

Client Registration Form : Individual Client
(Business Rule : 27(b))

To
 (Name of Member)
 Membership Registration Number
 Address of Member

PHOTOGRAPH

Sign across the
 Photograph

Dear Sir

We request you to register us as your client. The Details of Registration is as under :

(01) Full Name : _____

(02) Date of Birth /Age : _____
 DD/MM/YY

(03) Gender : _____
 Male / Female

(04) Occupation : _____

(05) Net worth as on (DD /MM/YY) : _____

(06) Nationality : _____

(07) IT Permanent Account Number (PAN) : _____

- If PAN is not available, the reasons thereof : _____
- Whether declaration as per the format prescribed by the Income Tax department given?

Yes/No

(08) **Correspondence Address:**

• City : _____

• Pincode : _____

• State : _____

• Country : _____

• Telephone Number : _____

• Mobile Number : _____

• Fax Number : _____

(Including STD code)

- Email ID

: _____

(09) **Residential Address:**

- City

: _____

- Pin code

: _____

- State

: _____

- Country

: _____

- Telephone Number

: _____

(10) **Details of Bank Account:**

- Name & Address of Bank

: _____

- Account Number of the Bank
& Account Type

: _____

(11) **Sales Tax Registration Details:**

- Local Sales Tax
State Registration No.

: _____

- Validity Date

: _____

- Central Sales Tax: Registration No: _____

- Validity Date

: _____

(12) **Depository Account Details:**

- Depository ID

: _____

- DP ID

: _____

- Client ID

: _____

(13) **Financial details of the client:**

Income Range (Per Annum): (Tick where applicable)

- Below Rs. 1,00,000
- Rs. 1,00,000 To Rs. 5,00,000
- Rs. 5,00,000 To Rs. 10,00,000
- Rs. 10,00,000 To Rs. 25,00,000
- Above Rs.25,00,000

(14) **Investment/Trading Experience**

No Prior Experience

___ Years in Commodities

___ Years in Other investment related fields

(15) **Trading Preference**

Commodity Exchanges on which you wish to trade (if the member is also registered with other Exchanges):

- 1.
- 2.
- 3.

(16) Details of any action taken by SEBI/FMC/Stock exchange/Commodity exchange/any other authority:

(17) **Details of Registration with other Exchanges:**

- Name of Exchange : _____
- Name of Broker : _____

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

(18) **References**

Introduction: Introduced by another client / director or employee of trading member / any other person (please specify)

Name of the Introducer : _____
(Surname) (Name) (Middle name)

Signature _____

The information furnished above is true to the best of my knowledge and belief.
I undertake to inform changes in any of the above points in writing immediately to the Exchange.
I enter into agreement to abide by all the terms and conditions of the Exchange.

Authorized Signatory

Place:

Date:

For office Purpose:

Client Code:

Verified by: _____ Authorized by : _____
(Name) (Name)

Note: Each client will have to use separate form. In case of Joint names / family members, each client will have to use separate form for each person separately.

Documents to be submitted along with Client Registration Form :

- i. Address Proof
- ii. Proof of Bank Account Number
- iii. Copy of latest Income Tax Return
- iv. Self certified photocopy of PAN card
- v. Declaration, if the client does not have PAN, in the form prescribed by the Income Tax Department
- vi. Proof of DEMAT Account (Optional)

Client Registration Form : Non - Individual Client
(Business Rule : 27 (b))

To
(Name of Member)
Membership Registration Number
Address of Member

PHOTOGRAPH of any
one of the Authorized
signatory

Sign across the
Photograph

Dear Sir

We request you to register us as your client. The Details of Registration is as under :

(01) Name of the Company / Firm : _____

(02) Constituent Profile : _____
(Producer / Trader / Consumer)

(03) **Details of Registered Office:**

- Correspondence Address : _____
- City : _____
- Pincode : _____
- State : _____
- Country : _____
- Telephone Number : _____
- Mobile Number : _____
- Fax Number (including STD code): _____
- Email ID : _____

(04) Date of Incorporation : _____

DD/MM/YY

(05) Date of Commencement of Business : _____

(06) A. Names of Promoters / Partners /Karta and residential address

1. _____
2. _____
3. _____
4. _____
5. _____

B. Names of directors and residential address

1. _____
2. _____
3. _____
4. _____
5. _____

C.. Names and Designation of persons authorized to deal in commodities on behalf of the company/firm/others and their residential address

1. _____
2. _____
3. _____
4. _____
5. _____

(07) Networth as on (DD /MM/YY) : _____

(08) IT Permanent Account Number (PAN) : _____

- If PAN is not available, the reasons thereof : _____
- Whether declaration as per the format prescribed by the Income Tax department given?

Yes/No

(09) **Details of Bank Account:**

- Name & Address of Bank : _____
- Account Number of the Bank & Account Type : _____

(10) **Financial details of the client:**

Income Range (Per Annum): (Tick where applicable)

- Below Rs. 1,00,000
- Rs. 1,00,000 To Rs. 5,00,000
- Rs. 5,00,000 To Rs. 10,00,000
- Rs. 10,00,000 To Rs. 25,00,000
- Above Rs.25,00,000

(11) **Investment/Trading Experience**

No Prior Experience

___ Years in Commodities

___ Years in Other investment related fields

(12) **Trading Preference**

Commodity Exchanges on which you wish to trade (if the member is also registered with other Exchanges):

- 1.
- 2.
- 3.

(13) Details of any action taken by SEBI/FMC/Stock exchange/Commodity exchange/any other authority:

(14) **Sales Tax Registration Details:**

- Local Sales Tax State Registration No : _____
- Validity Date : _____
- Central Sales Tax: Registration No : _____
- Validity Date : _____

(15) **Depository Account Details:**

- Depository ID : _____
- DP ID : _____
- Client ID : _____

(16) **Details of Registration with other Exchanges:**

- Name of Exchange : _____
- Name of Broker : _____

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

(17) **References**

Introduction: Introduced by another client / director or employee of trading member / any other person (please specify)

Name of the Introducer: _____
(Surname) (Name) (Middle name)

Signature _____

I enter into agreement to abide by all the terms and conditions of the Exchange.

Authorized Signatory
Place:
Date:

Authorized Signatory
Place:
Date:

For office Purpose (To be completed, signed and authorized by member)

Client Code:

Verified by: _____ Authorized by : _____
(Name) (Name)

Documents to be submitted along with Client Registration Form :

- i. Address Proof
- ii. Proof of Bank Account Number
- iii. Copy of latest Annual Report
- iv. Proof of date of incorporation
- v. Copy of Memorandum of Association & Articles of Association. (Applicable to Corporate Entity)
- vi. Copy of Partnership Deed (Applicable to Partnership Firm)
- vii. Board Resolution authorizing the company officials to execute all the deeds/ operations with the Exchange on behalf of the company
- viii. Letter of Partnership firm (letterhead) authorizing partners to execute all the deeds / operations with the Exchange on behalf of firm
- ix. Self certified photocopy of PAN card
- x. Declaration, if the client does not have PAN, in the form prescribed by the Income Tax Department
- xi. Proof of DEMAT Account (Optional)