and securities etc. in any form (Physical or Electronic). I/We agree to receive contract notes, bills, statement of funds and securities etc. in electronic form for all trades /transactions executed through you at the email id(s) registered with you, as per the below mentioned terms and conditions:

1. My/our non-verification or non-accessing of my/our email on regular basis shall not be a reason for dispute at any time.
2. I/We confirm that contract notes, bills, statement of funds and securities etc. sent by you from time to time to my/our email ids shall be deemed to have been delivered to me and it shall be presumed that the same is in order.
3. Non-receipt of bounced mail notification by you shall amount to delivery at the e-mail Id(s) registered with you.
4. In case of any failure in system at your end, contract notes, bills, statement of funds and securities etc. will be issued in physical form and sent to my/our correspondence address, which shall be binding on me/us.
5. I/We hereby confirm that any change in e-mail id will be communicated through duly signed physical letter to you. However, if I/we am/are an internet client then in that event the request for change in email id(s) can be made by me/ us through a secured access using client specific user id and password.

I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions as given above.

- 2) **Sub : Registration for availing SMS Facility**

Yes ☐

No ☐

I/We hereby confirm that my/our Mobile No. as mentioned in KYC and hereby authorize you to send service messages / information / alerts / calls pertaining to my/our trading Account maintained with you.

I/We further authorise you to send all research, recommendations and follow-ups through SMS on my/our above mentioned mobile number.

I/We agree further that above facility offered to me/us is in addition to the existing usual facilities and in no way I/we will hold the Company responsible for the late-receipt or non-receipt etc. of the above.

I/We also agree that I/we shall be solely responsible for all trading done by me/us, based upon the recommendations, sent to me/us through above said service and I/we also understand that the information contained therein does not constitute an offer to Buy or Sell any securities and such information shall be used by me/us at my/our own risk therefore, & the Company or the Employees of the Company shall be in no way responsible for any direct or indirect losses arising from the use thereof.

- 3) **Authority letter for Adjustment of funds and securities in Different Segment & Exchanges**

Yes ☐

No ☐

I/We shall be buying/selling/trading in securities and derivatives instruments across various segments of various Exchanges through your company and for the consideration thereof, shall have to make payments and a situation may emerge when accounts may show a debit balance in my/our running account with a segment of an Exchange and a credit balance in my/our running account with another segment of an Exchange. With a view to efficiently utilize the funds, you are hereby authorized to transfer the surplus funds from one segment to another segment of an Exchange/your company, whenever the need arises.

I/We further authorize you to adjust/appropriate any/all my/our delivery of securities on inter- settlement basis for all the instances where any/all securities purchased by me/us are still lying with you on my/our account. I / We agree that such inter settlement adjustment may be in the same Stock Exchange or across the Exchanges.



## Voluntary Documents

4) Sub: Securities Trading Using Wireless Technology Yes ☐ No ☐

I / We am / are registered as your client and agreed to policy & procedure as prescribed by Sebi for Internet based trading for the purpose of trading in the Capital Market segment, Futures & Options segment of Bombay Stock Exchange Ltd. and National Stock Exchange Ltd.

I / We am / are interested in carrying securities trading through use of wireless technology which shall include devices such as mobile phone, laptop with data card, etc using Internet Protocol (IP).

I / We understand that the terms and conditions applicable to Internet based trading will also be applicable to securities trading through use of wireless technology. I / We am / are made aware by you regarding all the possible risks, responsibilities and liabilities associated with securities trading using wireless technology.

I / We understand that you shall provide information with respect to the addresses of Internet web site / web page where detailed information would be available about securities trading done through the use of wireless technology.

We agree that the information sent by you on your website would be deemed to be a valid delivery of such information by you. The gist of aforesaid information regarding order and trade confirmation shall also be provided to me / us on the device used for securities trading through the use of wireless technology. However detailed information will be available on your website.

I / We am / are aware that authentication technologies and strict security measures are required for the securities trading using wireless technology through order routed system and undertake to ensure that our password is not revealed to any third party.

I / We therefore request you to enable me / us for carrying securities trading through use of wireless technology.

Date		Place	
------	--	-------	--

F18  
XX  


--

First Holder Signature

This space is intentionally kept blank

## Voluntary Documents

To,  
**Sushil Financial Services Private Limited**  
Regd. Office: 12, Homji Street, Fort, Mumbai - 400 001.

### Sub: Mutual Fund Service System (MFSS) facility

I/We am/are registered as your client and have agreed to policy & procedure as prescribed by Sebi for the purpose of trading in the Capital Market segment of Bombay Stock Exchange Limited (BSE). We am/are interested in availing the MFSS facility of the Exchange for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the MFSS of the Exchange.

For the purpose of availing the MFSS facility, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of MFSS and I/we further confirm that the details contained in same remain unchanged as on date.

I/We are willing to abide by the terms and conditions as mentioned in the Circular dated 2nd December 2009 of BSE and 24th November 2009 of NSE and as may be specified by the Exchange from time to time in this regard.

I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India and Association of Mutual Funds of India (AMFI).

I/We shall read and understand the contents of the of the Scheme Information Document and Key Information Memorandum, addenda issued regarding each Mutual Fund Schemes with respect to which I/we choose to subscribe/redeem. I/We further agree to abide by the terms and conditions, rules and regulations of the Mutual Fund Schemes.

I/We therefore request you to register me/us as your client for participating in the MFSS.

### Undertaking cum Authority Letter

1. You are authorized to transfer money kept as Initial Margin to Mark to Market Margin or vice versa as and when required by you. I / We am/are also liable to pay special margin or such other margin, as considered necessary by you or the Exchange from time to time.
2. I/We authorize you to charge interest at the rate as 21% p.a. for any delay in the payment of obligation, margin or any other sums due to you.
3. I/We request you to consider my/our telephonic or Oral or SMS or any other electronic mode instructions for order placing/ order modification/order cancellation as a written instruction and give us all the confirmation on telephone or Oral or SMS or any other electronic mode unless instructed otherwise in writing. I/We am/are getting required details from contract issued by you.
4. I/We agree that the you shall not be liable or responsible for non execution of the orders placed through trading terminals/ website or through any other mode due to the failure of any system or link or any other reason whatsoever and I/We understand that you reserve the right of refusing to execute any particular transaction.
5. I/We acknowledge receipt of intimation with regards to your business volumes comprising of client as well as proprietary trades.
6. I/We acknowledge receipt of the Cash, Future & Options and Currency Derivatives Risk Disclosure Documents and have understood the same.

### Disclosure for information for pro account trading.

I acknowledge the receipt of information given above by M/s. Sushil Financial Services Private Limited. that they do client based trading and Pro-Account trading.

### Client Defaulter Declaration

I / We do hereby declare that I have not been involved in any terrorist activity and I have not been declared as defaulter or my name is not appearing in defaulter database as per SEBI / Various Exchanges / Regulatory bodies / CIBIL / (Credit Information Bureau of India Ltd.) / United Nation Securities Council etc.

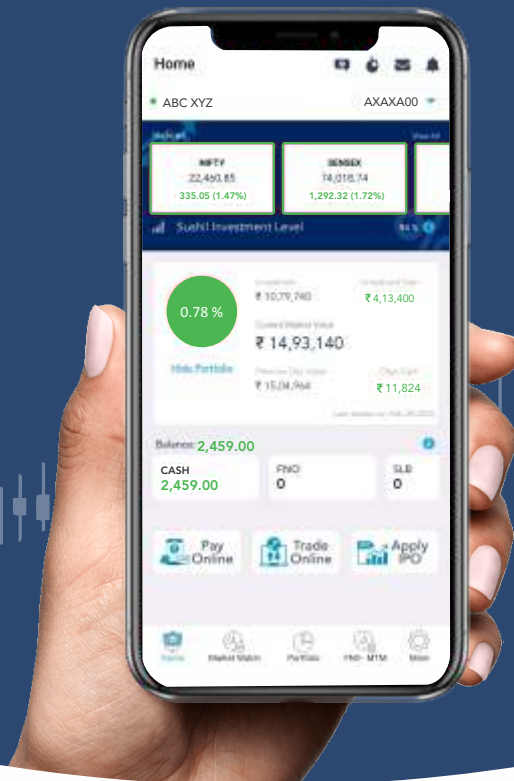
I further declare that the above mentioned declaration / statement is true and correct.

Date		Place	
------	--	-------	--

**F19  
XX**  


First Holder Signature

# STAY CONNECTED TO YOUR INVESTMENTS LIKE NEVER BEFORE WITH **SUSHIL CONNECT**



Portfolio Gain / Loss  
– Live With Market



Real Time Trade  
Confirmation



Multiple Family  
Portfolio View



Portfolio Analysis



Fund Withdrawal



Research Calls



Tax Implication-  
Capital Gain



FNO MTM  
Summary



Scripwise  
Transaction  
Summary



**SUSHIL CONNECT**



Available on the  
App Store



GET IT ON  
Google Play



Follow us on:





## Sushil Financial Services Private Limited.

CIN No. U67120MH1991PTC063438

SEBI Registration No: INZ000165135

Research Analyst SEBI Registration No.- INH000000867

Member of Bombay Stock Exchange Ltd. (BSEL)

Member of The National Stock Exchange of India Limited (NSEIL)

Depository Participant of Central Depository Services (I) Ltd. (CDSL)

SEBI Registration No: IN-DP-504-2020

IPO Distributor. AMFI Registered Mutual Fund Distributor ARN No. 77875

Registered Since : 04-Jan-2010 Valid till : 03-Jan-2027.

## Investor Services E-mail ID & Contact

Exchange (S)	Email ID	Contact No.
BSE	is@bseindia.com	022-22728517
NSE	ignse@nse.co.in	18002660058
CDSL	complaints@cdslIndia.com	1800-22-5533

Regd. Off / Correspondence: 12, Homji Street, Fort, Mumbai 400 001. India

Tel: +91-022-4093 6000 Fax: 91-22-2266 5758

Email: [info@sushilfinance.com](mailto:info@sushilfinance.com) | Website: [www.sushilfinance.com](http://www.sushilfinance.com)

Grievance Email: [compliance@sushilfinance.com](mailto:compliance@sushilfinance.com)

Name of Compliance Officer: Mr. Suresh Nemani

Email: [suresh.nemani@sushilfinance.com](mailto:suresh.nemani@sushilfinance.com)

Tel: +91-22-40935000

For any assistance related to account opening  
kindly connect us on

[wecare@sushilfinance.com](mailto:wecare@sushilfinance.com) | 022 4077 8083/87/88