Sr. No. _____

| (This | VFC Securities Private Limited Regd. Off: 1st floor, Nusser House, Opp. Roxy Theatre, Opera House, Mumbai – 400004. Corr. Off: 203, Shreeji Chambers, 2 nd Floor, Tata Road No.2, Opera House, Mumbai - 400 004. Tel. No → 91-22-40043395, Tel / Fax No → 91-22-35114958 Email → vfc@vfc.co.in, Website → https//www.vfc.co.in, Investor Grievance → complaints@vfc.co.in CEO & Compliance Officer → Mr. Nimish Rajnikant Shah. Contact No. → 022- 40043395, Email ID → nimish@vfc.co.in MEMBERS OF SEBI REGISTRATION NO. DATE. NSE CASH – NSE DERIVATIVES – NSE CURRENCY – BSE CASH IN-DP-605-2021 18/08/2021 (This information is the sole property of the member/ brokerage house and would not be disclosed to any one unless required by law of in case of express permission of clients.) For any grievance/ dispute please contact VFC Securities Private Limited at the above Address, Email ID - complaints@vfc.co.in and T | | | | | | | | | | | Derivatives of all the mited G. marg, 00 33 tal.com |
|---|---|------------------------------|---|--|-------------------|------|------|----------|----------------|------------|--------------|---|
| | iny grievance/ dispute pleas se not satisfied with the res | | | | | | | | and Tel] | No 91-22-4 | 40043395. | |
| NSE | | | BSE is@bseindia | | | X-SX | | complain | ts@mcx- | -sx.com (| 022) 6731 89 | 933 / 9000 |
| | | • | • • | INDEX | | | | | | | | |
| | | | | CUMENTS FOR DE | MAT A | | | | | - | | |
| Sr. | Name of the DocumentBrief SignificancePageClientBrokerSub- broker | | | | | | | | Sub- broker | Introducer | 2nd Holder | 3rd Holder |
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PART-I KNOW YOUR CLIENT (KYC) & CKYC & FATCA-CRS Declaration FORM – INDIVIDUAL INEW INCLUENT (KYC) & CHANGE REQUEST (Please Tick appropriate)

| | | | | | | 10210 | | | on appropri | | |
|--|---------------|-----------|--------------|-------------|---------------------------------------|---------------------|------------------|--------------|----------------|---------------|-------------------------|
| KYC No: | | | | | | | | | | <u>`</u> | k customers) □Small |
| | | | | | ENGLISH | I and in | BLOCK LET | TERS | 5 | Acl | k No. |
| A. <u>IDI</u> | | | | 8 | | | | | | | |
| 1a. Name o | f the A | Applica | nnt | | | | | | | | |
| 1b. Maiden | name | e (if any | y) | | | | | | | PHC | DTOGRAPH |
| 2a Father/I | Husba | nd Nan | ne | | | | | | | 18 | TH 16FH |
| 2b Mothers | s Nam | e | | | | | | | | | |
| 3a. Gender | | | | 3b. | □ Singl | e Da | ate of Birth | | | Plea | ase affix your |
| | | | | Marital | | | ace & country | of | | | ent Passport size |
| | Fema | le | | Status | 🗆 Marr | ied Bi | rth | _ | | Pho | otograph and sign |
| | | | | | | IS | O 3166 Count | ry | | | ss it. |
| | Trans | gender | | | □ Other | | | | | 2F | TH 16FH |
| 4a. Nation | ality | | | Indian | \Box Others | s (Please | e Specify ISO 3 | 166 C | Country code | | |
| | | • 1 4 | T 1' | | ND | • 1 4 | | r | 1 🗖 D | | ••• |
| 4b. Status | | esident | Indiv | | Non Kes | ident | □ Foreign N | ationa | al 🗆 Person | of Indian o | rigin |
| 5. Specify t proof of | ne | | | RD | | | | | | | |
| Identity | | | | | | | | | | | |
| Identity UID (Aadhaar) XXXX XXXX submitted Passport Number | | | | | | | Ev | nirv date · | | | |
| | | | ter ID | Card | | | | | LA | .pny uate . | |
| | ving I | License | | | · · · · · · · · · · · · · · · · · · · | | E | xpirv date : | | | |
| | | | | | | | | | | F J | |
| | | □ Oth | ners (a | ny docun | nent notifie | ed by th | e central govern | nment | t) | | |
| | | □ Sim | nplifie | d Measur | es Accour | nt - Doci | ument Type coo | de | | | |
| | | DETAL | <u>LS</u> C1 | urrent / Pe | ermanent / led mobile no | ['] Overse | es Address deta | ails | | | |
| | | | | | | | | esiden | tial / Busines | ss / Regd. C | Office / Unspecified) : |
| | | | | | - | | | | | | |
| | | | | | | | | | | | |
| City/ | | | | Pin | | State | | | Country & | & ISO 3166 | |
| Town/Villa | ge | | | Code | | | | | Country c | | |
| B1.1. Speci | <u>fy</u> The | e Proof | Addr | ress subn | nitted for | Corres | pondence Add | ress: | | | |
| Contact de | tails: | | r | Tel (Offic | ce) | | | Tel(| Residence) | | |
| Fax No: | | |] | Mobile N | 0: | | Ema | il Id: | | | |
| B2. Perman | nent A | ddress | : (If D | Different f | from above | e or Ma | ndatory for Nor | 1-Resi | ident Applica | ant to specif | fy overseas Address) |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| City/ | | | | Pin | | State | | | Country | | |
| Town/Villa | 0 | <u> </u> | | Code | | | | | | intry code | |
| B3. Addres | s in th | e juris | dictio | on details | where ap | plicant | is resident out | tside i | ndia for tax | purposes | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| City/ | |] | Pin | | State | | | Country | | | |
| Town/Village | | | Code | | | | | 3166 Cou | intry code | | |
| D2 1 G | £ () | | - 6 4 7 | 101. | 44.JC D | | | | | | |
| DJ.1. Speci | iy the | pr001 (| ui Ad | u. Suomi | neu ior P | ermane | ent Address: | | | | |

| C. OTHER DETAILS | | | | | | | | | |
|--|--|--|----------------------------------|--|---|--|--|--|--|
| 1.Gross Annual Incor | ne 🛛 < 1 Lac 🛛 | 3 < 5 Lakhs □ < 10 Lakhs | □<25 La | ikhs 🛛 < Rs. 1 Cro | ore $\square > Rs. 1$ Crore | | | | |
| Net worth (Net worth s | hould not be older | than 1 year): | | As on Date: | / / 202 | | | | |
| 2.Occupation (Please tick any one & give brief details) | □ Others (□ Profe Dealer) | Private Sector Public Private Sector Public Private Self-employed Public Pub | Retired 🗆 I | Housewife □Stude | nt 🗆 Agriculturist 🗆 Forex | | | | |
| Please tick, if applicab | Per Politically Ex | xposed Person (PEP) □Re | lated to a | Politically Expos | sed Person(RPEP) □NA | | | | |
| D DETAILS OF R | ELATED PERSO | 1 () | | 5 1 | | | | | |
| | | of related person KYC Nur | | | ilable*) | | | | |
| Related person type : D | Related person type : Guardian of Minor Assignee Authorised representative | | | | | | | | |
| Name : | | | | | | | | | |
| | t Name) | (Middle Name | e) | (L | ast Name) | | | | |
| D1. POI (Proof of | D PAN CARD | UID (Aadhaar) Pass | / | | , | | | | |
| identity) of related | NREGA Job Ca | rd \Box Others (any documer | nt notified | by the central gove | ernment) | | | | |
| person | Id number of do | cument provided | | Expiry date it | f applicable | | | | |
| D2. ARE YOU A TAX | X RESIDENT OF | ANY COUNTRY OTHE | ER THAN | INDIA 🗆 Y | es 🗆 No | | | | |
| | | POSES IN JURISDICTI | | , | | | | | |
| | | (Mandatory only if section | | , | | | | | |
| Country & <u>ISO 3166</u> | | Tax identification | - | ation type (TIN | <u>If TIN is not available,</u> | | | | |
| Jurisdiction of reside | nce | <u>Number or equivalent</u> | or other | s, please | Please tick the A,B or C | | | | |
| | | | <u>specify)</u> | | (As defined below) | | | | |
| | | | | | Reason $A \square B \square C \square$ | | | | |
| | | | | 1 ('('1 ()D | Reason $A \square B \square C \square$ son B - No TIN required. (Select this | | | | |
| | | ax residence o not require the TIN be | | | | | | | |
| Any other information | 1 | / | | | | | | | |
| knowledge and belief and I information is found to be far | undertake to inform yo alse or untrue or mislea | etails furnished above are true ar u of any changes therein, immed ding or misrepresenting, I am aw Central KYC registry through S | iately. In cas vare that I ma | se any of the above ay be held liable for it. | 3FH 16FH | | | | |
| E. CERTIFICATION | (FATCA-CRS): | I / We have understood the infor | mation requi | rements of this Form | | | | | |
| (Read along with the FATC | A & CRS instructions) mplete. I/We also conf | and hereby confirm that the info firm that I/We have read and und | ormation prov | vided by me/us on this | 4FH 16FH | | | | |
| FATCA *& CRS Terms and 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 or 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. FOR OFFICE USE ONLY: In Person Verification (IPV) Details: Name of the Person who has done IPV: Designation: | | | | | | | | | |
| | | | | g 1/g | • • • • • | | | | |
| | Date of IPV: / / . (CKYC code of Organisation : IN1258) Seal/Stamp and signature of the Intermediary | | | | | | | | |
| \Box (Originals verified) | True copies of doc | uments received \Box (Se | elf-Attested | d) Self Certified Do | ocument copies received | | | | |

PART-I KNOW YOUR CLIENT (KYC) & CKYC & FATCA-CRS Declaration FORM – INDIVIDUAL OR NEW OCHANGE REQUEST (Please Tick appropriate) FOR SECOND HOLDER ONLY

| | | | C = = = = (= = = | ······································ |) <u>=</u> | | | | | |
|---------------------|------------------------------------|---------------|-------------------------|--|------------|----------------|-----------------|-----------------------|--|--|
| KYC No : | | · c · F | NGLIGH | | | | | customers) | | |
| B IDI | Please fill th | | NGLISH and | d in BLOCK LET | TERS | | Ack | No. | | |
| | | | | | | | | | | |
| | of the Applicant | - | | | | | | | | |
| | name (if any) | | | | | | | OGRAPH | | |
| 2a Father/I | Husband Name | | | | | | 1SF | 16SH | | |
| 2b Mothers | | | | | | | | | | |
| 3a. Gender | | 3b. | □ Single | Date of Birth | | | | e affix your | | |
| | Female | Marital | \square Married | Place & country | of | | | nt Passport size | | |
| | Transgender□ | Status | □ Others | Birth ISO 3166 Countr | | | Photo across | ograph and sign | | |
| | | | | code | y | | 2SH | | | |
| 4a. Nation | ality 🛛 | Indian | □ Others (Pl | ease Specify ISO 3 | 166 C | ountry code) | | | | |
| | · | | | | | | X | ······ | | |
| 4b. Status | C Resident Indi | ividual 🛛 | Non Residen | it 🛛 Foreign N | ationa | l 🗆 Person | of Indian ori | gin | | |
| 5. Specify t | | | | | | | | | | |
| proof of | | | | | | | | | | |
| • | Identity 🗆 UID (Aadhaar) XXXX XXXX | | | | | | | | | |
| submitted | Passpor | t Number | | | | Exp | piry date : | <u> </u> | | |
| | | D Card | | | | E- | | | | |
| | | License | | | | EX | cpiry date : _ | | | |
| | \Box Others | any docum | ent notified by | v the central govern | ment |) | | | | |
| | | | | Document Type coc | | | | | | |
| | RESS DETAILS | Current / Pe | rmanent / Ov | ersees Address deta | | | | | | |
| | nmunication will be s | | | | aidont | tial / Dusinas | s / Pagd Of | fice / Unspecified) : | | |
| DI. Kesideli | ice/Coll. Add (Pl | ease specify | whether. Re | sidentiai- Buss / Ke | sidem | liai / Dusines | s / Regu. OI | nce / Unspecified). | | |
| | | | | | | | | | | |
| City/ | | Pin | S4 | ate | | Country & | 150 2166 | | | |
| Town/Villa | σε | Code | 51 | ale | | Country & | | | | |
| | 0 | | itted for Cor | respondence Add | ress: | country et | Juc | | | |
| Contact de | • | Tel (Office | 1 | 1 | | Residence) | | | | |
| Fax No: | | Mobile No | 1 | Emai | |) | | | | |
| | nent Address: (If | | | | | dent Applica | nt to specify | overseas Address) | | |
| | | | | - | | | | | | |
| | | | | | | | | | | |
| City/ | | Pin | St | ate | | Country & | & ISO | | | |
| Town/Villa | 0 | Code | | | | 3166 Cou | • | | | |
| B3. Addres | s in the jurisdict | ion details v | where applic | ant is resident out | side ii | ndia for tax | purposes | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| City/ | | Pin | St | ate | | Country & | & ISO | | | |
| Town/Villa | ige | Code | | | | 3166 Cou | ntry code | | | |
| | | | | _ | | | | L | | |
| B3.1. Speci | fy the proof of A | dd. Submit | ted for Perm | anent Address: | | | | | | |

| C. OTHER DETAILS | | | | | | | | | |
|---|--|--|--|---|--|--|--|--|--|
| 1.Gross Annual Inco | me 🛛 < 1 Lac | Q < 5 Lakhs Q < 10 Lakhs | □ < 25 Lakhs □ < Rs. 1 Cr | ore $\square > Rs. 1$ Crore | | | | | |
| Net worth (Net worth | should not be olde | r than 1 year): | As on Date: | / / 202 | | | | | |
| 2.Occupation (Please tick any one & give brief details) | □ Others (□ Profe Dealer) | | Sector | nt □Agriculturist □ Forex | | | | | |
| Please tick, if applical | 1 | | lated to a Politically Expo | | | | | | |
| D DETAILS OF R | | | | | | | | | |
| □Addition of related p | person 🗆 Deletion | of related person KYC Nur | mber of related person (if ava | ailable*) | | | | | |
| Related person type : | Guardian of Mi | nor \Box Assignee \Box Authoris | sed representative | | | | | | |
| Name : | st Name) | (Middle Nam | e) (I | Last Name) | | | | | |
| D1. POI (Proof of DAN CARD DUID (Aadhaar) Dessport Number Voter ID Card Driving License D | | | | | | | | | |
| identity) of related | | · • | nt notified by the central gov | · · · · · · · · · · · · · · · · · · · | | | | | |
| person | | cument provided | Expiry date i | •• | | | | | |
| | | F ANY COUNTRY OTHE RPOSES IN JURISDICTION | | les □No | | | | | |
| | | (Mandatory only if section | | | | | | | |
| Country & ISO 3166 | - | | Identification type (TIN | If TIN is not available, | | | | | |
| Jurisdiction of reside | | Number or equivalent | <u>or others, please</u> <u>specify)</u> | Please tick the A,B or C (As defined below) | | | | | |
| | | | | Reason $A\Box B\Box C\Box$ | | | | | |
| | | | | Reason A B C | | | | | |
| reason only if the authorities of | f te respective country of | tax residence o not require the TIN be | ntification Number to its residents. Rea e collected) Reason C - Others; Please | son B - No TIN required. (Select this state the reason thereof. | | | | | |
| Any other information | · · | | | I | | | | | |
| knowledge and belief and I information is found to be f | undertake to inform y alse or untrue or misle | | nd correct to the best of my iately. In case any of the above vare that I may be held liable for it. MS/Email on the above registered | 3 SH 16 SH | | | | | |
| (Read along with the FATC | CA & CRS instructions omplete. I/We also cor | and hereby confirm that the info firm that I/We have read and und | mation requirements of this Form ormation provided by me/us on this lerstood the FATCA and CRS term | | | | | | |
| FATCA *& CRS Terms and 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 or 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. | | | | | | | | | |
| FOR OFFICE USE O | FOR OFFICE USE ONLY: In Person Verification (IPV) Details: | | | | | | | | |
| Name of the Person will Designation: | | mployee ID: | | | | | | | |
| Name of the Organisat | tion: VFC Securiti | es Private Ltd | | | | | | | |
| Date of IPV: / . (CKYC code of Organisation : IN1258) Seal/Stamp and signature of the Intermediary | | | | | | | | | |
| \Box (Originals verified) | I rue copies of do | , | elf-Attested) Self Certified D | ocument copies received | | | | | |
| | | 5 | | | | | | | |

| | | | | | | | | | | | | | MA | NDAT | ORY |
|--|--|--------------|-----------|-------|-------|-------------|---|--------------------------------|----------|------------------|-------------|--------|--------|-----------|-------|
| | | | | | | | | R INDIVIDUAL E | | | | | 0 | | |
| Participa | nts Nam | e: VFC | SECU | URI | | | | ED. 1 st Floor Nus | ser Hou | se, Oj | pera | Hou | se, M | umbai- | 4 |
| DPID: | I N | | 0 | | 3 | | 7 4 | Client ID | | | | | | | |
| I/We reque CAPITAL | | | | osito | ry ac | ccount in | my/our Nam | e as per the follow | - | ils (Pl Date: | ease | fill a | ll the | details i | in |
| | | | / | | | DETAI | LS OF AC | COUNT HOLDE | R | | | | | | |
| 1.Name of | f Sole/ F | irst Ho | lder | | | | | | | | | | | | |
| Name of I | Father / | Husbar | nd | | | | | | | | | | | | |
| Address(V CITY/Town/ State, Countr | Village, | | | | | | | | | | | | | | |
| Code) | | City | <u> </u> | | | · · | te, Country | | | A | Aadh | | | X XXXX | |
| PAN | | | Ш | | | E-Mail | | | Dob | | | N | lob | | |
| 2.Name of | f Second | l Holde | r | | | | | | | | | | | | |
| Name of I | Father / | Husbar | nd | | | | | | | | | | | | |
| Address(V CITY/Town/ | Village, | | | | | | | | | | | | | | |
| State, Countr Code) | y, Pin | City | | | | Pin, Sta | te, Country | | | A | Aadh | naar | XXX | X XXXX | |
| PAN | | | | | | E-mail | | | DOB | | | N | lob | | |
| Name of 7 | ame of Third Holder | | | | | | | | | | | | | | |
| Name of I | Father / | Husbar | nd | | | | | | | | | | | | |
| Address(W | | | | | | | | | | | | | | | |
| CITY/Town/ State, Countr | 0, | | 1 | | | | | I | | | | | _ | | |
| Code) | | City | | | - | · · | te, Country | | | A | Aadh | | | X XXXX | |
| PAN | | | | | | E-mail | | | DOB | | | | | | |
| Guardia | an Detai | ls (In ca | ase the | e So | le H | older is a | minor, Two signed by | o KYC must be fil Guardian) | led. One | e for (| Guai | rdian | and | Minor (| to be |
| Name of G | Juardia | <u> </u> | | | | | signed by | Guarulalij | | | | | | | |
| | uai ulai | 1 | | | | | | | | | | | | | |
| Address(W Country, Pin C | | | | | | | | | | | | | | | |
| office Tel, Res | | | s such as | 5 | | | | | | | | | | | |
| DOB (of N | Minor) | | | | Re | lationshir | o (if any): | | PA | N | | | | | |
| · · | · · · · · | I Third I | HOLD | ER | | - | | ITH KRA, KINDI | Y FILL | UP T | ΉE | ADD | ITIOI | NAL K | YC |
| FORM FC | | | | | | | | | | 01 1 | | | | | |
| Type of | □ Ord | inary Ro | esiden | t 🗆 | Qua | alified For | eign Investo | r □ Margin □ NF | RI-Repat | riable | | NR | I-Non | Repatr | iable |
| account | | • | | | - | | Others(plea | - | 1 | | | | | 1 | |
| In case of | case of NRI/Foreign NationalsRBI Reference No.RBI Approval Date: | | | | | | | | | | | | | | |
| BANK AG | CCOUN | T DET | AILS | [Tic | k Oı | nly One A | s Main Ban | k (Otherwise First | Bank w | ill be | cons | idere | d as I | Default) | |
| Bank | Bank Name Br. Addro | | | ress | | A/c | A/c No. A/c type -Savings current/others | | | NICRCOde • | | | | SC Co | de |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | <u>i</u> | | | | 1 | | | i | | | i | | | |

5FH 16FH (Sole/First Holder)

5SH 16SH (Second Holder)



| | PART-II | ACCOUNT | OPENING I | FORM | FOR IND | IV | IDUAL DEMAT AC | COUN | T-Pa | nge 2 | | | |
|------------------|--|------------------------|---|----------------------|-----------------|------|---|-----------|-----------------------|-----------|-------------|-----------------|--|
| Stan | ding Instructions | I/We aut | horise you to | receive | credits aut | ton | natically into my/our A | ccount | ۵ | Yes | 0 | No | |
| POA fo Margin | or Pay-in & | Account | to be operate | d throu | gh Power o | of / | Attorney (PoA) | | ۵ | Yes | 0 | No | |
| | ALERT FACILITY | Y: (Mandato | ry if you are g | giving p | power of | | Sole Holder | | 0 | Yes | 0 | No | |
| | ey (PoA). Ensure the | at the mobile | e number is pr | ovided | in the | ŀ | Second Holder | | 0 | Yes | 0 | No | |
| KYC A | Application Form) | | | | | | Third Holder | | 0 | Yes | ۵ | No | |
| Receiv | e Annual reports, | AGM notic | es & other C | ommu | nications | | Sole Holder | | 0 | Yes | 0 | No | |
| from i | ssuers & RTA's in | Physical Fo | orm | | | | Second Holder | | 0 | Yes | 0 | No | |
| | | | | | | | Third Holder | | Π | Yes | | No | |
| | of Receiving | 🗆 Physi | cal Form | | Electronic | Fo | rm (Read note 4 and en | nsure th | are that email ID is | | | | |
| Staten | nent (Tick one) | · | | provid | ded in KYO | C A | Application Form) | | | | | | |
| Mobil | e | Belongs to | 🛛 Me 🛛 My F | amily | E-Mail | | | Belo | ongs to 🛛 Me 🖬 My Fly | | | | |
| Mode | of Receiving Right | ts & Obliga | tion between | DP & | B/O | | Physical For | m | | Electro | nic I | Form | |
| | | NOMIN | ATION FOR | M FO | R INDIVI | DI | JAL CLIENTS ONLY | | <u> </u> | | | UTIII | |
| | /We wish to make a | | | | | | I/We do not wis | | aka c | nomin | ation | , | |
| | | | | | | co | nsequently all rights an | | | | | | |
| ł | beneficiary ownership in the securities held by me / us in the said account shall vest in me/ us. [Strike off the | | | | | | | | | | | | |
| 1/we h | nomination details because the second s | below] [We do not y | wish to annoi | nt anv r | ominee(s) | in | my/our trading/demat | account | t and | unders | tand | the | |
| issue i | nvolved in non-app | ointment of i | nominee(s) an | d furth | er are awai | ret | hat in case of death of | all the a | | int hold | ler(s) |), | |
| trading | g/demat account, wh | nich may also | o include doci | iments | issued by | | my/our trading/demat a hat in case of death of prmation for claiming o art or other such compe | tent au | thori | ty, base | our d on | the | |
| value o | of assets held in the | trading / der | nat account. | Nomi | nation Det | ail | 8 | | | | | | |
| I/We v | vish to make a nom | ination and d | lo hereby non | | | | person(s) who shall rec | eive all | seci | urities h | eld i | n the | |
| Depos | itory by me /us in th | ne said benef | | | | | | | | | | | |
| | nation can be made ee nominees in the | e up | Details | of 1 st N | Jominee | | Details of 2 nd Nomi | 166 | Details of Nomine | | | 3 rd | |
| accourt | | | Details of 1 st Nominee Details of 2 nd N | | | | Details of 2 Romin | | | Noi | nine | e | |
| 1 | Name of the nom (Mr./Ms.) | inee(s) | | | | | | | | | | | |
| | Share of Equally | v 🗌 | | | % | | | % | | | | % | |
| 2 | each | qually, please | Any odd lot af | ter divisi | ion shall be tr | an | sferred to the first nominee n | ientione | d in th | ne form. | | | |
| | specify g | %] | | | | | | | | | | | |
| 3 | Relationship Wit Applicant (If An | | | | | | | | | | | | |
| | | <i>.</i> , | | | | | | | | | | | |
| 4 | Address of Nomin | ee(s) | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| PIN Code | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 5 | Mob/Tel No. of | () | | | | | | | | | | | |
| 6 | Email ID of nom | | | | | | | | | | | | |
| | Nominee Identifi details [Please tick a | | | | | | | | | | | | |
| | following and provide | details} | | | | | | | | | | | |
| 7 | Photograph and sign | nature Saving | | | | | | | | | | | |
| | Bank account No. | • | | | | | | | | | | | |
| | Proof of identity Account ID | Demat | | | | | | | | | | | |

| Sr. No | os. 8-14 should be | filled only if | nominee(s) is a m | inor: | | | | |
|---|--|----------------|-------------------|---------------|--------------|-------|-------------------|------|
| 8 | Date of Birth {i minor nominee | (s)} | | | | | | |
| 9 | Name of Gua (Mr./Ms.) {in ca minor nominee | ase of | | | | | | |
| 10 | Address of Gua | | | | 1 | | | |
| | | | | | | | | |
| 11 | Mobile/Telepho Guardian | | | | | | | |
| 12 Email ID of Guardian | | | | | | | | |
| 13 | Relation Guard | lian-nominee | | | | | | |
| Image: Heat state | | | | | | | | |
| | Names of Hold | er (Signed aft | er reading Non N | omination C | lause above) | | Signature | |
| | First Holder(Mr | ./Ms.) | | | | | X 6FH | 16FH |
| Second Holder (Mr./Ms.) | | | | | | | Х 6 S Н | 16SH |
| Third Holder (Mr./Ms.) | | | | | | | X 2TH | 12TH |
| | | | Signature of V | Witness for I | Nomination | | | |
| Name o | of the Witness | | Address | | | Signa | ture of witn | ess |
| | | | NOTES | Date | D D | MY | Y Y Y | |

All communication shall be sent at the address of the Sole/First holder only.

Thumb impression and signature other than Eng. 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 SEM.

Instruction Related to nomination are as below:

i) The Nomination can be made by individual holding beneficiary owner account on their own behalf singly or jointly. Non-Individual accounts (including society, trust, body corporate and partnership firm, karta of HUF, holder of POA) of any type can not nominate. Holder of Power of Attorney cannot nominate. If the account is held jointly all joint holders will sign the nomination form. ii) A minor can be nominated. In that event, the name and address of the guardian of the minor nominee shall be provided by beneficial owner. iii) The Nominee(s) shall not be Trust, society, body corporate, partnership firm, Karta of HUF, or a power of Attorney holder. A Non-Resident Indian can be a Nominee, subject to exchange control in force from time to time, iv) Nomination in respect of the beneficiary owner account shall stand rescinded upon closure of the beneficiary owner account. Similarly the Nomination in respect of securities shall stand terminated upon transfer of securities. v) Transfer of securities in favour of Nominee shall be valid discharge by the depository and the participant against the legal heir. vi) The cancellation of nomination can be made by individuals only holding beneficiary owner account on their behalf singly or jointly by the same person who made the original nomination. Non-Individuals (including society, trust, body corporate and partnership firm, karta of HUF, holder of POA) or 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. vii) 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 Nominee, viii) Nomination can be made up to 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. ix) 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 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees. x) Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents.

xi) Savings bank account details shall only be considered if the account is maintained with the same participant. xii) DPID and client ID shall be provided where demat details is required to be provided.

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 notice. Non-receipt of bounced mail notification by the trading member shall amount to delivery of contract note & Other Documents at the e-mail ID of the client.

| Docum | bocaments at the e-main b-of-the chem. | | | | | | | | |
|-------|--|------------------|--|--|--|--|--|--|--|
| PAST | Details of any action/proceedings initiated/pending/ taken by SEBI/Stock Exchange/ any | (if YES kindly | | | | | | | |
| ACTIO | other authority against the applicant/constituent or its Partners/promoters/whole time | provide details) | | | | | | | |
| Ν | directors/authorized persons in charge of dealing in Securities during the last 3 years: | | | | | | | | |

Declaration: The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes herein, 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. In case Non-Resident account, I/We also declare that I/We have complied and will continue to comply with FEMA Regulations. I/We acknowledge the receipt of copy of the document, "Rights and Obligations of the beneficial owner and the depository Participant".

| Sole/First Holder | | Second Holde | er | Third I | Iolder | Guardian (for minor) | | |
|---------------------------------|-------------------|-----------------|--------------------------------------|------------------|------------------|---------------------------|--|--|
| Affix your photo & s | ign Affix | your photo & s | sign | Affix your phe | oto & sign | Affix your photo & | | |
| across Photograph | across | s Photograph | | across Photog | graph | sign across Photograph | | |
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| SIGN | | | | | | | | |
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| 7FH 16 | FH 7SI | | | 3SH | 12TH | 1GU | | |
| | | FOR OFFIC | CE USE (| ONLY | | | | |
| UCC Code allotted to the Clien | ıt: | DP ID - | DP ID – IN 303374 Demat Client Code: | | | | | |
| | Documents veri | fied with C | Client Inte | rviewed By | In-Pers | on Verification done by | | |
| | Originals | | | | | | | |
| Name of the Employee | | | | | | | | |
| Code, Designation & Dt. | | | | | | | | |
| Signature | | | | | | | | |
| I/ We undertake that we have n | nade the client a | ware of 'Policy | v and Pro | cedures' tariff | sheet and all th | he non-mandatory | | |
| documents. I/We have also made | | | | | | | | |
| have given/sent him a copy of a | | | | | | | | |
| sheet and all the non-mandatory | | | | | | | | |
| the 'Rights and Obligations' an | | | ble on my | /our website, if | any, for the ir | formation of the clients. | | |
| 8FH 16FH | 8 | BSH 16SH | | | 4TH 12TH | | | |
| Date: / / 202 | Seal/Stamp | of the Stock B | Broker | Signati | ire of the Aut | horised Signatory | | |
| | | | | | | | | |

<u>Rights and Obligations of Beneficial Owner and Depository Participant</u> as prescribed by SEBI and Depositories

General Clause

- 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 charge 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 over all 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 Accounts, the DP shall send the transaction statements as mandated by SEBI and/or Depository from time to time.

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| | | | |

Manner of Closure of Demat account

- 17. The DP shall have the right to close the Demat account of the Beneficial Owner, for any reasons whatsoever, provided the DP 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 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 in 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.

Redressal of Investor grievance

24. 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

25. 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

- 26. 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.
- 27. The provisions of this document shall always be subject to Government notification, any rules, regulations, guidelines and circulars/ notices issued by 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.
- 28. The Beneficial Owner and the DP shall abide by the arbitration and conciliation procedure prescribed under the Byelaws of the depository and that such procedure shall be applicable to any disputes between the DP and the Beneficial Owner.
- 29. 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
- 30. 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.
- 31. If the rights and obligations of the parties hereto are altered by virtue of change in Rules and regulations of SEBI or Byelaws, 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.

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FOR DEMAT ACCOUNT ONLY

MANDATORY

VFC SECURITIES PRIVATE LIMITED

Member : National Securities Depository Ltd. (NSDL)

Regd:1st floor, Nusser House, 20 Mama Parmanand Marg, Opera House, Mumbai – 400004. Corr. Off: 203, Shreeji Chambers, 2nd Floor, Tata Road No. 2, Opera House, Mumbai – 400 004.

Tel. No.022- 40043395/ 022-35114958.

SEBI Regn. No. IN-DP-605-2021 / DP ID NO. - IN 303374

SCHEDULE - A

CHARGES FOR BENEFICIARY OWNER ACCOUNT w.e.f. 01/01/2021

Note: this schedule is a part of the agreement and is to be signed and submitted

| TYPE OF SERVICE | CHARGES |
|--|--|
| Account Opening & Closing | NIL |
| Account Maintenance | For Non- Corporate Account Rs. 600/- & Corporate Account Rs. 1000/- (per annum) |
| BSDA Account (For Individual Accounts | If Holding Amt is < 50,000 No Charges, If Holding Amt is Between 50,000 |
| Only) | -2,00,000 Rs. 100 Pa. If Holding Amt is $> 2,00,000$ Not Eligible as BSDA. |
| Custody Charges | NIL |
| Demat & Remat Charges | Rs. 50/- per certificate |
| Minimum Charges | Rs. 50/- |
| Postage Courier | At Actual or Minimum Rs.50/- Per Demat request (which ever is Higher) |
| Transaction (Including Inter-Depository) | |
| Purchase | NIL |
| Sale | 0.05% of sale value or minimum Rs. 25/- Per Script |
| DIS bearing same day execution (Upfront) | 150% of regular transaction charges; Minimum Rs. 50/- |
| Pledge Creation/Confirmation/closure | Rs. 100/- |
| Pledge Assure Confirmation | Rs. 100/- |
| Pledge Invocation | Rs. 100/- |
| Failed Transaction | Rs. 100/- |
| Other Charges | A) Additional statement Rs. 25/- per page B) Cheque bouncing charges and ECS return charges "for want of funds" – Rs. 750/- OR AT ACTUAL CHARGED BY THE BANK C) Any other service not listed above will be charged on "actual" basis (upfront) D) Franking Charges at Rs. 110 or at actual if POA is given by BO E) Rs. 150 per Booklet for Misplaced / Lost DIS |
| Securities borrowing / lending charges (Presently this facility is not available) | Rs. 100/- per transaction |
| Interest on delayed payment of bills | Interest @ 13% p.a. for delayed payment of bills |
| GST | At applicable rate will be levied for all the above services |

Expenditure incurred for services other than the ones listed above, will be charged on "actual" basis

*Where pledger & pledgee both have Demat account with our DP, confirmation charges waived.

Note:

- 1. The charges mentioned above will be recovered as and when due / regular intervals.
- 2. VFC reserves its right to change the rate structure at its discretion, by giving required notice however if charges are reduced, notice to the client may not be necessary.
- 3. Advance remittances towards future bills also will be accepted.

11SH 16SH (Second Holder)



Date:

CLIENT ID

To,

VFC Securities Private Limited DP ID - IN 3033741st Floor, Nusser House, Opp. Roxy Theatre, Opera House, Mumbai - 400 004.

With reference to my / our application for opening a depository account, I/ We request you to open my / our depository account as a BSDA as per the following details:

| | Name | | | PA | N | | |
|-------------------|------|--|--|----|---|--|--|
| Sole/First Holder | | | | | | | |
| Second Holder | | | | | | | |
| Third Holder | | | | | | | |
| | | | | | | | |

| BSDA Account Required \Box Yes \Box No |
|--|
|--|

I/We have read and understood the Securities and Exchange Board of India's guidelines for facility for a BSDA. I/We hereby declare that I/we am/are eligible to open a depository account as a BSDA holder and undertake to comply with the requirements specified by Securities and Exchange Board of India (SEBI) or any such authority for such facility from time to time. I/We also understand that in case I/We at any point of time do not meet the eligibility as a BSDA holder, my / our aforesaid account is liable to be converted to regular account.

12FH 16FH (Sole/First Holder) **12SH 16SH** (Second Holder) Signature(s) of Account Holder(s) 8TH 12TH (Third Holder)

| FOR DEMAT ACCOUNT ONLY |
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POA FOR MARGIN AND PAY IN OF SECURITIES FOR THE PURPOSE OF SETTLEMENT

| TO ALL TO WHOM THESE PRESENTS SHALL COME I/WE 1) |
|--|
|--|

2)

3)

_____, all resident

with National

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VOLUNTARY

Securities Depository Limited through VFC Securities Private Limited bearing DP-ID IN 303374.

Indian, staying in India and Whereas I hold a Beneficiary Account A/c No

13FH 16 FH

13SH 16SH

9TH 12TH

AND Whereas I am an investor engaged in buying & selling of securities through VFC Securities Private Ltd a Member of The National Stock Exchange of India, Member of Bombay Stock Exchange Limited , Member of MCX Stock Exchange Limited (MCX-SX) bearing COMMON SEBI Registration No. INZ000250133.

| GEOMENIE | DOOL | CM DD ID MCDI | | TMOMO | | |
|---|------|---------------|--|-------|--|--|
| | | | | | | |
| Pool and Margin account details of VFC Securities Private Limited are as follows— | | | | | | |

| SEGMENT | POOL | CM-BP-ID-NSDL | CLIENT MARGIN | TM/CM CLIENT SECURITIES |
|-----------|---------|------------------|---------------|-------------------------|
| | ACCOUNT | | DP ID | MARGIN PLEDGE ACCOUNT |
| NSE & BSE | NSDL | IN 564203 | IN 303374 | 10008662 |
| | CDSL | 1601010000228250 | | |
| CUSA | NSDL | IN 524352 | IN 303374 | 10008076 |

Pursuant to recent regulatory changes, SEBI - Exchanges - Clearing Corporation and Depositories have put in place a mechanism for Pledge / Re-pledge whereby the securities would not be transferred from our Demat account for meeting our margin obligations, but would be pledged in your favour and further re-pledged to clearing member / Clearing Corporation. It is also noted that securities would continue to be transferred from our Demat account for settlement obligations arising out of our Trades.

AND Whereas due to exigency and paucity of time, I am desirous of appointing an agent / attorney to operate the aforesaid beneficiary account on my behalf for a limited purpose in the manner hereinafter appearing:

NOW KNOW WE ALL AND THESE PRESENTS WITNESSTH THAT I THE ABOVENAMED DO HEREBY NOMINATE, CONSTITUTE AND APPOINT **VFC Securities Private Limited** as my true and lawful attorney (hereinafter referred to as the attorney) for me and on my behalf and in my name to do instruct the aforesaid Depository Participant to debit securities and / or to transfer securities from the aforesaid Demat account for the purpose of delivering the same to the clearing house of the recognized stock exchange in respect of securities sold by me through them in any segment of any of the Recognized Stock Exchanges in India.

Further, VFC Securities Private Limited, the attorney, can also initiate the instructions to pledge our securities in favor of M/S VFC Securities Private Limited, for the limited purpose of meeting my/our margin requirements in connection with the trades executed / to be executed, by me / us on any of the recognized Stock Exchange in India, through M/S VFC Securities Private Limited. Further, M/S VFC Securities Private Limited may re-pledge such securities to the clearing member / clearing corporation as the case may be for the purpose of my / our margin requirements in connection with the trades executed / to be executed by me / us on any recognized Stock Exchange through M/S VFC Securities Private Limited.

This authority is restricted to the Margin Pledge / Re-pledge and pay-in obligations arising out of the transactions effected by me /us through / by VFC Securities Private Limited at NSE, BSE and MCX-SX and I ratify the instructions given by the aforesaid clearing member to the Depository Participant named hereinabove in the manner specified herein.

In case the Broker mentioned above changes their CM-BP-ID / Client ID, which is not mentioned in the above authority the said authority shall be still valid for new CM-BP-ID / Client ID of the M/S VFC Securities Private Limited.

I further agree and confirm that the power of authority conferred by this Power of Attorney shall continue to be in force until I have given to the Depository Participant / Broker, notice in writing to the contrary.

Signed and delivered on this ______day of ______, 20_____ at Mumbai by

| 14FH 16FH (Sole/First Holder) (For and on behalf of the client) | 14SH 16SH (Second Holder) | 10TH 12TH (Third Holder) |
|---|---------------------------|---------------------------------|
| Witness (name and signature) Signed and delivered by For VFC Securities Private Limited B1 | | IN THE PRESENCE OF |
| Director | | Witness name and signature |

| FOR DEMAT ACCOUNT ONLY VOLUNTARY AGREEMENT BETWEEN THE PARTICIPANT AND THE CLIENT FOR PROVIDING THE TRANSACTION |
|--|
| AGREEMENT BETWEEN THE PARTICIPANT AND THE CLIENT FOR PROVIDING THE TRANSACTION STATEMENT THROUGH INTERNET |
| This agreement made and entered into this day of 202 between |
| 1)3) |
| situated at |
| 15FH 16FH 15SH 16SH 11TH 12TH |
| Witnesseth |
| WHEREAS the Client has permitted the Participant to provide the transaction statement through internet (web-based and / or email). NOW THEREFORE in consideration of the Participant having agreed to provide the transaction statement through internet (web-based and /or email), both the parties to the agreement hereby covenant and agree as follows: The Participant shall install adequate system to restrict the access of the transaction statement only to the Client. The Client shall take all the necessary steps to ensure confidentiality and secrecy of the login name and password. III. The Client is aware that the transaction statement may be accessed by other entities in case the confidentiality / secrecy of the login name and password is compromised. IV. In case the Client opts for transaction statement through Email, it shall immediately inform the participant about change Email address, if any. The Participant shall verify and confirm with the client about the change. Further, the participant shall confirm with the client about validity of the Email address at least once in year. V. The Client agrees not to receive transaction statement to its Client through internet (Web-based / E-mail) due to any unforeseen problems, the participant should ensure that the transaction statement reaches to tile Client in physical form as per the time schedule stipulated in the bye laws & business rules of NSDL. VI. The Participant and the Client shall have the right to terminate this agreement after giving a notice of at least 10 days to the party. VII. The above terms and conditions are in addition to and not in contravention of the terms and conditions forming a part of the "AGREEMENT BETWEEN THE PARTICIPANT AND THE PERSON SEEKING TO OPEN AN ACCOUNT WITH THE PARTICIPANT" signed by the Client at the time of opening the account with the Depository. IN WITHNESS WHEREOF the participant and the client have caused these p |
| Signed and delivered by |
| 16FH (Sole/First Holder) 16SH (Second Holder) 12TH (Third Holder) (For and on behalf of the client) 16SH (Second Holder) 12TH (Third Holder) |
| Witness name and signature |
| Signed and delivered by |
| For VFC Securities Private LimitedIN THE PRESENCE OF |
| <u>B2</u> |
| Director Witness name and signature |

Acknowledgement

| Dear | Sir, |
|------|------|
|------|------|

I / we confirm that I / we have opened **DEMAT ACCOUNT in NSDL** with M/s VFC Securities Private Limited and for which I / we have received following documents.

- A) KYC Form for all the holders
- B) Client Master List.
- C) Rights and Obligation of BO & DP as prescribed by SEBI & Depositories.
- D) POA for pay-in securities & margin purpose.
- E) Agreement For Providing The Transaction Statement Through Internet
- F) Copy of Demat Charges
- G) My/ our Delivery Instruction Slip bearing distinctive No. _____ To _____.

Signature of the Client

Client ID for DP:

Date:

Place:

Acknowledgement

VFC Securities Private Limited

1St Floor, Nusser House, Opp. Roxy Theatre, Opera House, Mumbai-400004. DP ID- IN 303374

| Received The application From Mr. /Ms | | as the sole/First Holder |
|--|------------|---|
| along with | and | as the second and Third |
| Holder respectively for opening of a Depositor | y account. | Please quote the DPID and CLIENT ID allotted to you in all your |
| future correspondence. | | |
| | | For VFC Securities Private Limited |

Date:

Authorised Signatory.