



## INSTRUCTIONS / CHECK LIST

1. Additional documents in case of trading in derivatives segments- illustrative list:

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income -Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement	Bank account statement for last 6 months
Any other relevant documents substantiating ownership of assets	Self-declaration with relevant supporting documents

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

2. Copy of cancelled cheque leaf/pass book/bank statement specifying name of the constituent, MICR Code or/ and IFSC Code of the bank should be submitted.
3. Demat master or recent holding statement issued by DP bearing name of the client.
4. For individuals:
  - a. Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office.
  - b. In case of non-resident clients, employees at the stock broker's local office, overseas can do 'in-person' verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy/Consulate General in the country where the client resides may be permitted.
5. For non-individuals:
  - a. Form need to be initialized by all the authorized signatories.
  - b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.

**THIS INFORMATION IS THE SOLE PROPERTY OF THE TRADING MEMBER/ BROKERAGE HOUSE AND WOULD NOT BE DISCLOSED TO ANYONE UNLESS REQUIRED BY LAW OR EXCEPT WITH THE EXPRESS PERMISSION OF CLIENTS.**

**Upmove Financial Technologies Services is engaged in client based business as well as in proprietary trading.**

This disclosure is made in pursuance of SEBI Circular No. SEBI/MRD/SE/ Cir-42/2003 dated Nov 19, 2003

## INDEX

Sr. No.	Name of the Document	Brief Significance of the Document	Pg. No.
<b>MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI &amp; EXCHANGES</b>			
1.	Account Opening Form	<p><b>A.</b> KYC form - Document captures the basic information about the constituent and an instruction/check list.</p> <p><b>B.</b> Document captures the additional information for Trading and Demat Account along with Terms and Conditions receiving SMS alert from CDSL.</p>	1-12
2.	Tariff sheet	Document detailing the demat fee schedule & rate/ amount of brokerage charges levied on the client for trading on the stock.	8-12
<b>VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER</b>			
3.	Declaration	Receipt & read of Rights & Obligation, Guidance Note, RDD, Policies & Procedure & PMLA	13
4.	Letter For Authorised Person All Exchanges	Letter of Authority for Trading & Settlement Account	14
5.	Consent to receive trade/transaction alerts	A facility provided by Exchanges to receive Trade/ Transaction alerts through e-mails/SMS	15
6.	Consent to receive the Contract Note trade confirmations	A mandatory by the client to receive Contract Notes, trade confirmations in electronic form instead of physical form	16
7.	Authority to retain securities and funds	An authority given by the client to member to hold his/her securities and funds payout beyond statutory time limit for operational convenience	17
8.	Request & Authority for Placement & Withdrawal of Securities Collateral	An authority given by the client to hold his/her securities as collateral	18
9.	HUF Declaration	Forms of Declaration to be given by Karta of HUF	19
10.	Document for Mutual Fund Service System	To avail MFSS facility	20-21
11.	FACTCA/ CRS Declaration Form	Foreign Account Tax Compliance Act Declaration/ Common Reporting Standard	23-28
<b>MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI &amp; EXCHANGES</b>			
12.	Rights and Obligations	Rights & Obligations of stock broker/trading member, sub-broker and client	1-6
13.	Risk Disclosure Document (RDD)	Document detailing Risks associated with dealing in the securities market	7-10
14.	Guidance Note	Document detailing do's and don'ts for trading on exchange, for the education of the investors	11-12
15.	Policies & Procedures	Various policies and procedures applied by the Member	13-15
16.	Information on Prevention of Money Laundering Act 2002, (PMLA)	Brief note on PMLA for Client Information	16-17
17.	Format of Declarations	Format of Declaration to be given by Partnership Firm/ Proprietorship Firm/ HUF	18
18.	Format of Board Resolution in case of Corporate	Format of Board Resolution in case of Corporate	19

## DETAILS OF THE TRADING MEMBER

Name of the Stock Broker/ Trading Member	<b>Upmove Financial Technologies Services</b>			
SEBI Registration No. and Date	BSE	INZ000158323 Dated: 3/11/2017		
	NSE			
Member ID & Clearing No.	BSE	Capital Market	6694	Dated: 10/7/2018
	NSE	Capital Market	90120	Dated: 2/2/2018
		Future & Options	90120	Dated: 16/3/2018
Name of the Clearing Member	IL&FS Securities Services Limited SEBI Registration No. INF231133630 (old) SEBI Single Registration No. INZ000163538			
Registered Office	Address	Saraswati, Plot No. 91/95, RDP-1, Link Road, Gorai, Borivali (W), Mumbai -400 091		
	Phone	7045804339 / 7045804374		
	Email	helpdesk@upmovefintech.in		
Details of Compliance Officer	Name	Mr. Shailesh Ghadshi		
	Phone	9769014609		
	Email	ghadshi.shailesh@gmail.com		
Details of CEO	Name	Mr. Vishal Pokharna		
	Phone	9833124660		
	Email	vishal@upmovefintech.in		

For any grievance/dispute please contact **Upmove Financial Technologies Services** on the above address or email at **[grievancecell@upmovefintech.in](mailto:grievancecell@upmovefintech.in)** or call on 7045804339.

In case you are not satisfied with our response, you may contact the concerned Stock Exchange/ Depository at the following:

Exchange	Web Address	Contact No.	Web Address
BSE	<a href="http://www.bseindia.com">www.bseindia.com</a>	91-22-22728097	<a href="mailto:is@bseindia.com">is@bseindia.com</a>
NSE	<a href="http://www.nseindia.com">www.nseindia.com</a>	1800 22 0051	<a href="mailto:ignse@nse.co.in">ignse@nse.co.in</a>

You can also lodge your grievances with SEBI at **<http://scores.gov.in>**

For any queries, feedback or assistance, please contact SEBI Office on Toll Free Helpline at 1800 22 7575/ 1800 266 7575

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



First Holder

Please fill in ENGLISH and in BLOCK LETTERS

Application No. :

## A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (As appearing in supporting identification document).

Name

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Father's/Spouse Name

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

2. Gender  Male  Female B. Marital status  Single  Married C. Date of Birth 

d	d	/	m	m	/	y	y	y	y
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3. Nationality  Indian  Other (Please specify) \_\_\_\_\_

4. Status Please tick (✓)  Resident Individual  Non Resident  Foreign National (Passport Copy Mandatory for NRIs & Foreign Nationals)

5. PAN \_\_\_\_\_ Please enclose a duly attested copy of your PAN Card

Aadhaar Number, if any: \_\_\_\_\_

6. Proof of Identity submitted for PAN exempt cases Please Tick (✓)

UID (Aadhaar)  Passport  Voter ID  Driving Licence  Others \_\_\_\_\_ (Please see guideline 'D' overleaf)

PHOTOGRAPH

Please affix the recent passport size photograph and sign across it

Signature

## B. Address Details (please see guidelines overleaf)

1. Address for Residence/Correspondence


City / Town / Village

Pin Code

State

Country

2. Contact Details

Tel. (Off.)	(ISD)	(STD)										Tel. (Res.)	(ISD)	(STD)
Mobile	(ISD)	(STD)										Fax	(ISD)	(STD)
E-Mail Id.														

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook  \*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted 

d	d	/	m	m	/	y	y	y	y
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4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant


City / Town / Village

Pin Code

State

Country

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook  \*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted 

d	d	/	m	m	/	y	y	y	y
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6. Any other information: \_\_\_\_\_

## DECLARATION

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

Place: \_\_\_\_\_

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

## SIGNATURE OF APPLICANT

Signature

## FOR OFFICE USE ONLY

IPV Done  on 

d	d	/	m	m	/	y	y	y	y
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AMC/Intermediary name OR code

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

Main Intermediary

Seal/Stamp of the intermediary should contain  
Staff Name  
Designation  
Name of the Organization  
Signature  
Date

Seal/Stamp of the intermediary should contain  
Staff Name  
Designation  
Name of the Organization  
Signature  
Date

## INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

### A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

### B. Proof of Identity (POI): List of documents admissible as Proof of Identity:

1. PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, 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): List of documents admissible as Proof of Address: (\*Documents having an expiry date should be valid on the date of submission.)

1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale

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

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

### D. Exemptions/clarifications to PAN

#### (\*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FIIs, Mfs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

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

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

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



Please fill in ENGLISH and in BLOCK LETTERS

Application No. :

**A. Identity Details (please see guidelines overleaf)**

1. Name of Applicant (As appearing in supporting identification document).

Name

Father's/Spouse Name

2. Gender  Male  Female    B. Marital status  Single  Married    C. Date of Birth

3. Nationality  Indian  Other (Please specify) \_\_\_\_\_

4. Status Please tick (✓)  Resident Individual  Non Resident  Foreign National (Passport Copy Mandatory for NRIs & Foreign Nationals)

5. PAN 



 Please enclose a duly attested copy of your PAN Card

Aadhaar Number, if any: \_\_\_\_\_

6. Proof of Identity submitted for PAN exempt cases Please Tick (✓)

UID (Aadhaar)  Passport  Voter ID  Driving Licence  Others \_\_\_\_\_ (Please see guideline 'D' overleaf)

**PHOTOGRAPH**

Signature

Please affix the recent passport size photograph and sign across it

**B. Address Details (please see guidelines overleaf)**

1. Address for Residence/Correspondence

City / Town / Village		Country	Pin Code
State			

2. Contact Details

Tel. (Off.)	(ISD)	(STD)	Tel. (Res.)	(ISD)	(STD)
Mobile	(ISD)	(STD)	Fax	(ISD)	(STD)
E-Mail Id.					

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook

\*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted

4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant

City / Town / Village		Country	Pin Code
State			

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook

\*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted

6. Any other information: \_\_\_\_\_

**DECLARATION**

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

Place:

Date:

**SIGNATURE OF APPLICANT**

**FOR OFFICE USE ONLY**

IPV Done  on

AMC/Intermediary name OR code \_\_\_\_\_

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

Main Intermediary \_\_\_\_\_

Seal/Stamp of the intermediary should contain Staff Name Designation Name of the Organization Signature Date
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Seal/Stamp of the intermediary should contain Staff Name Designation Name of the Organization Signature Date
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**Know Your Client (KYC)  
Application Form (For Individuals Only)**



**Third Holder**

Please fill in ENGLISH and in BLOCK LETTERS

Application No. :

**A. Identity Details (please see guidelines overleaf)**

1. Name of Applicant (As appearing in supporting identification document).

Name

Father's/Spouse Name

2. Gender  Male  Female      **B. Marital status**  Single  Married      **C. Date of Birth**

d	d	/	m	m	/	y	y	y	y
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3. Nationality  Indian  Other (Please specify) \_\_\_\_\_

4. Status Please tick (✓)  Resident Individual  Non Resident  Foreign National (Passport Copy Mandatory for NRIs & Foreign Nationals)

5. PAN 

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 Please enclose a duly attested copy of your PAN Card

Aadhaar Number, if any: \_\_\_\_\_

6. Proof of Identity submitted for PAN exempt cases Please Tick (✓)

UID (Aadhaar)  Passport  Voter ID  Driving Licence  Others \_\_\_\_\_ (Please see guideline 'D' overleaf)

**PHOTOGRAPH**

**Please affix the recent passport size photograph and sign across it**

**B. Address Details (please see guidelines overleaf)**

1. Address for Residence/Correspondence



City / Town / Village \_\_\_\_\_ Pin Code \_\_\_\_\_  
State \_\_\_\_\_ Country \_\_\_\_\_

2. Contact Details

Tel. (Off.)	(ISD)	(STD)		Tel. (Res.)	(ISD)	(STD)	
Mobile	(ISD)	(STD)		Fax	(ISD)	(STD)	
E-Mail Id. _____							

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook  
 \*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted 

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4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant



City / Town / Village \_\_\_\_\_ Pin Code \_\_\_\_\_  
State \_\_\_\_\_ Country \_\_\_\_\_

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook  
 \*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted 

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6. Any other information: \_\_\_\_\_

**DECLARATION**

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

Place: \_\_\_\_\_

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

**SIGNATURE OF APPLICANT**

**FOR OFFICE USE ONLY**

IPV Done  on 

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AMC/Intermediary name OR code

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

Main Intermediary

Seal/Stamp of the intermediary should contain  
 Staff Name  
 Designation  
 Name of the Organization  
 Signature  
 Date

Seal/Stamp of the intermediary should contain  
 Staff Name  
 Designation  
 Name of the Organization  
 Signature  
 Date



## Know Your Client (KYC) Application Form (For Non-Individuals Only)



Please fill in ENGLISH and in BLOCK LETTERS

Application No. :

### A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (Please write complete name as per Certificate of Incorporation / Registration; leaving one box blank between 2 words. Please do not abbreviate the Name).

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2. Date of Incorporation 

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 / 

m	m
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 / 

y	y	y	y
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 Place of Incorporation 

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

3. Registration No. (e.g. CIN) 

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

 Date of commencement of business 

d	d
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 / 

m	m
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 / 

y	y	y	y
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4. Status Please tick (✓)  Private Ltd. Co.  Public Ltd. Co.  Body Corporate  Partnership  Trust / Charities / NGOs  HUF  FI  FII  
 FPI Category I  FPI Category II  FPI Category III  AOP  Bank  Government Body  Non-Government Organisation  
 Defence Establishment  Body of Individuals  Society  LLP  Others (Please specify) \_\_\_\_\_

5. Permanent Account Number (PAN) (MANDATORY) 

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 Please enclose a duly attested copy of your PAN Card

### B. Address Details (please see guidelines overleaf)

1. Address for Correspondence

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City / Town / Village	Country	Postal Code
State		

2. Contact Details

Tel. (Off.) (ISD) (STD)	Tel. (Res.) (ISD) (STD)
Mobile (ISD) (STD)	Fax (ISD) (STD)
E-Mail Id.	

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

\*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Bank Account Statement  Registered Lease / Sale Agreement of Office Premises  
 Any other proof of address document (as listed overleaf).(Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted 

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y	y	y	y
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4. Registered Address (If different from above)

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City / Town / Village	Country	Postal Code
State		

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

\*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Bank Account Statement  Registered Lease / Sale Agreement of Office Premises  
 Any other proof of address document (as listed overleaf).(Please specify) \_\_\_\_\_

\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted 

d	d
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m	m
---	---

 / 

y	y	y	y
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### C. Other Details (please see guidelines overleaf)

1. Name, PAN, DIN/Aadhaar Number, residential address and photographs of Promoters/Partners/Karta/Trustees/whole time directors (Please use the Annexure to fill in the details)

2. Any other information: \_\_\_\_\_

#### DECLARATION

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

Place:

Date:

#### NAME & SIGNATURE(S) OF AUTHORISED PERSON(S)


#### FOR OFFICE USE ONLY

AMC/Intermediary name OR code \_\_\_\_\_

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

Seal/Stamp of the intermediary should contain  
 Staff Name  
 Designation  
 Name of the Organization  
 Signature  
 Date

**A. IMPORTANT POINTS:**

- Self attested copy of PAN card is mandatory for all clients.
- Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
- If any proof of identity or address is in a foreign language, then translation into English is required.
- Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- If correspondence & permanent address are different, then proofs for both have to be submitted.
- Sole proprietor must make the application in his individual name & capacity.
- For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
- For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
- In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- For opening an account with Depository participant or Mutual Fund, for a minor or photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

**B. Proof of Identity (POI):** List of documents admissible as Proof of Identity:

- PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
- Unique Identification Number (UID) (Aadhaar)/Passport/Voter ID card/Driving license.
- Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, 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):** List of documents admissible as Proof of Address: (\* Documents having an expiry date should be valid on the date of submission.)

- Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of

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

- Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
- Bank Account Statement/Passbook - Not more than 3 months old.
- Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
- Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
- For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.
- The proof of address in the name of the spouse may be accepted.

**D. Exemptions/clarifications to PAN**

(\* Sufficient documentary evidence in support of such claims to be collected.)

- In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
- Investors residing in the state of Sikkim.
- UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
- SIP of Mutual Funds upto Rs 50,000/- p.a.
- In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

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

- Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- 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.

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

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

# Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant \_\_\_\_\_

PAN of the Applicant \_\_\_\_\_

Sr. No.	PAN	Name	DIN (For Directors) / Aadhaar Number (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph



Name & Signature of the Authorised Signatory(es)

Date | d | d | / | m | m | / | y | y | y | y |



## TRADING RELATED ACCOUNT DETAILS

### TRADING PREFERENCE

Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you

Exchange	Cash	F&O	Currency	
NSE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Please sign here to select all the segments 
BSE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

Whether you wish to avail of the facility of internet trading / wireless technology (Please Specify)  Yes  No

### BROKERAGE DETAILS

Brokerage Scheme

Cash  F&O  Currency

	Cash Segment				Derivative					Currency Derivative				
	Trading		Delivery		Future		Option			Future		Option		
	%	Min.	%	Min.	%	Min.	%	Min.	Mini Per Lot	%	Min.	%	Min.	Mini Per Lot
1st Leg														
2nd Leg														

### ADDITIONAL DETAILS

Contract Note	Whether you wish to receive <input type="checkbox"/> Electronic Contract Note (ECN) <small>Please specify your email id</small> _____ <input type="checkbox"/> Physical Contract Note			
Educational Qualification	<input type="checkbox"/> High School	<input type="checkbox"/> Graduate	<input type="checkbox"/> Post Graduate	<input type="checkbox"/> Professional
Investment/ Trading Experience	<input type="checkbox"/> _____ Years in Stock	<input type="checkbox"/> _____ Years in Derivatives	<input type="checkbox"/> _____ No Prior Experience	
Primary purpose of dealing	In Equities: <input type="checkbox"/> Intraday <input type="checkbox"/> Positional <input type="checkbox"/> Investment	In Derivatives: <input type="checkbox"/> Trading <input type="checkbox"/> Hedging		
Stock Portfolio	<input type="checkbox"/> NIL	<input type="checkbox"/> <5 Lacs	<input type="checkbox"/> 5-20 Lacs	<input type="checkbox"/> 20-50 Lacs <input type="checkbox"/> >50 Lacs
Any other information				

### PAST ACTIONS

Details of any action/ proceedings initiated/ pending/ taken by SEBI/ Stock Exchange/ any other authority against the applicant/ constituent or its Partners, Promoters/ Whole Time Directors/ Authorized persons in charge of dealing in securities during the last 3 years, whether in terms of criminal or civil proceedings by any enforcement agency worldwide.

### DEALING THROUGH OTHER STOCK BROKERS

If You are dealing with any other stock broker/ Sub broker/ Authorised Person, provide the following details: (in case dealing with multiple stock broker/ Sub broker/ Authorised Person, provide details of all)

Name of Stock broker _____	Client Code _____
Name of Sub broker _____	Exchange _____
Authorised Person Details of disputes/ dues pending from/ to such stock broker/ Sub broker/ Authorised Person _____	

## COMMON DETAILS FOR TRADING AND DEMAT

### OTHER DETAILS

<b>Gross Annual Income details</b>	<b>Income range per annum</b> <input type="checkbox"/> Upto Rs.1,00,000/- <input type="checkbox"/> Rs.1,00,000/- to Rs. 5,00,000/- <input type="checkbox"/> Rs. 5,00,000/-to Rs. 10,00,000/- <input type="checkbox"/> Rs.10,00,000/- to Rs.25,00,000/- <input type="checkbox"/> Rs. 25,00,000/- to Rs. 1,00,00,000/- <input type="checkbox"/> More than Rs. 1,00,00,000/-
Net worth as on Date: _____ Rs. _____ (Net worth should not be older than 1 year)	
<b>Occupation</b>	<input type="checkbox"/> Private/Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others (Specify) _____
<b>Please tick, if applicable</b>	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Not Applicable
<b>Any other information</b>	

### ADDITIONAL INFORMATION RELATED TO TRADING ACCOUNT

#### A. BANK ACCOUNT(S) DETAILS

Bank Name	Branch Address	Bank Account No.	Account Type	MICR Number	IFSC Code
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others ..... In case of NRI: <input type="checkbox"/> NRE <input type="checkbox"/> NRO		
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others ..... In case of NRI: <input type="checkbox"/> NRE <input type="checkbox"/> NRO		

#### B. DEPOSITORY ACCOUNT(S) DETAILS

Depository Participant Name	Depository Name (NSDL/CDSL)	Beneficiary Name	DP ID	Beneficiary ID (BO ID)
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			

(You may attach separate sheet for DP details, Please tick default ID for BSE / NSE transactions)

Status									
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Funds <input type="checkbox"/> OCB <input type="checkbox"/> FIT <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Cleaning House <input type="checkbox"/> Other (Specify) _____									
Corporate Sub-Status	<input type="checkbox"/> Domestic <input type="checkbox"/> Foreign Body <input type="checkbox"/> Group Company <input type="checkbox"/> Mutual Fund <input type="checkbox"/> Other _____								
Place of Incorporation			Date of Incorporation						
			Date of Commencement of Business						
SEBI Registration No.			SEBI Registration Date						
ROC Registration No.			ROC Registration Date						
RBI Registration No.			RBI Registration Date						
CIN No.									
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Other (Specify) _____								

## DEALING THROUGH REGISTERED SUB BROKER / AUTHORISED PERSON

If you are dealing through Upmove Financial Technologies Services / Authorised Person, provide the following details :

Name		BSE SEBI Regn. No.	
Regd. Off. Address		NSE SEBI Regn. No.	
		MCX-SX SEBI Regn. No.	
Signature (Sub-broker/AP) 		Tel. No	Remisier/AP_____
		Fax. No	Remisier/AP_____
		Website	Remisier/AP_____

## DEALING THROUGH REGISTERED SUB BROKER / AUTHORISED PERSON

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am/we are aware that I/we are aware that I/we are aware that I/we may be held liable for it.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' Document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for information on stock broker's designated website, if any.

## FOR OFFICE USE ONLY

UCC Code allotted to the Client : \_\_\_\_\_

	Documents verified with Originals	In-Person Verification done by
Name of the Employee		
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.

Date \_\_\_\_\_

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

## NOMINATION DETAILS (For Individual Only)

I/We the sole holder/ Joint Holders/ Guardian (in case of minor) hereby declare that:

- I/We do not wish to nominate any one for this trading & demat account
- I/We **nominate** the following person/s for this trading & demat account who is/are entitled to receive fund/ security balances in my /our account, particulars whereof are given below, in my event of my/our death.

Nomination Details	<u>Nominee 1</u>	<u>Nominee 2</u>	<u>Nominee 3</u>
<b>Nominee Name:</b>			
<b>*First Name:</b>			
<b>Middle Name:</b>			
<b>*Last Name:</b>			
*Address			
*City			
*State			
*Pin			
*Country			
Telephone & Fax No.			
PAN No.			
UID			
Email Id			
*Relationship with the BO			
Date of birth (mandatory if Nominee Is a minor)			
<b>*First Name:</b>	_____	_____	_____
<b>Middle Name:</b>	_____	_____	_____
<b>*Last Name</b>	_____	_____	_____
Address of the Guardian of nominee:			
*City			
*State			


Nomination Details	<u>Nominee 1</u>	<u>Nominee 2</u>	<u>Nominee 3</u>
*Country			
*Pin			
Age			
Telephone & Fax No.			
Relationship of the Guardian With the Guardian			
*Percentage of allocation of securities			
*Residual Securities (please tick any one)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Note:** Residual securities: incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.

**\*Marked is Mandatory field**




This nomination shall supersede any prior nomination made by me/ us and also any testamentary document executed by me/us.

**Note:** One witness shall attest signature(s)/ thumb impression(s)

Details of the Witness	
	<b>First Witness</b>
Name of the Witness	
Address of the Witness	
Signature of the Witness	

I/ We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I/We declare that the particulars given by me/us above are true and to the best of my/ our knowledge as on the date of making this application. I/We agree and undertake to imitate the DP any change(s) in the details/ Particulars mentioned by me/ us in this form. I/We further agree that any false/ misleading information given by me/ us or suppression of any material information will render my account liable for termination and suitable action.

**Nomination accepted and registered vide Registration No. \_\_\_\_\_ Dated \_\_\_\_\_**

	First/ Sole Holder or Guardian(in case of Minor)	Second Holder	Third Holder
Name			
Signatures			

### INTRODUCER/ REFERENCE DETAILS

Introducer Name : \_\_\_\_\_

Address : \_\_\_\_\_

Code (if any) : \_\_\_\_\_

Status of Introducer :  Sub-broker  Remisier  Authorised Person  Existing Client  Others

Signature of the Introducer :  \_\_\_\_\_



Voluntary

## DECLARATION

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,

I/ We hereby state and declare that I have received, read and understood the below mentioned documents to my satisfaction and understood the voluntary clauses mutually agreed between us.

1. I/ We have received and read the document stating the Rights & Obligations of stock broker/ trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).
2. I/ We have received and read the document detailing the Risks associated with dealing in the securities market in the Risk Disclosure Document.
3. I/ We have received and read the document the Guidance note detailing do's and don'ts for trading on exchanges, for the education of the investors.
4. I/ We have received and read the document describing significant policies and procedures of the stock broker and also the tariff structure.

I have got clear idea about all brokerages, commissions, fees and other charges levied by the Upmove Financial Technologies Services for trading as per the relevant provisions/ guidelines specified by the SEBI/ Stock Exchanges.

I hereby acknowledge the same.

Signature:  \_\_\_\_\_

Voluntary

## LETTER FOR AUTHORITY - ALL EXCHANGES

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,

**Sub: Letter for authority for trading and settlement on My/ Our Behalf**

Kindly find below a list of authorized person to represent me/ us, their authority restricted to following.

1. To sell, purchase, subscribe for, effect deliver of, transfer, dispose, endorse, negotiate and/ or otherwise deal in all types of securities and instruments including units of mutual funds (hereinafter referred to as 'securities') for all the Exchange(s) and Segment(s).
2. To receive advice/ instructions for payment of margins, including margin calls.
3. To receive communication regarding squaring up of existing open positions, in case of shortfall of margin or otherwise.
4. To sign execute and submit such documents as may be required to effectuate any of the above in accordance and subject to the regulatory requirement from time to time.

**Name of the Person(s)**

**Relation, if any**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

Any instruction given to or received from the Authorized Representative in connection with the said trading account will be treated as an instruction given to or received from me/ us expect your obligation under SEBI/ Exchange guidelines. I/ We hereby agree to confirm all transactions, trade and dealings done by the Authorized Representative.

Signature:  \_\_\_\_\_

Voluntary

## CONSENT FORM FOR RECEIVING TRADE/ TRANSACTION ALERTS THROUGH SMS AND/ OF E-MAIL

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,

I/ We, \_\_\_\_\_ a client with Upmove Financial Technologies Services, Member of BSE, NSE and any other Stock Exchange in future, undertakes as follows:

1. I/ We are aware that BSE, NSE provides the details of the trades executed on their trading platforms to the concerned clients/ constituents through SMS and Email alerts.
2. I/ We are aware that the Member (Upmove) has to provide the trade details through SMS/ Email alerts for my/ our convenience at my/ our request only.

3. I/ We hereby confirm that I / We wish to receive the trade alerts through:

SMS  E-mail  SMS & E-mail

4. I/We hereby confirm and request you that the trade alerts should be sent on:

Mobile Number: \_\_\_\_\_

Belongs to  Self  Spouse  Dependent Children  Dependent Parents

E-mail Address: \_\_\_\_\_

Belongs to  Self  Spouse  Dependent Children  Dependent Parents

I/ We hereby agree to the terms and conditions specified by the BSE vide Circular No. 20110809-19 dated August 9, 2011, NSE vide Circular No. 686/2011 dated November 18, 2011 and circulars/ clarifications issued by the Exchanges from time to time in this regard. I/ We am/ are also aware that this is an additional facility provided by the Exchanges and I/ We shall not solely rely on use such data for any [purpose and Exchanges shall not be liable for any direct or indirect loss of any nature because of providing this additional facility to me/ us.

Signature:  \_\_\_\_\_

Voluntary

## CONSENT TO RECEIVE CONTRACT NOTE, TRADE CONFIRMATIONS BY E-MAIL

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,


I/ We hereby consent to receive the contract notes/ trade confirmations of the trades executed by me/ us bill & account statements thereof, notices, circulars, amendments and such other correspondence or documents in electronic form duly authenticated by means of a digital signature such as specified in the Information Technology Act 2000 and the rules made there under, to any of myself created E-mail Ids mentioned below:

<b>Email Id-1</b>	
<b>Email Id-2</b>	
<b>Email Id-3</b>	

I/ We further hereby consent to the following:

1. The Member shall fulfill its legal obligation if the aforesaid documents are sent electronically to an one of the said e-mail ids.
2. I/ We shall communicate the change in e-mail id, if any, to you through a duly signed physical letter.
3. I/ We undertake to check contract notes and transaction statements, bills on regular basis and bring the discrepancies to your notice preferably within 48 hours of the execution of the trade or on receipt of the said statements.
4. Non verification or not accessing the contract notes/ transaction statements on regular basis from my /our part shall not be a reason for disputing the contract note or transaction statements at any time.
5. The Member will not be responsible for non receipt of documents sent via electronic delivery due to change in email address as mentioned above or for any other reason beyond the control of TM which inter alia include the malfunction of my/ our computer system/ server/ internet connection etc.
6. The non receipt of bounced mail notification by Upmove shall amount to delivery of the documents at my/ our E-mail Id.
7. The member shall not take cognizance of out of office/ out of station auto replies and I/ We shall be deemed to have received such electronic emails.
8. I/ We also acknowledge the upload of Contract Note/ Bills, Statement of Accounts/ Ledgers and other Statements/ Documents for trading on BSE & NSE on your website [www.upmovefintech.in](http://www.upmovefintech.in)
9. In case of bounced mail, Contract Note will be sent in physical mode.

Yours Faithfully,

Signature:  \_\_\_\_\_

Voluntary

## AUTHORITY TO RETAIN SECURITIES AND FUNDS

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,

**Sub: Authority Letter for Running Account (Client Code \_\_\_\_\_)**

1. With reference to my/our trading account opened with you, I/we request you to maintain a running account for funds and securities on my/our behalf without settling the account on settlement of each transaction. I/We further request you to retain all amounts and securities receivable by me/us until specifically requested by me/ us to be settled or to be dealt with in any other manner.
2. I/We understand and agree that no interest will be payable to me/us on the amounts so retained with you.
3. I/We hereby authorize Upmove Financial Technologies Services to act at its discretion of adjusting any credit balance under my/ our various accounts against the debit in any account across Exchange, without taking any further instruction from me/us.
4. I/We authorize you to set off a part or whole of the margin deposited by me/us against any of my / our dues, by appropriating relevant amount of fund.
5. I/We may revoke the authorization at any time by issuing a physical letter for the effect.
6. I/We also agree that the actual settlement of fund shall be done by me/us, at least once in a  
(Tick your preference)  
 Every Calendar Quarter    or     Every Calendar Month
7. There shall be no inter-client adjustment for the purpose of settlement of the 'running account'.
8. You may retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the Exchanges.
9. At the time of settlement you may retain an amount of upto Rs. 10,000/-.
10. I/ We shall bring any dispute arising from the statement of account or settlement to your notice preferably within 7 working days from the date of receipt of funds/ securities or statement as the case may be.

Yours Faithfully,

Signature:  \_\_\_\_\_

Voluntary

## REQUEST & AUTHORITY FOR PLACEMENT OF SECURITIES COLLATERAL & WITHDRAWAL

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,

In order to facilitate operations and to abide by the statutory requirements as laid down from time to time, I/ We wish to keep transferring the securities to yours designated demat account from time to time as collaterals towards margin deposit for Cash/ Derivatives Segments of the Exchanges for which you may please to exempt me/ us to give you separate individual instructions every time. Such collateral securities so transferred to your designated demat accounts should be credited to my/ our account and margin benefits be given to me/ us accordingly.

I/ We also wish to avail exposure against stock lying in my/ our DP account maintained with your Depository Participant and authorize you to transfer the securities so lying in my/ our demat account(s) to yours designated demat account for the purpose of exposure and/ or any margin and/ or payin and/ or early payin and/ or pre payin obligations that arise/ may arise on my/ our trade position in any exchange segment.

I/ We also request & authorize you to directly deliver such collateral securities to the Stock Exchanges towards my/ our payin/ early payin/ pre payin margin obligations without any reference to me/ us.

I/ We further confirm that all the Demat Charges in this regard would be borne by me/ us.

Yours Faithfully,

Signature:  \_\_\_\_\_

Voluntary

## DECLARATION BY THE KARTA (in case of HUF)

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,

The undersigned and the Karta of \_\_\_\_\_ (HUF)  
hereby, disclose the following details of our HUF and all its coparceners.

Name	Date Of Birth	Relationship	Signature

I hereby, state that details mentioned as above are true and any changes therein would be intimated to you immediately in writing.

Yours Faithfully,

Name of Karta : \_\_\_\_\_

Signature of the Karta along with Stamp:  \_\_\_\_\_

Voluntary

## MUTUAL FUND SERVICE SYSTEM FACILITY

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

To

**Upmove Financial Technologies Services**

Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

**Sub: Mutual Fund Service System (MFSS) Facility**

Dear Sir/ Madam,

I/We \_\_\_\_\_ am/are registered as your client with Client Code No. \_\_\_\_\_ and have executed the Trading Member and Client Agreement for the purpose of trading in the Capital Market segment of National Stock Exchange of India Ltd (Exchange).

I/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 facility 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 facility 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 No. NSE/ MFSS/ 003/ 2009 dated November 24, 2009 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 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.

Yours Faithfully,

Signature:  \_\_\_\_\_



## **DETAIL OF TERMS & CONDITIONS FOR THE INVESTOR / CLIENT FOR USING NEW MFSS FACILITY**

1. Pre-requisites for becoming Investor/ Client for the New MFSS facility.
  - 1.1 The client who is desirous of investing in units of mutual fund schemes through the New MFSS.
  - 1.2 The client intends to execute his instruction for the subscription/ redemption of units of Mutual Fund Schemes Through the Participant of the New MFSS.
  - 1.3 The client has satisfied itself of the of the capacity of the Participant to deal in Mutual Fund units and wishes to execute its instruction through the Participant and the client shall from time to time continue to satisfy itself of such capability of the Participant before executing transacting through the Participant.
  - 1.4 The Client has approached to the Participant with the application for availing the New MFSS facility.
  - 1.5 The client has submitted relevant KYC (Know You Client) details to the Participants.
  
2. Terms and Conditions
  - 2.1 The client shall be bound by circulars by issued by NSEIL, Rules, Regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
  - 2.2 The client shall notify the Participant in writing if there is any change in the information in the 'client registration form' provided by the client to the Participant at the time registering as a client for Participating in the New MFSS or at any time thereafter.
  - 2.3 The shall submit to the Participant a completed application from in the manner prescribed format for the purpose of placing a subscription order with the Participant.
  - 2.4 The client has read and understood the risks involved in investing in Mutual Fund Schemes.
  - 2.5 The client shall be wholly responsible for all his investment decisions and instruction.
  - 2.6 The client shall ensure continuous compliance with the requirements of the NSEIL, SEBI AND AMFI.
  - 2.7 The client shall pay to the Participant fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant renders to the Client.
  - 2.8 The client will furnish information to the Participant in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
  - 2.9 In the event of non-performance of the obligation by the Participant, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL or NSCCL.
  - 2.10 In case of any dispute between the Participants and the investors arising out of the MFSS facility, NSEL and/ or NSCCL agrees to extend the necessary support for the speedy redressal of the disputes.

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## FATCA/CRS Self Declaration Form (For Individuals)

### Part I: Individual Identification

Account number / Customer Id \_\_\_\_\_

Nature of holder (First / Second/ Third) \_\_\_\_\_

Name of the Account Holder \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender (M/F) \_\_\_\_\_

Country of Birth \_\_\_\_\_ Nationality/ Citizenship \_\_\_\_\_

US Person (Yes/ No) \_\_\_\_\_

Address \_\_\_\_\_

Correspondence Address (if different from above) \_\_\_\_\_

Mobile \_\_\_\_\_

### Part II:

Country of tax residence (as per section 6 of the Income-tax Act, 1961)

- a. Only India.
- b. India and other country  \_\_\_\_\_ (kindly specify the country of tax residence)
- c. Any other country  \_\_\_\_\_ (kindly specify the country of tax residence)

**If answer to option (b) or (c) is yes, please provide the following details and documents:**

For the purposes of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/ functional equivalent in each country is set out below or I have indicated that a TIN/ functional equivalent is unavailable (kindly fill details of all countries of tax residence if more than one).

Country/ Countries of Tax Residency	Tax Identification Number	TIN Issuing Country	Documents provided (Copy of certificate of residence Of Copy of TIN)


- a. In case you are declaring US person status as 'No' but your Country of Birth is US, please provide document evidencing Relinquishment of Citizenship. If not available provide reasons for not having relinquishment certificate (Please also fill Part IV Self-Certification)

Reason: \_\_\_\_\_

### Part III: Customer Declaration & Undertaking

I/We certify that:


- The information provided in the Form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income tax Rules, 1962.
- The applicant is (i) an applicant taxable as a US person under the laws of the USA or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the US, (ii) an estate the income of which is subject to US federal Income Tax regardless of the source thereof. (Applicable only in case of US person).
- The applicant is an applicant taxable as a tax resident under the laws of the Country outside India. (Applicable only if the account holder is a tax resident outside of India.)
- I/ We permit/authorize Upmove Financial Technologies Services to collect, store, communicate and process information relating to the Account and all transactions therein, by them and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- I/ We also agree that our failure to disclose any material fact known to us, now or in future, may invalidate our application and Upmove Financial Technologies Services would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India (GOI) /RBI for the purpose or take any other action as may be deemed appropriate by Upmove Financial Technologies Services if the deficiency is not remedied by us within the stipulated period.
- I/ We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect and shall indemnify Upmove Financial Technologies Services for any loss that may arise to the Bank/Authorities on account of providing incorrect or incomplete information.
- I/ We certify that the information on this form is true to the best of my knowledge and belief and shall indemnify the Company for any loss that may arise on account of providing incorrect or incomplete information.

<b>Signature</b>	
<b>Name</b>	
<b>Date &amp; Place</b>	
<b>PAN Number</b>	

### Part IV: Self-Certification

To be filled only if

- Name of the country in Part I is other than India and TIN or functional equivalent is not available, or
- US person is mentioned as Yes in Part I, and TIN is not available.

<p>I confirm that I am neither a US person nor a resident for tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India. Therefore, I am providing the following document as proof of my citizenship and residency in India.</p>	<p>Signature: </p>								
<p>Document Submitted: (Tick the one provided)</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Passport</td> <td><input type="checkbox"/> Govt. issued ID Card</td> </tr> <tr> <td><input type="checkbox"/> Driving License</td> <td><input type="checkbox"/> PAN Card</td> </tr> <tr> <td><input type="checkbox"/> Election ID Card</td> <td><input type="checkbox"/> UIDAI Card</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other, specify _____</td> </tr> </table>		<input type="checkbox"/> Passport	<input type="checkbox"/> Govt. issued ID Card	<input type="checkbox"/> Driving License	<input type="checkbox"/> PAN Card	<input type="checkbox"/> Election ID Card	<input type="checkbox"/> UIDAI Card	<input type="checkbox"/> Other, specify _____	
<input type="checkbox"/> Passport	<input type="checkbox"/> Govt. issued ID Card								
<input type="checkbox"/> Driving License	<input type="checkbox"/> PAN Card								
<input type="checkbox"/> Election ID Card	<input type="checkbox"/> UIDAI Card								
<input type="checkbox"/> Other, specify _____									

# FATCA/CRS Self Declaration Form (For Non-Individuals)

## Self-Certification for Entities Part I

a. Is the account holder a Government body/ International Organization/ listed company on recognized stock exchange  Yes  No

If "No", then proceed to point B

If "Yes" please specify name of stock exchange, if you are listed company \_\_\_\_\_ and, proceed to sign the declaration

b. Is the account holder a (Entity/ Financial Institution) tax resident of any country other than India  Yes  No

If "Yes", then please fill of FATCA/ CRS Self certification Form

If "No", proceed to point C

c. Is the account holder an Indian Financial Institution  Yes  No

If "Yes", please provide your GIIN, if any \_\_\_\_\_

If "No", proceed to point D

d. Are the Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian citizen  Yes  No

If "Yes", (then please fill FATCA/ CRS self-certification form).

If "No", proceed to sign the declaration

### Customer Declaration

#### ( ) Under penalty of perjury, I/we certify that:

1. The applicant is:

(i) An applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District to Columbia or any other states of the U.S.

(ii) An estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person)

2. The applicant is an applicant taxable as a tax resident under the lows of country outside India.

(i) I/We understand that the Bank is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. The Bank is not able to offer any tax advice on FATCA/ CRS or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

(ii) I/ We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

(iii) I/ We agree that as may be required by domestic regulators/tax authorities the Bank may also be required to report, reportable details to CBDT or close or suspend my account.

(iv) I/ We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

**Name of the Entity:**

**Signature:**  \_\_\_\_\_

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

**Self-Certification Form (Entity) for Foreign Account Tax Compliance Act (“FATCA”) and Common Reporting Standards (CRS)**

**Part II**

<b>Section 1: Entity information</b>	
Name of Entity	
Customer Id (if existing)	
Entity Constitution Type	
Entity Identification Type*	<input type="checkbox"/> T <input type="checkbox"/> G <input type="checkbox"/> C <input type="checkbox"/> E <input type="checkbox"/> O
Entity Identification No.	
Entity Identification Issuing Country	
Country of Residence for Tax purpose	

\*T- TAN ; G- GIIN; C- CIN; E- EIN; O- Others

<b>Section 2: Classification of Non-Financial entities</b>																					
I/We (on behalf of the entity) certify that the entity is:																					
a) An entity incorporated and taxable in US (Specified US person)	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If “Yes”, please provide your U.S. Taxpayer Identification Number (TIN)																					
<table border="1"> <tr> <td align="center" colspan="10"><b>TIN</b></td> </tr> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>		<b>TIN</b>																			
<b>TIN</b>																					
b) An entity incorporated and taxable outside of India (other than US)	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If “Yes”, please provide your TIN or its functional equivalent Provide your TIN issuing country _____																					
c) Please provide the following additional details if you are not a Specified US Person :																					
<table border="1"> <tr> <td><b>FATCA / CRS classification for Non-financial Foreign entities (NFFE)</b></td> </tr> <tr> <td><input type="checkbox"/> Active NFFE</td> </tr> <tr> <td><input type="checkbox"/> Passive NFFE without any Controlling person</td> </tr> <tr> <td> <input type="checkbox"/> Passive NFFE with Controlling person(s)  <input type="checkbox"/> US    <input type="checkbox"/> Others           </td> </tr> <tr> <td> <input type="checkbox"/> Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus bank is not required to do the reporting)             Please provide GIIN number: _____           </td> </tr> </table>		<b>FATCA / CRS classification for Non-financial Foreign entities (NFFE)</b>	<input type="checkbox"/> Active NFFE	<input type="checkbox"/> Passive NFFE without any Controlling person	<input type="checkbox"/> Passive NFFE with Controlling person(s) <input type="checkbox"/> US <input type="checkbox"/> Others	<input type="checkbox"/> Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus bank is not required to do the reporting)  Please provide GIIN number: _____															
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<input type="checkbox"/> Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus bank is not required to do the reporting)  Please provide GIIN number: _____																					

**Section 3: Classification of financial institutions (including Banks)**

I/We (on behalf of the entity) certify that the entity is:

a. An entity is a U.S. financial institution

Yes  No

If “Yes”,

(i) Please provide your Taxpayer Identification Number(TIN)

<b>TIN</b>									

ii) Please provide GIIN, if any \_\_\_\_\_

If “No”, please tick one of the following boxes below:

FATCA classification	Please provide the Global Intermediary Identification number (GIIN) or other information where applicable
Reporting Foreign Financial Institution in a Model 1 Inter-Governmental Agreement (“IGA”) Jurisdiction	
Reporting Foreign Financial Institution in a Model 2 GA Jurisdiction	
Participating FFI in a Non-IGA Jurisdiction	
Non-Reporting FI	
Non-Participating FI	
Owner-Documented FI with specified US owners	

**Section 4: Controlling person declaration**

If you are classified as “Passive NFFE with Controlling Person(s)” or “Owner documented FFI” or “Specified US person”, please provide the following details:

Name of controlling person	Correspondence Address	Country of residence for tax purpose	TIN	TIN issuing country	Controlling person type

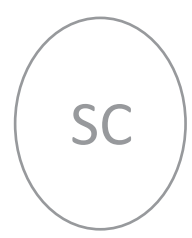
Details	Controlling person 1	Controlling person 2	Controlling person 3	Controlling person 4	Controlling person 5
Identification Type					
Identification Number					
Occupation Type					
Occupation					
Birth Date					
Nationality					
Country of Birth					

**Section 5: Declaration**

- i. Under penalty of perjury, I/we certify that:
  - 1. The number shown on this form is the correct taxpayer identification number of the applicant, and
  - 2. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America (“U.S.”) or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof, or
  - 3. The applicant is an applicant taxable as a tax resident under the laws of country outside India
- ii. I/We understand that the Bank is relying on this information for the purpose of determining the status of the applicant named above in compliance with CRS/FATCA. The Bank is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- iii. I/We agree to submit a new form within 30 days if any information or certification on this form gets changed.
- iv. I/We agree as may be required by /Regulatory authorities, bank shall be required to comply to report, reportable details to CDBT or close or suspend my account.
- v. I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct and complete including the tax payer identification number of the applicant.

I/We hereby confirm that details provided are accurate, correct and complete

\_\_\_\_\_   
 Authorized Signatories and Company Seal (if applicable)



Name \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_



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

To

**Upmove Financial Technologies Services**


Saraswati, Plot No. 91/95, RDP-1,  
Gorai, Borivali (W), Mumbai-91.

Dear Sir/ Madam,

I/ We confirm the receipt of following documents:

1. A/C Opening Letter having details of my Unique Client Code, Email Id, Bank and DP A/C
2. Copy of Client Registration Form (KYC)
3. Others \_\_\_\_\_

Yours Faithfully,

Signature:  \_\_\_\_\_

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

Client Code: \_\_\_\_\_

## CONFIRMATION

1. Client name verification - YES / NO
  2. Email id - YES / NO
  3. Address - YES / NO
  4. DOB - YES / NO
  5. Nomination - YES / NO
  6. Relation with client (if any) - YES / NO
    - i) If yes mention relation - \_\_\_\_\_
    - i) Letter of authority sign - YES / NO
    - i) Who will trade in Account - \_\_\_\_\_
- Approved / Reject - \_\_\_\_\_
- Sign : \_\_\_\_\_
- Date : \_\_\_\_\_ Time : \_\_\_\_\_

ONLINE TRADING FACILITY YES / NO



CREATE CLEAN INDIA



*Upmove*

## UPMOVE FINANCIAL TECHNOLOGIES SERVICES

Equities | Derivatives | Mutual Funds | IPO's | e-Broking

Reg. Off.: Saraswati, Plot No. 91/95, Road No. RDP-1, Gorai, Borivali (W), Mumbai – 400 091.

Tel.: +91-7045804339 | Website : [www.upmovefintech.in](http://www.upmovefintech.in)