

CLIENT REGISTRATION FORM



SEBI Reg. No. : INZ000074235

MEMBER :

National Stock Exchange of India Ltd.,

(NSE) TM ID: 90332

Multi Commodity Exchange of India Limited

(MCX) TM ID : 46550

CLIENT NAME

APPLICATION NO.

CLIENT CODE

BRANCH

Form No.	
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Client Name	
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Type of Account	TRADING CODE	DEMAT ID
Equity, Commodity		

Section to be updated by BRANCH / FRONTEND Team

TRADING Branch Name	
TRADING Branch Code	

For DIRECT CLIENT Accounts				
Employee Code				
Employee Name				

For AP / INDIRECT CLIENT	AP NAME	AP CODE
Accounts AP details to be updated		

Branch operations	Employee Code	Employee Name	Date of Maker entry
BRANCH			

Section to be updated by OPERATIONS / ACCOUNT OPENING

Branch operations	Employee Code	Employee Name	Date of Maker entry
Team MAKER entry			
Team CHECKER entry			

Post Account Opening Processes	Date	Name	Emp Code
Concurrent Audit			
Scanning			
KRA			

ALLREACH COMMODITIES INDIA PRIVATE LIMITED

Broking offered by ALLREACH COMMODITIES INDIA PRIVATE LIMITED

SEBI Registration No : **INZ000074235 (Trading Member of NSE - 90332, MCX 46550)**

Corporate Identity Number : U65100TN2012PTC08907

Registered Office : B-4, Basement chellamall, NO-11-11A, Sri Thiyagaraya Road, T-Nagar Chennai, Tamilnadu -600017, contact: 044-40053001.

Corporate Office : Central Rotary Charitable Society Building, NO-72/73,3 rd Cross, Vasam Nagar, Lawspet, Pondicherry-605008, **Website** : www.dojis.in and **Customer Care** : 0413-4510100

For MCX: Name of the Compliance Officer: Mr. Raj Kumar Jain Tel: 044-40053001, Email ID: allreachcom@gmail.com

For NSE: Name of the Compliance Officer: Mr. Mahalingam Tel: 0413-4510105, Email ID: compliance@dojis.in

For and grievance please contact us at Investor Grievance No: 0413-4510105 or you may write us at dp@dojis.in for DP related and trading and others: helpdesk@dojis.in

In case not satisfied with the response, please contact Depository or Exchanges on below numbers.

	NSE	MCX
Email ID	ignse@nse.co.in	grievance@mcxindia.com
Phone No	+91 22 26598190	022-6731 8888

If not satisfied with response or your grievance is still unresolved you may register complaint to SEBI on the SCORES website (link:<https://scores.gov.in/scores/Welcome.html>)

ICONS FOR ILLUSTRATION

Signature of Client	Second Holder	Third Holder
<input type="text"/>	<input type="text"/>	<input type="text"/>
Guardian	Witness	Authorized signatory
<input type="text"/>	<input type="text"/>	<input type="text"/>

Message from Allreach Team

Dear Customer,

We are happy that you have chosen us as your investment partner.

We at Allreach aim at enhancing experience and simplifying processes for our customers. This Account Opening Form is another step towards the very aim - making the process of entering a new financial relationship easier.

We take pleasure and pride in introducing this Account Opening form as one of the shortest and simplest in the industry.

Now, opening a trading account with us takes a few minutes only, leaving you more time to interact with our representative and clarify any doubts or queries that you may have.

We also request you to go through the Terms and Conditions booklet which will be appended with your KYC. This booklet covers the details of your relationship with us and helps you become an informed investor.

With this, we also urge you to write to us on helpdesk@dojis.in for feedback. We will be glad to hear from you.

Your trusted advisor always.

Warm Regards,

Allreach Team

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FOR ALLREACH TRADING ACCOUNT

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



CDSL VENTURES LIMITED
Exploring New Horizons



Please fill the form in ENGLISH and in BLOCK letters
Fields marked * are mandatory
Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number :
Application Type * : New KYC Modification KYC

KYC MODE *: Please Tick()

Normal EKYC OTP EKYC Biometric Online KYC Offline EKYC Digilocker

1. Identity Details (please refer guidelines overleaf)

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Maiden Name* (if any) _____

Fathers/Spouse's Name* _____

Date of Birth* _____

Gender* Male Female Transgender

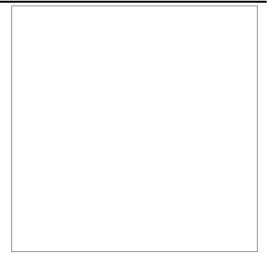
Marital Status* Single Married

Nationality* Indian Other _____

Residential Status* Resident Individual Non Resident Individual

Please Tick() Foreign Individual Person of Indian Origin

(Passport mandatory for NRIs, PIOs and Foreign Nationals)



Passport Size Photo

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

A - Aadhaar Card _____

B - Passport Number _____

C - Voter ID Card _____

D - Driving License _____

E - NREGA Job Card _____

F - NPR _____

Z - Others _____

Identification Number _____



Signature of Client

(Expiry Date) _____

(Expiry Date) _____

(any document notified by Central Government)

2. Address Details* (please refer guidelines overleaf)

A. Correspondence / Local Address*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Applicant e-SIGN

B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)

Line 1* _____
 Line 2 _____
 Line 3 _____
 City/Town/Village* _____ District* _____ Pin Code* _____
 State* _____ Country* _____
 Address Type* Residential/Business Residential Business Registered Office Unspecified

Proof of Address* (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

A - Aadhaar Card _____
 B - Passport Number _____ (Expiry Date) _____
 C - Voter ID Card _____
 D - Driving License _____ (Expiry Date) _____
 E - NREGA Job Card _____
 F - NPR _____
 Z - Others _____ (any document notified by Central Government)
 Identification Number _____

3. Contact Details

Email ID _____
 Mobile No. _____
 Tel (Off) _____ Tel (Res) _____

4. Applicant Declaration

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

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email ad- dress.

DATE : _____ (DD-MM-YYYY)
 PLACE : _____

Applicant e-SIGN

Applicant Wet Signature

5. For Office Use Only

In-Person Verification (IPV) carried out by*	Intermediary Details*
IPV Date _____ Emp. Name _____ Emp. Code _____ Emp. Designation _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) AMC / Intermediary Name : <div style="border: 1px solid black; padding: 2px; text-align: center;">ALLREACH COMMODITIES INDIA PRIVATE LIMITED</div>

FOR OFFICE USE ONLY

- Document Received
- Certified Copies
 - E-KYC code received from UIDAI
 - Date received from Offline verification
 - Digital KYC Process
 - Equivalent e-document

INSTITUTION DETAILS

Name : ALLREACH COMMODITIES INDIA PRIVATE LIMITED

Code : IN2441

Originals verified and Self attested / certified Document copies received

Details	KYC Verification & Documents verified with original carried out by	Client Interviewed By	In person Verification done by
Name of the Employee			
Employee Code			
Designation of the Employee			
Date			
Signature		.	.

E-sign of the Client

Instructions/Guidelines for filling Individual KYC Application Form

A. General Instructions:

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

B. Proof of Identity (POI):

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

C. Proof of Address (POA):

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

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

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

E. List of people authorized to attest the documents:

1. Authorized officials of Asset Management Companies (AMCs).
2. Authorized officials of Registrar & Transfer Agent (RTA) acting on behalf of the AMC.
3. KYC compliant mutual fund distributors affiliated to Association of Mutual Funds (AMFI) and have undergone the process of 'Know Your Distributor (KYD)'.
4. Notary Public, Gazette Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/ Consulate General in the country where the client resides are permitted to attest the documents

F. Online Mode Processing of KYC:

1. EKYC BIOMETRIC
 - Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Applicant details are verified using UIDAI Biometric details.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
 - Intermediary attestation on documents is exempted.
2. EKYC OTP
 - Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Applicant details are verified using UIDAI details using OTP.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
 - Intermediary attestation on documents is exempted.
3. ONLINE KYC
 - Applicant may directly upload their documents (OVD) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Virtual In Person Verification (VIPV) is mandatory as per SEBI guidelines.
 - Intermediary attestation on documents (OSV) is exempted.
4. OFFLINE EKYC
 - Applicant may directly upload their document (PAN copy) as scanned images on intermediary's portal.
 - The documents should be e-signed.
 - Digital KYC performed through Offline Aadhaar e-KYC. OVD sourced from Offline Aadhaar e-KYC.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
5. DIGILOCKER
 - Digital KYC performed through the documents (OVD) sourced from Digilocker.
 - Original Seen Verification (OSV) of documents as well as IPV / VIPV is exempted.
 - Intermediary attestation on documents is exempted.

Type of Account - Sub Status

- Individual Resident
 Individual-Director
 Individual Director's Relative
 Individual HUF/AOP
 Individual Promoter
 Minor
 Individual Margin Trading A/C (MANTRA)
 Others (specify) _____

Education Qualification : Under Graduate Graduate Post Graduate Professional

Other Details

Gross annual income range p.a. OR Net-worth in Rs (Net worth should not be older than 1 year)	<input type="checkbox"/> Below Rs.1 Lac <input type="checkbox"/> Rs. 1-5 Lac <input type="checkbox"/> Rs. 5-10 Lac <input type="checkbox"/> Rs. 10-25 Lac <input type="checkbox"/> Rs. 25 Lac - 1 Crore <input type="checkbox"/> Rs. 1 Crore - 5 Crore <input type="checkbox"/> Rs >5 Crore _____ as on _____
Occupation	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Farmer <input type="checkbox"/> Others (Please specify)
Please tick if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> Not Politically Exposed Person (PEP) <input type="checkbox"/> Not Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> None
Client Category (Only for Commodities Derivative Market)	<input type="checkbox"/> Farmers/FPOs, <input type="checkbox"/> Value Chain Participants (VCPs) <input type="checkbox"/> Proprietary traders, <input type="checkbox"/> Domestic Financial Institutional Investors <input type="checkbox"/> Foreign Participants <input checked="" type="checkbox"/> Others
Whether registered under MSMED Act, 2006	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, please provide the MSME registration certificate)
Any other other information	_____

I wish to receive the standard account opening documents i.e: Rights & Obligations (Stock Broker and Depository Participant) , Uniform Risk Disclosure Documents and guidance note detailing Do's and Dont's in the below mentioned mode :-

- Electronic Physical

Additional Details

Whether you wish to receive physical contract note or Electronic Contract Note (ECN)/Statement of A/c please specify: Physical Electronic

Specify your Email Id, if applicable : _____ Number of years of Investment / Trading experience : _____

Whether you wish to avail of the facility of Internet Trading/Wireless Technology (please specify) : Yes No (Strike off, if not applicable)

Any other information : _____

DP Account(s) Details

In case, client does not have a DP Account, this column may not be filled in.

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

Past Actions

Details of any action taken / proceedings initiated / pending including but not limited to debarment / blacklisting / de-registering / name strike off from ROC records / declaring defaulter / monetary penalty / adverse arbitration award by SEBI / Stock exchange / Government Authority / Statutory Authority / MCA or any other authority against the applicant / constituent or its Partners / promoters / whole time directors / authorized persons in charge of dealing in securities:

- Yes No If yes, provide details : _____

Signature of Client

Dealings Through Authorized Persons and Other Members Yes No

If the client is dealing through any other Member / Authorized Person (AP), provide the following details (incase dealing with multiple Members/APs, provide details of all in a separate sheet containing all the information as mentioned below):

Member's / AP's Name : _____
 Exchange : _____
 Registration number : _____
 Concerned Member's Name with whom the AP is registered : _____
 Registered office address : _____
 _____ Pin Code : _____
 Phone : _____ Fax : _____
 Email Id : _____ Website : _____
 Client Code _____
 Details of disputed / dues pending from / to such Member / AP : _____

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

NSE - CASH	
NSE - FUTURES	
NSE - OPTIONS	
MCX - FUTURES	
MCX - OPTIONS	

I wish to optout **NSE CASH**,
(Strike off,if not applicable) "In future, if you wish to trade on any new segment/exchange, please submit a duly signed authorization/letter to us."

Please sign here if you are choosing all the segments:

Signature of Client

Purpose of Trading

Hedging Investment Others(Specify) _____

GST Details

GST Registration : _____ GST Location : _____

Introducer Details

Name of the introducer : _____
 (Surname) _____ (Name) _____ (Middle Name) _____
 Status of the Introducer Authorized person Existing client Others, please specify : _____
 Address of the introducer : _____

 PAN No. _____ Client code _____
 _____ Tel. No. _____
 Signature of the Introducer : _____

Client Categorization

Pls select (✓) on the below appropriate category depending upon your proposed nature of your activity against each product type

Commercial <input checked="" type="checkbox"/>	Non-Commercial <input checked="" type="checkbox"/>
Product type	
Bullion <input type="checkbox"/>	Bullion <input type="checkbox"/>
Base Metals <input type="checkbox"/>	Base Metals <input type="checkbox"/>
Energy <input type="checkbox"/>	Energy <input type="checkbox"/>
Agri-Commodities <input type="checkbox"/>	Agri-Commodities <input type="checkbox"/>

Note : With a view to understand the extent of involvement of the physical market participants and to identify the nature of participants in the Commodities Derivative Market, Members of the Exchange are required to Categorize the identified Clients under one of the following category:

1. COM: Commercial Client includes Value Chain/ Physical market participant/ exporter/ importer/ having direct/indirect Exposure to the underlying Commodity
2. NON-COM: Non-Commercial Client includes Trader/ Arbitrageur
3. N.A.: Not Applicable (Client not dealing in the product)

HIGH Value Transactions :

I/We may undertake high value transaction of Rs.5 lakhs or more in a day depending on market volatility in any of the Exchange/s, where I/We am/are registered as client with Allreach. Purposes of doing transaction are: (Please tick the option whichever is applicable.)

Trading / Speculation Arbitrage Hedging All of above

Dealing / Trading in Commodities

I/We wish to trade in the following commodities with the Exchanges**.

(tick (✓) whichever is applicable)

** In future, if you wish to trade on any new commodity(ies) please submit a duly signed consent letter to us.

MCX Name of the Commodity	Tick if Applicable	MCX Name of the Commodity	Tick if Applicable
GOLD	<input type="checkbox"/>	CRUDEOILMINI	<input type="checkbox"/>
SILVER	<input type="checkbox"/>	NATGASMINI	<input type="checkbox"/>
SILVERMIC	<input type="checkbox"/>	ALUMINI	<input type="checkbox"/>
ALUMINIUM	<input type="checkbox"/>	ZINCMINI	<input type="checkbox"/>
BRASS	<input type="checkbox"/>	LEADMINI	<input type="checkbox"/>
COPPER	<input type="checkbox"/>	SILVERMINI	<input type="checkbox"/>
LEAD	<input type="checkbox"/>		
NICKEL	<input type="checkbox"/>		
ZINC	<input type="checkbox"/>		
CRUDEOIL	<input type="checkbox"/>		
NATURALGAS	<input type="checkbox"/>		
CARDAMOM	<input type="checkbox"/>		
CASTORSEED	<input type="checkbox"/>		
COTTON	<input type="checkbox"/>		
MENTHAOIL	<input type="checkbox"/>		
PEPPER	<input type="checkbox"/>		
RBDPMOLEIN	<input type="checkbox"/>		
CPO	<input type="checkbox"/>		
RUBBER	<input type="checkbox"/>		

Signature of Client

UID No : _____

Bank Accounts No: 1	
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current
Bank Name (Through Which Transactions Will Be Routed)	_____
Bank Account No.	_____
Bank Address	_____
	PIN _____
	IFSC Code : _____ MICR No : _____ NEFT Code : _____
Bank Accounts No: 2	
	Optional
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current
Bank Name (Through Which Transactions Will Be Routed)	_____
Bank Account No.	_____
Bank Address	_____
	PIN _____
	IFSC Code : _____ MICR No : _____ NEFT Code : _____

Signature of Client

NOMINATION FORM

ALLREACH COMMODITIES INDIA PRIVATE LIMITED B-4, Basement, Chellamall, NO.11-11A Sri Thiyagaraya Road, T.Nagar, Chennai, Tamilnadu-600017.	FORM FOR NOMINATION (To be filled in by individual applying singly or jointly)
---	--

Date		UCC / DP ID		Client ID	
-------------	--	--------------------	--	------------------	--

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

Nomination Details

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

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]	%	%	%
Any odd lot after division shall be transferred to the first nominee mentioned in the form.				
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 Account No <input type="checkbox"/> Proof of Identify <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 Guardian						
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 Account No <input type="checkbox"/> Proof of Identify <input type="checkbox"/> Demat Account ID						
Name(s) of holder(s)						Signature(s) of holder*	
Sole / First Holder (Mr./Ms.)							
Second Holder (Mr./Ms.)							
Third Holder (Mr./Ms.)							

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

Note :

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

The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

DECLARATION FORM FOR OPTING OUT OF NOMINATION

To	Date	
ALLREACH COMMODITIES INDIA PRIVATE LIMITED		
B-4, Basement, Chellamall, NO.11-11A		
Sri Thiyagaraya Road, T.Nagar,		
Chennai, Tamilnadu-600017.		
UCC/DP ID		
Client ID (only for Demat account)		
Sole/First Holder Name		
Second Holder Name		
Third Holder Name		
<p>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.</p>		
Name and Signature of Holder(s)*		
1. _____	2. _____	3. _____

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

Declaration for Opening Trading Account Along with Acceptance of KYC Document Booklet.

Declaration for Opening Trading (for Equity and / or Commodity) and Account Along with Acceptance of KYC Document Booklet.

1. I am desirous of opening the trading (for Equity and / or Commodity) account with **Allreach Commodities India Private Limited** and I am in the process of executing client registration documents relating to the opening of trading account.
2. I have furnished all the details required in the KYC form as per SEBI/Exchange / Depository requirements. I confirm having read/been explained and understood the contents of the KYC documents which are provided to me in separate booklet. The KYC document booklet includes the following:-
 - a) Instructions and Checklist for filling the KYC, Ckyc form and FATCA Declaration
 - b) Information on Anti money Laundering
 - c) Rights and Obligations of the parties relating to Trading account (Including internet and wireless technology-based trading) prescribed by SEBI and Stock Exchanges and Rights and Obligations between Beneficiary Owner and Depository Participant
 - d) Uniform Risk Disclosure Document (RDD) prescribed by SEBI and Stock Exchanges, including guidance note and Do's and Don'ts for clients
 - e) Policies and Procedures (under paragraph 8 of SEBI Circular No: MIRSD/SECIR-19/2009 dated December 3, 2009)
 - f) Additional terms and conditions (for Equity and / or Commodity) - (Voluntary Document)
 - g) General Information for Trading account
3. I understand that the KYC document booklet is in accordance of the exchanges and/or SEBI/DP requirements applicable for opening trading/DP account. I understand and agree that any amendment/modifications as required by the exchanges and/or regulators will be applicable to me at all point of time and changes if any in future will be intimated to me.
4. I have received the booklet with above mentioned contents. I also confirm having read/been explained and understood the contents of the documents on policy and procedures of the stock broker and their Terms & Conditions in the booklet.

Client Name : _____

Date : _____

Signature of Client

ALLREACH COMMODITIES INDIA PRIVATE LIMITED

I/ We agree to pay the charges as per following charges structure for our Trading account with you

effective _____

Trading Client ID _____

CHARGES HEAD	PER LOT	GOLD PLAN
Equity Intraday	0.03 % of Turnover	Rs. Per Crore
Equity Delivery	0.1 % of Turnover	Rs. Per Crore
Equity Futures	Rs.20/-per lot or 0.03% of Turnover	Rs. Per Crore
Equity Options	Rs.20/- per lot	Rs. Per Lot
Commodity Futures	Rs.20/-per lot or 0.03% of Turnover	Rs. Per Crore
Commodity Options	Rs.50/- per lot	Rs. Per Lot
Signature		

Client name _____

Date : _____

VOLUNTARY ADDITIONAL TARIFF SHEET – TRADING ACCOUNT

In addition to the CHARGES mentioned in the tariff sheet, the following charges will be levied, if the Services opted by the Client

Please sign in the relevant boxes where you wish to opt the additional services and not chosen should be struck off by the Client

Trading Client ID _____

Other Services	Option Opted	Signature of the Client
In addition to Digital Contract, if the client requires Physical Contract Note shall be charged @ Rs.50/- per exchange per day	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Call & Trade charges /Intraday Square Off ofMIS/CO/BO Order: Rs.20/- plus GST per executed order	Yes <input type="checkbox"/> No <input type="checkbox"/>	
UPI/Payment Gateway facility is available and charges of Rs.10/-per transaction plus GST irrespective of the amount transferred in single transaction	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Clearing Member Charges: will be Charged @0.03% on Turnover + GST for options and 0.0035 % on Turnover + GST for all other Segments	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
SMS Charges – Rs .50/- per month	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Debit my Trading account for activation charges	One Time Charges - Rs.200/- <input type="checkbox"/>	

Client name _____

Date : _____

Signature of Client

Terms & Conditions :

- a) In addition to the above mentioned brokerage all statutory/regulatory levies and other charges including but not limited to Exchange Transaction charges, Commodity Transaction Tax, Warehouse charges, Stamp Duty (as applicable state wise), GST and any other charges which may be levied by Exchange or any regulatory/ government authorities shall be charged/recovered from you separately over and above the brokerage rate as per current applicable rate and if there is any revision in the rates, the same will be applicable. Any change in the statutory levies, if any, shall be reflected in the respective contract note.
- b) **Delayed payment charges not exceeding 2.00 % p.m.** on the debit balances if any, in client's ledger account and Margin money / Pay-in obligation not settled by the client within the stipulated time frame.
- c) Auction charges, penalties, fines levied by Exchange/s or any other regulatory authority for client limit violation/ short margin/client code modification/delivery default or for any other violation/default as the case may be, will be charged on actual basis.
- d) In the event of **cheque bounce Rs 250/-** per instance, will be debited.
- e) Courier / postage charges for Physical statement **Rs: 20 + Courier Charge.**

I/We have understood and agreed the above terms & conditions related to the charges listed above being charged to me/us, as applicable and agree to abide by the same.

Client Signature : _____
Client Name : _____
Place : _____
Date : _____

(The authorization shall be signed by the client only and not by any person authorized on his behalf)

Allreach does not accept any fees / payments / charges in cash.

Please do not make any payment in cash

Allreach Commodities India Private Limited - B-4, Basement, Chella mall, NO.11-11A,
Sri Thiyagaraya Road, T -Nagar, Chennai, Tamilnadu -600017

Financial Status and Other Details under PMLA

The information is sought under the Prevention of Money Laundering Act, 2002,

The rules and SEBI and Exchange Guidelines issued on Anti Money Laundering

Gross Annual Income Details (for previous 3 yrs)	Year 1	<input type="checkbox"/> Below Rs. 1 Lac <input type="checkbox"/> Rs. 10-25 Lac	<input type="checkbox"/> Rs. 1-5 Lac <input type="checkbox"/> Rs. 25 Lac - 1 Crore	<input type="checkbox"/> Rs. 5-10 Lac <input type="checkbox"/> Rs. 1-5 Crore	<input type="checkbox"/> Rs. >5 Crore
	Year 2	<input type="checkbox"/> Below Rs. 1 Lac <input type="checkbox"/> Rs. 10-25 Lac	<input type="checkbox"/> Rs. 1-5 Lac <input type="checkbox"/> Rs. 25 Lac - 1 Crore	<input type="checkbox"/> Rs. 5-10 Lac <input type="checkbox"/> Rs. 1-5 Crore	<input type="checkbox"/> Rs. >5 Crore
	Year 3	<input type="checkbox"/> Below Rs. 1 Lac <input type="checkbox"/> Rs. 10-25 Lac	<input type="checkbox"/> Rs. 1-5 Lac <input type="checkbox"/> Rs. 25 Lac - 1 Crore	<input type="checkbox"/> Rs. 5-10 Lac <input type="checkbox"/> Rs. 1-5 Crore	<input type="checkbox"/> Rs. >5 Crore
Net worth Details (as on account opening date)		<input type="checkbox"/> Below Rs. 1 Lac <input type="checkbox"/> Rs. 10-25 Lac	<input type="checkbox"/> Rs. 1-5 Lac <input type="checkbox"/> Rs. 25 Lac - 1 Crore	<input type="checkbox"/> Rs. 5-10 Lac <input type="checkbox"/> Rs. 1-5 Crore	<input type="checkbox"/> Rs. >5 Crore

Please tick mark the additional applicable category to you

- Non-resident client
- High net-worth client (having annual income + net worth of more than INR 5 crore)
- Civil Servant or family member or close relative of civil servant
- Bureaucrat or family member or close relative of bureaucrat
- Current or Former MP or MLA or MLC or their family member or close relative
- Politician or their family member or close relative
- Current or Former Head of State or of Governments or their family member or close relative
- Senior government/judicial/military officers or their family member or close relative
- Senior executives of state-owned corporations or their family member or close relative
- Companies offering foreign exchange offerings
- None of the above

Self Declaration of Income and Network

I, _____ having PAN no. _____ Resident of _____
 _____ (full address) do hereby solemnly affirm and declare as under: -

- a) My annual income is Rs. _____ (Source of Income _____)
- b) My DP holding as on date is attached herewith. The total valuation as on _____ is Rs. _____
- c) My Network as on _____ is Rs. _____

We hereby further confirm/undertake that the investments/trading done in securities market are from our own/borrowed sources of funds and we confirm that the funds utilized for trading activity by us is in compliance with the rules, regulations and guidelines stipulated under PMLA.

I certify that the above information given by me is true.

Client Name _____

Signature of Client

DEMAT DEBIT AND PLEDGE INSTRUCTION

Details of Client / Principals

Name of Client/First Holder	
Address of Client	
Trading Account No.	
Depository Participant Name	GLOBE CAPITAL MARKET LIMITED
DP ID CDSL	12020600
DP ID NSDL	IN300966
Demat Account No.	

Dear Sir/Madam,

I/We executing the Demat Debit and Pledge instruction in favour of Allreach Commodities India Private Limited, authorising them to operate afore said beneficiary account for the below mentioned specific purpose.

Sr. No.	Purpose	Signature of First / Sole Holder*	Signature of Second Holder*	Signature of Third Holder*
1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the Same stock broker.			
2	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member(CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.			
3	Mutual Fund transactions being executed on stock exchange order entry platforms.			

* The same may be signed physically against each purpose of DDPI.

GLOBE CAPITAL MARKET LTD

Name of DP / CC	DP ID	Account Type	Account No	CM BP ID
GLOBE CAPITAL MARKET LTD	12020600	TM POOL	02136358	--
GLOBE CAPITAL MARKET LTD	12020600	CORPORATE TM CLIENT SEC MARGIN PLEDGE	01895565	--
GLOBE CAPITAL MARKET LTD	12020600	CORPORATE TM CUSPA	01894498	--
GLOBE CAPITAL MARKET LTD	IN300966	TM POOL NSE	11242290	IN547406

Date : _____ Place : _____

Acceptance of DDPI

I, _____
 _____ (Name, Address, Designation) on behalf of Allreach commodities

India Private Limited accept appointment as an agent under this DDPI and undertake the powers conferred hereunder shall be exercised by me and/or by any other person authorized by Allreach India Private Limited honestly, in Accordance with the conditions and directions set out above.

(Date & Signature of Agent) _____

Voluntary Authorisation Letter

Date :

ALLREACH COMMODITIES INDIA PRIVATE LIMITED

B-4, Basement, Chella mall, NO.11-11A,

Sri Thiyagaraya Road, T.Nagar,

Chennai, Tamilnadu-600017.

From :

Client Code :

DP Client :

By ticking on YES you authorize ALLREACH to maintain the Trading Account as Running Account thereby adjusting any obligations and receivables.

Dear Sir,

Subject : Voluntary Authorization letter

1. Authorization for Periodic Settlement of Funds and Securities Yes No

- a. To maintain my/our account on a running account basis and adjust any amounts receivable from me against any credits standing into my account or from my forthcoming payouts payable by me/ us to ALLREACH COMMODITIES INDIA PVT.LTD, where I am / we are registered with you as a client.
- b. I/We request you to keep my/our funds with you to meet my/our pay in obligations in the succeeding settlements in the same segment as well as other segments of NSE and/or MCX where I/We am/are registered with you as a client.
- c. Further it is observed that many times the date on which payment is due to me/us from you and the date which I am/ we are required to make payment to you are very close and therefore exchange of cheques become unnecessary paper work. Hence, I/We request you to maintain the running account facility with you I/We agree that you shall not be required to pay any interest/ charges/ cost in respect of funds on a running account basis.
- d. I/We hereby give my/our consent for periodic settlement of my /our funds.
- e. I am /We aware that in terms of SEBI circular CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated June 20, 2019 any excess securities available in your Client Collateral / Collateral account will be released to me/us along with funds settlement after making necessary retention as may be permitted by regulators.

However, my/our preference for periodic settlement of funds and securities is as follows: -

- a. Monthly b. Quarterly

- f. I/We declare that this authorization is revocable by me/us at any time without giving any prior notice of such revocation to ALLREACH COMMODITIES INDIA PRIVATE LIMITED.
- g. I/We agree that for any pay outs from my trading account, I/We specifically shall intimate about the same and ALLREACH COMMODITIES INDIA PRIVATE LIMITED. shall upon due scrutiny of my account and upon adherence to its policy/procedure, shall release eligible amount to me/us. I/We agree that this authorization shall have an equal binding effect to the successors, executors and assigns of ALLREACH COMMODITIES INDIA PRIVATE LIMITED
- h. I/We hereby authorize you to transfer/adjust all the additional funds lying in my/our ledger account after meeting my obligations/dues, to the collateral account to avail exposure or keep all funds in your margin account with you to meet my margin obligations or keep the same with any exchange and/or with clearing member in the form of fixed deposit or any other form to avail exposure/meet margin requirements. This arrangement would be without any consideration or the funds so moved will not bear any interest/commission payable to me/is in the event of above arrangement.

2. Authorization for receiving ECN's and any documents/communications in electronic form by E-mail from the Stock Broker for Equity and Commodity Derivatives. YES NO

I am registered as a client and having the captioned trading account and Depository account hereby authorize ALLREACH for the following: or SMS.

- a) I/we authorize ALLREACH to issue me/us electronic contract notes (ECN's), bills, trade confirmations, ledgers, daily margin statements, statement of accounts for periodical settlement of funds and securities, any notices, circulars, amendments and such other correspondence or communication related to my/our trading account (hereinafter referred to as "Documents") and wherever required duly authenticated by means of a digital signature as specified in the information technology Act, 2000 and the rules made there under to the E-mail ID as mentioned hereunder:
- b) I/We understand that the documents received on e-mail/displayed on website are for my/our convenience. I/we will take all the necessary steps to ensure confidentiality and secrecy of the login name & password of the internet/email account. I / we are aware that the documents as may be accessed by other entities in case the confidentiality/ secrecy of the login name and password is compromised.
- c) I/We shall verify the authenticity of the e-mails which I/we shall receive. ALLREACH shall not be responsible, if I/we do not receive the documents due to incorrect email ID and/or technical reasons.

Signature of Client

- d) I authorize Allreach to issue me bills, ledgers, monthly/quarterly/yearly demat transaction cum holding statements, any notices, circulars, amendments and such other correspondence or communication related to my demat account (hereinafter referred to as "Documents") and wherever required duly authenticated by means of a digital signature as specified in the information technology Act, 2000
- e) I understand that wherever the e-mails have not been delivered to me or has been rejected (bouncing of mails) from the e-mail ID of mine, Allreach would send physical document to me. I further hereby agree that Allreach have fulfilled the legal obligation, if the above documents are sent electronically to the above-mentioned e-mail ID. I agree that Allreach will not be responsible for non receipt of documents sent via electronic delivery due to change in email address or for any other reason which inter alia include my email/inbox running out of capacity, malfunction of my computer system/server/internet connection, mails received by frauds/imposters etc. I also agree that Allreach shall not take cognizance of out-of office/ out-of-station auto replies and I shall be deemed to have received such electronic mails.

I shall inform Allreach in writing if there is any change in my registered e-mail ID.

3. Sharing of Data & Information :- Yes No

- a) I have opened a trading account with Allreach having the captioned client code and demat account with Allreach having the captioned client code and am interested in knowing about various financial products /facilities offered by your associate/group companies. I am aware that associate/group companies are required to obtain information about me and my transactions for providing various financial products/facilities.
- b) I authorize you, your group companies and associates to keep me informed with any financial product which Allreach, its group companies and associates presently issue, deal in, or distribute or may, from time to time, launch, issue, deal in or distribute through e-mail, SMS, telephone, print media or otherwise as may be allowed.
- c) I hereby voluntarily accept and expressly authorize Allreach to get the information from Allreach or from any other Depository Participant of its group/associate companies with whom I have the Demat account and share/disclose or use in any manner, the information/documents/data about me and our transactions, with group of associates companies which is offering the products / facilities. Information provided by me in the Trading and Demat Account Opening Kit. Transaction cum holding statement with Allreach and Any other related information. My holdings in stocks/securities. Ledger balances in my Trading/Demat Account across all Exchanges
- d) I authorize you To the extent appropriate for our relationship with you, personal information may be shared for the following purposes: -
- I. to comply with applicable laws, rules and regulations, including anti-terrorism, KYC, anti-money laundering and tax reporting rules and regulations
 - II. to comply with legal process, to respond to requests from public, regulatory or government authorities (including authorities outside your country of residency), and to allow us to pursue remedies and limit damage
 - III. to any of our associate / affiliate / group entities including our service providers performing delegated outsourced function to enable them to perform internal business processes (which facilitate transactions) such as risk management purposes, data analysis, audits, developing and improving new products and services, etc
 - IV. to any of our associate/affiliate/group entities to enable them to provide you with appropriate products and services
- e) I have no objection to Allreach sharing the above information or any such other information, about me/us with its group/associate companies or affiliates. This is without legal obligation on you, your group companies and associates to so inform and you or they may, in their discretion, discontinue sending such information.

Name : _____ Place : _____

Signature of Client

4. Request for trading in commodity forward contracts/commodity derivatives on MCX Yes No

I/We, the undersigned, have taken cognizance of circular no. MCX/338/2006 date August 21, 2006, MCX/541/2006 dated December 7, 2006 and MCX/T&S/014/2012 dated January 12, 2012 issued by Multi Commodity Exchange of India Ltd (MCX) on the guidelines for calculation of net open positions permitted in any commodity.

I/We hereby undertake to comply with the same. I/We hereby declare and undertake that we will not exceed the position limits prescribed from time to time by MCX or SEBI and such position limits will be calculated in accordance with the contents of above stated circular of MCX as notified from time to time.

I/We undertake to inform you and keep you informed if I/any of our Partners/directors/ karta /trustee or any of the partnership firms/companies/HUFs/Trusts in which I or any of above such person is a partner/director/ karta/trustee, takes or holds any position in any commodity forward contract/ commodity derivative on MCX through you or through any other member , to enable you to restrict our position limit as prescribed by the above referred circulars as modified from time to time.

I/We confirm that you have agreed to enter orders in commodity forward contracts/commodity derivatives for me/us as your clients on MCX only on the basis of our above assurances and undertaking.

5. Acceptance of securities as collateral for any or all segment(s) Yes No

I/we _____ (PAN _____) having my /our Trading

Account with do hereby provide my/our consent/authorization to further pledge/deposit my/our securities lying with you or in my/our Beneficial account (Demat Account No) with the clearing member/clearing corporation for additional exposure availed by me/us during the period of my relationship with you.

I/ We hereby declares and assure that

- (i) the said Securities are owned by me/us,
- (ii) the Said Securities are in existence and are free from any charge, lien or encumbrance, whether prior or otherwise,
- (iii) the Said Securities will be subject to the creation of pledge in favour of or for the benefit of Clearing corporation and further that the Securities over which pledge may be created in future would be in existence and owned by me/us at the time of creation of such pledge and that the Said Securities to be given in future as security to clearing corporation would likewise be unencumbered, absolute and disposable property of the clients
- (iv) Allreach Commodities India Private Limited or its Clearing Member is authorized to do all such acts and things, sign such documents and pay and incur any such costs, debts and expenses as may be necessary and the same shall be subject to terms and conditions as contained herein
- (v) the Securities are subject to the first priority and lien in favour of Clearing corporation to secure, my/our obligations and that my/our rights or interests with respect to the Said Securities shall be subject and subordinate to the rights, claims and interests of Clearing corporation in respect of the Said Securities
- (vi) Clearing corporation may invoke the pledge without my reference or permission and upon receipt of the Said Securities, Clearing corporation may utilize the proceeds in meeting my/our obligations in such manner as it may deem fit and that such invocation of pledge will be final and irrevocable against the Clearing Member and me / us
- (vii) I/We shall not make any claims or demands for refund or any reimbursement in relation to the Said Securities.
- (viii) I/we hereby confirm that I/we read the terms and conditions to this effect and fully aware of the consequences of the same.

6. Further Representations and Declarations cum undertaking Yes No

I/ We represent, declare and undertake as under:

- I. I / We maintain a trading account and also maintain Comtrack account with Allreach Commodities India Private Limited (Comtrack Participant) collectively herein referred to as Allreach
- II. I/ We intend to execute delivery based buy and/or sell transactions in such of the commodities allowed by MCX other Commodity Exchanges and/ or by Allreach through my/our trading and/or Comtrack account maintained with Allreach and for the purpose have read and understood the Rules/Regulations / Terms and Conditions for delivery based trading stipulated by concerned Regulating Authority and/or Authorities and / or Allreach and declare and undertake to always comply / abide such rules/regulations/terms and conditions as may be applicable from time to time.
- III. I/ We hereby declare that, I/we would undertake such delivery based commodity trading only upon knowing full consequences in respect of the losses which may arise on any count including but not limited to the Fire, Flood, Earthquake, Burglary, and Spontaneous Combustion of Agro

Signature of Client

Goods kept in the Commodity Exchange/s accredited or non-accredited warehouses in physical/electronic Form, liquidation of such commodity trades on expiry dates or otherwise.

- IV. I/ We also undertake to bear all the losses arising on account of the seizure which may arise due to the stock holding limits which may be imposed by the different states from time to time under the Essential Commodities Act,1955 and/or any other applicable regulations;
- V. I/ We also undertake to accept the perils attached with Local Sales Tax Laws, and under applicable rules/laws including but not limited to the Agricultural Produce Marketing Committee (APMC) or any other statutory body's rules and the amendments thereto which may have the effect to change the entire value of the underlying commodities traded and/or held by me/us, at relevant times.
- VI. With regard to Voluntary document titled "Terms and Conditions" executed and submitted by me/us with Allreach for the purpose of opening trading account and/or comtrack account with Allreach herein referred to and more particularly clauses relating to "Trade obligations" and "Conditions" of the use of the services referred to therein, I/We herein further declare, undertake and irrevocably authorize Allreach that:-
 - a) In case there were to be any default committed by me/us towards margin and/or other payments during the course of trading and more particularly commitment or continuation of any default by me/us on the Expiry date (Date) or the Final Expiry Date(FED) (Date) or under any other situation warranting such liquidation (Date) in respect of the commodity traded by me/us where such Date may be stipulated by the Concerned Regulator/Commodity Exchange or Allreach or accredited or non-accredited warehouse of the Exchange or its assayer where the commodity is kept by me/us, then in such a situation, I/whereby specifically and severally authorize Allreach to liquidate such commodity either in part or in full for and on my/our behalf and upon my/our cost upon such terms and conditions and in such manner as Allreach may be deem it fit and proper.
 - b) For the purpose of enabling Allreach initiating actions contained herein above at clause I/We hereby further severally authorize Allreach from time to time to take all requisite actions as may be deemed fit and proper including but not limited to appoint / engage C&F Agents and/or third parties for my / our behalf and at my/our cost, provide requisite instructions/writings to C&F Agents and / or third parties for and on my/our behalf for such liquidation trades /transactions, not allowing any further trade until settlement of dues is completed for such trades/transactions by me/us and to transfer such commodity to its pool account for and on my/our behalf for liquidation purposes so as to effectively carry out my/our instructions/authorizations herein contained and herein provided in favor of Allreach
 - c) I/We hereby further agree undertake and indemnify to fully reimburse and pay to Allreach against all costs, charges, fees and/or expenses which Allreach may have to incur while carrying-out the actions referred to herein this
 - d) I/We hereby further declare and agree that this declaration cum undertaking forms part and parcel of KYC documents submitted by me/us to Allreach and be always read and interpreted in conjunction therewith. Further, I/We hereby agree that in pursuance of this declaration cum undertaking, I/We hereby ratify all actions which may have been initiated by Allreach relating to any of my /our trades and transactions; and

I/ We also further declare and undertake that I/We shall always indemnify and/or keep Comtrack Participant ALLREACH COMMODITIES INDIA PRIVATE LIMITED)/ or to any of the associate / group companies of Allreach with which I/We shall have dealings of whatever nature and any / all of its /Their respective Directors/officials/employees and each of them always indemnified against all costs/charges and/or losses as may arise on account of each of them severally acting in pursuance of this declaration-cum-undertaking-cum-authorization indemnification and further declare and undertake that under no circumstances it/they shall be severally held liable and/ or responsible for any cost charges/loss incurred by me/us on account on any trades/transactions for any of the above mentioned events herein contained.

Trading Code : _____

Comtrack Account ID : _____

Name _____

Signature _____

Place : _____ Date : _____

NERL / CCRL ACCOUNT Details

To be filled and submitted by clients holding NERL / CCRL account

1. Name of Client : _____

2. Client Address : _____

3. PAN No : _____

4. Bank Details (other than as mentioned in Annexure 1 Part II):

Bank Name	
Branch Address	
Bank Account No.	
Account Type : Saving / Current / Others	
MICR Number	
IFSC Code	

5. Name of Trading Member : **ALLREACH COMMODITIES INDIA PRIVATE LIMITED**

6. Trading Member ID : **MCX - 46550**

7. NERL/CCRL Details of client:

Sr. No.	
Repository Participant Name	
NERL / CCRL Participant ID	
NERL / CCRL Account No. of Beneficiary	

DECLARATION

I/We hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I/We undertake to inform you of any change 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.

Signature of Client : _____

Place : _____

Date : _____

Note :

1. Please provide a certified copy of NERL/CCRL master or a recent NERL/CCRL holding statement issued by a Repository Participant bearing name of Client.
2. In case the client has multiple NERL/CCRL account, please provide proof and details of the same.
3. In case of PAN provide a certified copy of PAN.
4. In case of Bank account provide copy of cancelled cheque as proof for all the bank account details provided.

Request for SMS and E-mail Alerts from Stock Exchange/s & Stock Brokers

(Reference to SEBI circular Ref. No. CIR/MIRSD/15/2011 dated August 02, 2011)

To ,

ALLREACH COMMODITIES INDIA PRIVATE LIMITED

B-4, Basement, Chella mall, NO.11-11A,
Sri Thiyagaraya Road, T.Nagar,
Chennai, Tamilnadu-600017.

Exchanges to This document and the details that you furnish will allow us and the send you all relevant information of your account and transactions by SMS and e-mail.

Dear Sir,

Sub: SMS and E-mail alerts from Stock Exchange/s & Stock Brokers for my Trading Account No.

with you

I/We request you to activate the facility of SMS and Email alerts from Stock Exchanges/Stock Brokers for transactions in the above mentioned trading account.

Yes, I / We wish to receive alerts by SMS / EMAIL

By SMS By EMAIL By SMS & EMAIL *

* If opted for both SMS and Email facility, it is mandatory to give both the Mobile number and Email ID.

If you wish to receive alerts by SMS/E-mail, the following options are available (Tick any one and give the details accordingly)

A) I/We wish to receive alerts from the Stock Exchanges/Stock Brokers. Kindly note that if the mobile no/email ID mentioned here is different from the one provided in my KYC, then this mobile no/Email ID shall prevail and I/We give my consent to details being send to this mobile number/email ID. Kindly update your records accordingly.

- My Mobile no. _____ is registered in the name of _____

- My Email Id is _____

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

B) I/We desire to give mobile number/email id of family member. I/We give my consent to make available my/our trade information to my Family Member and the mobile number/email Id of my family member is as under. ('Family' would mean self, spouse, dependent children and dependent parents. Provided such Family Member is also a client of the said broker)

Name of Family Member	Relationship with client	Type of service (SMS/Email/Both SMS & Email) *	Mobile No. of Family Member	Email ID of Family Member	Client Code

Signature of Client

Client Name : _____

Trading Authorization Form - Voluntary

Date :

ALLREACH COMMODITIES INDIA PRIVATE LIMITED

B-4, Basement, Chella mall, NO.11-11A,
Sri Thiyagaraya Road, T.Nagar,
Chennai, Tamilnadu-600017.

Sub : Trading Authorization Form Opting Not opting

Ref : Trading Account : _____

1. This is reference to my aforementioned Trading Account with Allreach Commodities India Private Limited opened by executing various KYC documents to trade on various exchanges
2. Due to nature of my work and my other pre-occupations, I am unable to personally trade / invest / give orders/ convey investment decisions effected through the aforementioned trading account.

3. Mr. / Ms. _____ (Family Representative - FR) S/o, D/o, W/o, Mr./ Ms. _____
Email Id of FR _____ aged about _____ years, residing at _____

_____ is my _____ (relationship) who has good knowledge of securities market and has got prior experience with respect to investment in securities market and I have full faith and confidence in him. As such I hereby appoint and authorize Mr. _____ as my FR in relation to taking investments decisions, investing / trading in securities through the trading account being opened by me with Allreach.

4. Any instructions given to or received from Mr. / Ms. _____ (Name of the person to be Authorized) in connection with the said trading account will be treated as instructions given to or received from me.
5. I, further, hereby undertake to honor all obligations arising out of the orders placed by Mr. / Ms. _____ (Name of the person to be Authorized) by virtue of this authority letter and I indemnify and shall keep Allreach Commodities India Private Limited indemnified from any and all losses arising out of such orders.

PLEASE READ CAREFULLY

NOW THROUGH THIS AUTHORIZATION LETTER I do hereby nominate, appoint and constitute Mr. /Mrs. _____

as my true and lawful FR to do the following acts, deeds and things on my behalf:

1. To buy, sell or in any manner trade in or deal with (including but not limited to setting off, alteration or closing out of transactions and freezing of the account) securities (as defined in Section 2h of the Securities Contracts Regulation Act, 1956 which includes equity, currency and commodity derivatives) on the NSE,MCX and / or any other stock exchange (s)(including facilities/mechanism offered by Exchange/s like Margin Trading, Securities Lending and Borrowing, etc.) my FR thinks fit through my aforementioned trading account.
2. To the extent permitted by Allreach, place orders with Allreach for the aforesaid purposes and to the extent permitted by Allreach to cancel revoke or alter such orders, to acknowledge contract notes and any other documents as may be required by Allreach.
3. To receive and give / effect trade confirmations, SMS confirmations, email confirmations, letters / notices payment/receipt instruction and any other communications including margin shortfall and squaring up of open position due to margin shortfall from and to Allreach (in addition to the documents / confirmations received and executed / effected by me) and to sign all documents in relation to investing / trading in securities.
4. I assume full and complete responsibility for all the investment decision (s) / transaction (s) effected by the FR and that I am not entitled to hold Allreach, its officers, directors, employees, agents and affiliates for any loss / liability arising out of the investment decision (s) and / or transaction (s) effected by the FR on my behalf. I confirm that I will receive all trade details / obligation details etc. pertaining to my trading account, from my FR as and when trade transactions were affected in my account and undertake to confirm trades / statement of accounts as and when called upon to do so
5. I hereby agree that I shall not alter or revoke this Trading Authorization with written notice to my FR as well as to Allreach and that the revocation or alteration shall not affect acts deeds or things done by my FR in relation to Allreach or in relation to the securities transactions prior to such revocation or alteration being communicated to Allreach and I hereby agree to ratify and confirm all and my whatsoever my FR shall lawfully do purport to do or cause to be done by virtue of this Letter of Authorization

Signature of Client

Important Information

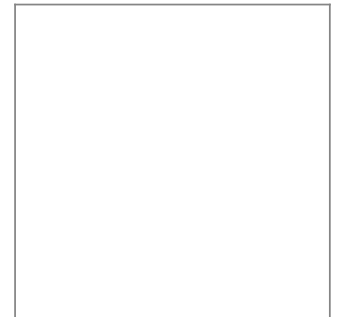
'Family Representative' would mean self, spouse, dependent children and dependent parents.

I agree and confirm	I accept, agree & confirm
Signature of Client	Signature of (Family Representative)
Email-ID of Client	E-mail-ID of FR
Mobile number of Client	Mobile number of FR
Landline number of Client	Landline number of FR
PAN / AADHAAR NUMBER	PAN / AADHAAR NUMBER

'Family Representative' would mean self, spouse, dependent children and dependent parents.

Name of Branch Manager/Authorised Person _____

Signature of Branch Manager/Authorised Person _____



Note: Family Representative PAN Proof required with signature & Branch/AP's IPV

FATCA-CRS Annexure for Individual Accounts (including Sole Proprietor)

Details under FATCA and CRS (Please refer to instructions in small Booklet)

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

Name of the account holder _____ PAN No : _____
 Fathers Name _____ Spouse's name _____
 Aadhaar number (Optional) _____ Nationality _____
 City of birth _____ Country of birth _____
 Residence address for tax purposes (include City, State, Country & Pin code) _____

Address Type : _____

(a) Residential or Business (b) Residential (c) Business (d) Registered Office

(Note: Permissible documents are: Passport, Election ID Card, PAN Card, ID Card, Driving License, UIDAI Card, NREGA Job Card and Others)

1. Tax residence declaration - tick anyone, as applicable to you:

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

or

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

Please indicate ALL the countries in which you are a resident for tax purposes and the associated Tax ID Number below:

Country #	Tax Identification Number %	Identification Type (TIN or Other%, please specify)

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

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

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.

Name : _____
 Date : _____
 Place _____

Signature of Client

(Please Tear Here)

Acknowledgment Receipt

Date :

Application No:

We hereby acknowledge the receipt of the Account Opening Application Form:

Name of the Sole / First Holder	
Name of Second Holder	
Name of Third Holder	

Seal and Signature



ALLREACH COMMODITIES INDIA PRIVATE LIMITED.

SEBI REGN.NO: INZ000074235, CIN.NO: U65100TN2012PTC089079

Regd. Office: B-4, Basement, Chella Mall, NO.11-11A, Sri Thiyagaraya Road, T. Nagar, Chennai, Tamilnadu-600017

Corp. Office: Central Rotary Charitable Society Building, No.72/73, 3rd Cross, Vasam Nagar, Lawspet, Pondicherry-605008.

Contact No: 0413-4510100, Email: helpdesk@dojis.in, website: www.dojis.in

To

Date

Manager,

KYC Department,

ALLREACH COMMODITIES INDIA PRIVATE LIMITED.

Subject :- **Request for Opting-Out of Trading segment**

Client Code :

Dear Sir,

I/We hereby confirm that i wish to Opt Out of below segment in my trading account and i am fully aware that i need to provide the consent letter for activating the selected segment in future.

Sr. No	Exchange-Segment
1	

Name

Client code