



**Important Instructions:**

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

**For office use only** Application Type\*  New  Update  
 (To be filled by financial institution) KYC Number  (Mandatory for KYC update request)  
 Account Type\*  Normal  Simplified (for low risk customers)  Small

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

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian		
	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin		
Occupation Type*	<input type="checkbox"/> S-Service ( <input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector )	
	<input type="checkbox"/> O-Others ( <input type="checkbox"/> Professional	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student)	
	<input type="checkbox"/> B-Business			
	<input type="checkbox"/> X- Not Categorised			

**PHOTO**

Signature / Thumb Impression

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

ADDITIONAL DETAILS REQUIRED\* (Mandatory only if section 2 is ticked)  
 ISO 3166 Country Code of Jurisdiction of Residence\*   
 Tax Identification Number or equivalent (If issued by jurisdiction)\*   
 Place / City of Birth\*  ISO 3166 Country Code of Birth\*

**3. PROOF OF IDENTITY (PoI)\*** (Please refer instruction C at the end)

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

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

**4. PROOF OF ADDRESS (PoA)\***

**4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS** DETAILS (Please see instruction D at the end)

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

Address Type*	<input type="checkbox"/> Residential / Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business	<input type="checkbox"/> Registered Office	<input type="checkbox"/> Unspecified
Proof of Address*	<input type="checkbox"/> Passport	<input type="checkbox"/> Driving Licence	<input type="checkbox"/> UID (Aadhaar)		
	<input type="checkbox"/> Voter Identity Card	<input type="checkbox"/> NREGA Job Card	<input type="checkbox"/> Others	<input type="text"/> please specify	
	<input type="checkbox"/> Simplified Measures Account - Document Type code	<input type="text"/>			

**Address**

Line 1\*

Line 2

Line 3

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



**Additional information to be obtained along with the SARAL Account Opening Form for Resident Individuals**

Date	D	D	M	M	Y	Y	Y	Y

To be filled by the Depository Participant)

Application No.		Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.										
DP ID		Client ID								

**Holders Details**

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

<b>Name *</b>	_____
*In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.	

<b>Status</b>	<b>Sub – Status</b>
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident

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
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 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 the 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 in Physical)	

I / We wish to receive dividend / interest directly in to <b>my</b> bank account as given in SARAL AOF 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
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<b>Other Details</b> Gross Annual Income Details	<b>Income Range per annum:</b> <input type="checkbox"/> Up to 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"/> More than Rs 25,00,000																
	Net worth as on (Date) <table border="1"> <tr> <td>D</td> <td>D</td> <td>M</td> <td>M</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> Rs	D	D	M	M	Y	Y	Y	Y								
	D	D	M	M	Y	Y	Y	Y									
[Net worth should not be older than 1 year]																	
Occupation	<input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Govt. 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 (Specify) _____																
Please tick , if applicable:	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)																
Any other information:	_____																



<b>*Address of Nominee (s) / Guardian in case of Minor :</b>			
*City /place:			
*State & Country:			
*Pin Code:			
Mobile no/Telephone No. of the Nominee (s) Guardian in case of Minor :			
Email ID of the nominee (s) / Guardian in cae of minor:			
<b>Nominee/Guardian I incase of minor ) Identification Details – [Please tick any one of following and provide details of same]</b>			
Photograph & Signature PAN Aadhaar Saving Bank account no. Proof of Identity Demat Account ID			

**\* Marked is Mandatory**

**field Note**

Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature .

Details of the Witness	
Witness Details	
Name of witness	
Address of witness	
Signature of 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 intimate 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.

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

**(Signatures should be preferably in black ink).**

## FATCA & CRS Declaration - Individual

*Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance*

Name																
Place of Birth																
Country of Birth																
Nationality																
Constitute	<input type="checkbox"/> Individual <input type="checkbox"/> NRI <input type="checkbox"/> Foreign National <input type="checkbox"/> Others (Pl. Specify) _____															

Are you a tax resident of any country other than India -     Yes     No

If Yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

S.No.	Country#	Tax Identification Number%	Identification Type <i>(TIN or other, please specify)</i>
1.			
2.			
3.			

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

% In case Tax Identification Number is not available, kindly provide its functional equivalent \$

### CERTIFICATION

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

### FATCA & CRS - TERMS & CONDITIONS

Details under FATCA & CRS : The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, 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 of any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e. within 30 days.

It is important that you respond to our request, even if you believe you have already supplied any previously requested information.

Date : 

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Place : 

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Signature




Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3(iv) (A) of Part C)			
Country of Tax residency*			
PAN #			
Address	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____	Zip <input type="text"/> State: _____ Country: _____
Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office
Tax ID %			
Tax ID Type			
City of Birth			
Country of birth			
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others _____
Nationality			
Father's Name			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Holding (%) <sup>5</sup>			

\* To include US, where controlling person is a US citizen or green card holder  
<sup>2</sup> If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.  
<sup>3</sup> In case Tax Identification Number is not available, kindly provide functional equivalent  
<sup>5</sup> Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary

**DECLARATION**

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Sachdeva Stocks Pvt. Ltd. for any modification to this information promptly.  
 I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).

Name	
Designation	

Client Signature		Date : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	Place : <input type="text"/>
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For Investor convenience, Sachdeva Stocks Pvt. Ltd. collecting this mandatory information for updating across all Group Companies of Sachdeva Stocks Pvt. Ltd. whether you are already an investor or would become an investor in future.  
 Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest Sachdeva Stocks Pvt. Ltd. branch or you can dispatch the hard copy to-  
**Sachdeva Stocks Pvt. Ltd.**  
 Corp. Off.: Sachdeva Business Park, Bullanwari, Hoshiarpur-146001 (Punjab)

• For Detail Terms & Conditions please visit [www.sachdevastocks.com](http://www.sachdevastocks.com)

## NOMINATION FORM

DATE	D	D	M	M	Y	Y	Y	Y	UCC							
DP ID									Client ID							

I/We **wish to make a nomination.**  
[As per details given below]

<b>Nomination Registration No.</b>	<b>Dated</b>

### NOMINATION DETAILS

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

Nomination can be made upto three nominees in the account	Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1. Name of the nominee(s) Mr./Ms.)			
2. Share of each Nominee	Equally [If not equally, please specify percentage]  %	%	%
<i>Any odd lot after division shall be transferred to the first nominee mentioned in the form.</i>			
3. Relationship with the Applicant (if any)			
4. Address of Nominee(s) City / Place State / Country  PIN Code			
5. Mobile/Telephone No. of Nominee(s)			
6. Email ID of nominee(s)			
7. Nominee Identification details - [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> AADHAAR <input type="checkbox"/> Saving Bank A/c No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			




**Sr. Nos. 8-14 should be filled only if nominee(s) is a minor :**

8. Date of Birth {in case of minor nominee(s)}			
9. Name of Guardian (Mr./Ms.) {in case of minor nominee(s)}			
10. Address of Guardian(s) City / Place State / Country  PIN Code			
11. Mobile/Telephone No. of Guardian			
12. Email ID of nominee(s)			
13. Relationship of Guardian with nominee			

14.	Guardian 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 A/c No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			
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**Details of Witness**

Name of the Witness	Address of Witness	Signature of Witness

Holder	Name	Signature
Sole / First Holder / Guardian (Mr./Ms.) (in case of Minor)		
Second Holder		
Third Holder		

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

**Notes:**

1. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
2. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
3. The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
4. In case of joint account, on death of any of the joint account holders, the surviving account holder(s) has to inform Participant about the death of account holder(s) with required documents within one year of the date of demise.
5. In case if 'first holder' is selected, the communication will be sent as per the preference mentioned at Sr. No. 4. In case 'All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned at Sr. No. 4 and communication to other holders will be in electronic mode. The default option will be communication to 'first holder', if no option selected.
6. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
7. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
8. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
9. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
10. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
11. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
12. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure D.
13. Savings bank account details shall only be considered if the account is maintained with the same participant.
14. DP ID and client ID shall be provided where demat details is required to be provided.
15. All communication shall be sent at the address of the Sole/First holder only.
16. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
17. For receiving Statement of Account in electronic form:
  - I. Client must ensure the confidentiality of the password of the email account.
  - II. Client must promptly inform the Participant if the email address has changed.
  - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
18. Residual securities - in case of multiple nominees remaining after distribution of securities as per percentage of allocation.
19. Strike off whichever is not applicable.

**DECLARATION FORM FOR OPTING OUT OF NOMINATION**

To, Dated \_\_\_\_\_  
**Sachdeva Stocks Pvt. Ltd.**  
 Corp. Office : Sachdeva Business Park, Bullanwari, Hoshiarpur-146001

UCC								
DP ID								
Client ID (Only for Demat Account)								
Sole/First Holder Name								
Second Holder Name								
Third Holder Name								

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

 .....  .....  .....  
 First/Sole Holder Signature Second Holder Signature Third Holder Signature

**STATEMENT OF ACCOUNT RECEIVING IN ELECTRONIC MODE**

To, Dated \_\_\_\_\_  
**Sachdeva Stocks Pvt. Ltd.**  
 Corp. Office : Sachdeva Business Park, Bullanwari, Hoshiarpur-146001

Re: Beneficial Owner(BO) Account No. \_\_\_\_\_

I/We \_\_\_\_\_ [name(s) of the BO(s)] had entered into DP BO agreement with you. I/we confirm having opted to receive the statement of accounts pertaining to our BO account in electronic mode in lieu of physical copy of the statement of account.

I/We confirm that the dispatch of statement of account to me/us at the following email address shall constitute full and absolute discharge of your obligation under the above agreement to provide me/us with statement of my/our BO account. But, I/we reserve my/our right to receive the physical copy of statement of accounts despite receiving the same in electronic mode, if such a demand is made in writing on you.

E-mail address : \_\_\_\_\_

I/we confirm that any change in the aforesaid email address or any other instructions with regard to dispatch/service of my/our statement of account on me/us shall not be binding upon you unless you are intimated in writing by me/us by acknowledged delivery.

Yours faithfully

 .....  .....  .....  
 First/Sole Holder Signature Second Holder Signature Third Holder Signature

## TARIFF SHEET - DP (SCHEDULE OF SERVICE CHARGES FOR DP SERVICES)

SCHEME	SCHEME-1	SCHEME-2
1. Account Opening Charges	NIL	NIL
2. Account Maintenance Charges	Rs. 200/- upfront Individual Rs. 500/- upfront for Corporate	Rs. 999/- for Life Time Rs. 999/- for Life Time Corporate Account
3. Stamp Paper	Rs. 100/-	Rs. 100/-
4. Dematerialization Charges (For Every 50 Certificate)	Rs. 100/-	Rs. 100/-
5. Rematerialization Charges	Rs. 50/- Per certificate or at the rate of 0.04% of the value of the securities requested for remat whichever is higher	Rs. 50/- Per certificate or at the rate of 0.04% of the value of the securities requested for remat whichever is higher
6. Custody	NIL	NIL
7. Transaction Charges	NIL	NIL
8. Receipt Purchase	NIL	NIL
9. Delivery/Sale	0.05% on transaction value subject to min. of Rs. 25/- per instruction	0.05% on transaction value subject to min. of Rs. 25/- per instruction
10. Pledge Creation/Closure/Invocation	Rs. 100/- or 0.02% whichever is higher	Rs. 100/- or 0.02% whichever is higher
11. Equities-Transfer Fees-Market & Off Market (Per Transaction minimum of Rs. 10/-)	0.02%	0.02%

**w.e.f. 1st Sep. 2024**

In addition to the above the following out of pocket expenses shall also be charged :

1. First Instruction Booklet free and other then issue Instruction Booklet Rs. 50 per Book.
2. Charges are subject to revision at Depository Participant's sole discretion by giving 30 days' notice and shall be informed by circulars sent by ordinary post/press advertisement/Electronic Communication/Courier/Personal Messenger/Website (website means www.sachdevastocks.com) and/or its pages and links and/or any other website(s)/links/pages/appiers Participant may inform from time to time.
3. Demat charged 100 and Demat courier / postage charged @ Rs. 100/-.
4. Any other services not specified above shall be charged extra.
5. Taxes and other government levies extra as applicable from time to time.
6. All the charges are payable on monthly basis.
7. Sachdeva Stocks Pvt. Ltd. may suspend/freeze depository services of the account holder on nonpayment outstanding bill till the time outstanding DP service Charge received.
8. **BSDA AMC Charges**
  - '0' to Up to Rs. 4 lakhs' - NIL /0/Zero
  - More than Rs. 4 lakhs but up to ` 10 lakhs – Rs. 100/- (Rs. 100/one Hundred /Hundred
  - More than Rs. 10 lakhs Normal slab applicable as per normal charges

Scheme Opted  Scheme 1  Scheme 2

**Note. In case value of securities exceeds Rs. 1000000/- the BSDA will automatically converted into normal demat account and charges as mentioned in scheme A or B as opted by the client shall become applicable.**

**Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories**

**General Clause**

1. The Beneficial Owner and the Depository participant (DP) shall be bound by the provisions of the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996, Rules and Regulations of Securities and Exchange Board of India (SEBI), Circulars / Notifications/Guidelines issued there under, Bye Laws and Business Rules/Operating Instructions issued by the Depositories and relevant notifications of Government Authorities as may be in force from time to time.
2. The DP shall open/activate demat account of a beneficial owner in the depository system only after receipt of complete Account opening form, KYC and supporting documents as specified by SEBI from time to time.

**Beneficial Owner information**

3. The DP shall maintain all the details of the beneficial owner(s) as mentioned in the account opening form, supporting documents submitted by them and/or any other information pertaining to the beneficial owner confidentially and shall not disclose the same to any person except as required by any statutory, legal or regulatory authority in this regard.
4. The Beneficial Owner shall immediately notify the DP in writing, if there is any change in details provided in the account opening form as submitted to the DP at the time of opening the demat account or furnished to the DP from time to time.

**Fees/Charges/Tariff**

5. The Beneficial Owner shall pay such charges to the DP for the purpose of holding and transfer of securities in dematerialized form and for availing depository services as may be agreed to from time to time between the DP and the Beneficial Owner as set out in the Tariff Sheet provided by the DP. It may be informed to the Beneficial Owner that "no charges are payable for opening of demat accounts"
6. In case of Basic Services Demat Accounts, the DP shall adhere to the charges structure as laid down under the relevant SEBI and/or Depository circulars/ directions/ notifications issued from time to time.
7. The DP shall not increase any charges/tariff agreed upon unless it has given a notice in writing of not less than thirty days to the Beneficial Owner regarding the same.

**Dematerialization.**

8. The Beneficial Owner shall have the right to get the securities, which have been admitted on the Depositories, dematerialized in the form and manner laid down under the Bye Laws, Business Rules and Operating Instructions of the depositories. Separate Accounts.
9. The DP shall open separate accounts in the name of each of the beneficial owners and securities of each beneficial owner shall be segregated and shall not be mixed up with the securities of other beneficial owners and/or DP's own securities held in dematerialized form.
10. The DP shall not facilitate the Beneficial Owner to create or permit any pledge and/or hypothecation or any other interest or encumbrance overall or any of such securities submitted for dematerialization and/or held in demat account except in the form and manner prescribed in the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 1996 and Bye-Laws/Operating Instructions/Business Rules of the Depositories.

**Transfer of Securities**

11. The DP shall effect transfer to and from the demat accounts of the Beneficial Owner only on the basis of an order, instruction, direction or mandate duly authorized by the Beneficial Owner and the DP shall maintain the original documents and the audit trail of such authorizations.
12. The Beneficial Owner reserves the right to give standing instructions with regard to the crediting of securities in his demat account and the DP shall act according to such instructions.

**Statement of account**

13. The DP shall provide statements of accounts to the beneficial owner in such form and manner and at such time as agreed with the Beneficial Owner and as specified by SEBI/depository in this regard.
14. However, if there is no transaction in the demat account, or if the balance has become Nil during the year, the DP shall send one physical statement of holding annually to such BOs and shall resume sending the transaction statement as and when there is a transaction in the account.
15. The DP may provide the services of issuing the statement of demat accounts in an electronic mode if the Beneficial Owner so desires. The DP will furnish to the Beneficial Owner the statement of demat accounts under its digital signature, as governed under the Information Technology Act, 2000. However if the DP does not have the facility of providing the statement of demat account in the electronic mode, then the Participant shall be obliged to forward the statement of demat accounts in physical form.
16. In case of Basic Services Demat Account, the DP shall send the transaction statements as mandated by SEBI and/or Depository from time to time.

**Manner of Closure of Demat account**

- 17. The DP shall have the right to close the demat account of the Beneficial Owner, for ally reasons whatsoever, provided the De has given a notice In writing of not less than thirty days to the Beneficial Owner as well as to the Depository. Similarly, the Beneficial Owner shall have the right to close his/her demat account held with the DP provided no charges are payable by him/her to the DP. In such an event, the Beneficial Owner shall specify whether the balances in their demat account should be transferred to another demat account of the beneficial Owner held with another DP or to rematerialize the security balances held.
- 18. Based on the instructions of the Beneficial Owner, the DP shall initiate the procedure for transferring such security balances or rematerialize such security balances within a period of thirty days as per procedure specified from time to time by the depository. Provided further, closure of the demat account shall not affect the rights, liabilities and obligations of either the Beneficial Owner or the DP and shall continue to bind the parties to their satisfactory completion.

**Default in payment of charges**

- 19. In event of beneficial Owner committing a default ini the payment of any amount provided in Clause 5 & 6 within a period of thirty days from the date of demand, without prejudice to the right of the DP to close the demat account of the Beneficial Owner, the DP may charge interest at a rate as specified by the Depository from time to time for the period of such default.
- 20. In case the beneficial Owner has failed to make the payment of any of the amounts as provided in Clause 5&6 specified above, the DP after giving two days notice to the Beneficial Owner shall have the right to stop processing of instructions of the Beneficial Owner till such time he makes the payment along with interest, if any.

**Liability of the Depository**

- 21. As per Section 16 of Depositories Act, 1996,
  - 1. Without prejudice to the provisions of any other law for the time being in force, any loss caused to the beneficial owner due to the negligence of the depository or the participant, the depository shall indemnify such beneficial owner.
  - 2. Where the loss due to the negligence of the participant under Clause (1) above, is indemnified by the depository, the depository shall have the right to recover the same from such participant.

**Freezing/Defreezing of accounts**

- 22. The Beneficial Owner may exercise the right to freeze/defreeze his/her demat account maintained with the DP in accordance with the procedure and subject to the restrictions laid down under the Bye Laws and Business Rules/Operating Instructions.
- 23. The DP or the Depository shall have the right to freeze/defreeze the accounts of the Beneficial Owners on receipt of instructions received from any regulator or court or any statutory authority.
- 24. The Joint holders are aware that in case any statutory Order for freezing any one joint holder, the demat account will be frozen and the other joint holders will have to obtain a specific Order for unfreezing their percentage of joint ownership by submitting the relevant documentary proof to the order issuing authority."

**Redressal of Investor grievance**

- 25. The DP shall redress all grievances of the Beneficial Owner against the DP within a period of thirty days from the date of receipt of the complaint Authorized representative
- 26. If the Beneficial Owner is a body corporate or a legal entity, it shall, along with the account opening form, furnish to the DP, a list of officials authorized by it, who shall represent and interact on its behalf with the Participant. Any change in such list including additions, deletions or alterations thereto shall be forthwith communicated to the Participant.

**Law and Jurisdiction**

- 27. In addition to the specific rights set out in this document, the DP and the Beneficial owner shall be entitled to exercise any other rights which the DP or the Beneficial Owner may have under the Rules, Bye Laws and Regulations of the respective Depository in which the demat account is opened and circulars/notices issued there under or Rules and Regulations of SEBI.
- 28. The provisions of this document shall always be subject to Government notification, any rules, regulations, guidelines and circulars/ notices issued by the SEBI and Rules, Regulations and Bye-laws of the relevant Depository, where the Beneficial Owner maintains his/her account, that may be in force from time to time.
- 29. The Beneficial Owner and the DP shall abide by the arbitration and conciliation procedure prescribed under the Bye-laws of the depository and that such procedure shall be applicable to any disputes between the DP and the Beneficial Owner.
- 30. Words and expressions which are used in this document but which are not defined herein shall unless the context otherwise requires, have the same meanings as assigned thereto in the Rules, Bye-laws and Regulations and circulars/notices issued there under by the depository and or SEBI.
- 31. Any changes in the rights and obligations which are specified by SEBI/Depositories shall also be brought to the notice of the clients at once.
- 32. If the rights and obligations of the parties hereto are altered by virtue of change in Rules and regulations of SEBI or Bye-laws, Rules and Regulations of the relevant Depository, where the Beneficial Owner maintains his/her account, such changes shall be deemed to have been incorporated herein in modification of the rights and obligations of the parties mentioned in this document.
- 33. (SEBI vide its circular No. 21 SEBI/HO/MIRSD/DOP/P/CIR/2022/44 dated April 04, 2022 "The stock broker/stock broker and depository participant shall not directly / indirectly compel the clients to execute Power of Attorney (PoA) or Demat Debit and Pledge Instruction (DDPI) or deny services to the client if the client refuses to execute PoA or DDPI."

"I/we **acknowledge** the receipt of copy of document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

Signatures                      x \_\_\_\_\_                      x \_\_\_\_\_                      x \_\_\_\_\_  
    Sole / First Holder                      Second Holder                      Third Holder

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