Know Your Client (KYC) Application	on Form – <i>For Individuals</i>		COARAC
- -	□ EKYC OTP □ Offline E-kyc □ Digilock	er	K SAMC (
	I this form in ENGLISH and in BLOCK L	EMMED ()	RADING APP
(Please tick the box on left margin of a corresponding row)	appropriate row where the CHANGE/COF		
A. <u>IDENTITY DETAILS</u>			
1. Name of the Applicant:*			
2. Father's/Spouse's Name:*			Please affix your
3. Mother's Name:*			
4. Maiden Name:*			recent passport
5. A. Gender:* Male Female Transgender	B. Marital Status:* Singl	e Married	size photo and sign across it.
C. Date of Birth:* / /			>≈
6. Nationality:*	☐ Indian ☐ Other (Please Spe	ecify)	(
Status:*	Resident Individual Nor	Resident	
	Foreign National (Passpor	Copy Mandatory)	
7. A. PAN:*	B. (UID)/Aadhaar, if any:		
8. Proof of Identity Submitted	PAN Card		
B. ADDRESS DETAILS			
1. Correspondence Address:*			
Address Line 1:			
Address Line 2:			
Address Line 3 :			
City/Town/Village:	PIN Code:		
State:	Country:		
2. Specify Proof of Address submitte	ed for Residence/Correspondence Address	:	
	from above or overseas address, (mandato		licant)
Address Line 1 :	Trom uco to or overseus ucuress, (munumo	y ror rom reordent rapp	
Address Line 2:			
Address Line 3:			
City/Town/Village:	PIN Code:		
State:	Country:		
4. Specify Proof of Address submitt	·		
5. Contact Details:*	ca for I eminiem radioss.		
a. Mobile Number:	b. EMAIL ID:		
c. Tel. (Office):	d. Tel. (Residence):		
, ,			
6. Any other Information:			
7. Are you a Tax Resident of any cou			
	in which you are resident for tax purposes		·
Country	Tax Identification Number %	Identification Type(TIN or Other , Please specify)
C. <u>DECLARATION</u>			

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

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we 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 address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.



Applicant Signature



Seal & Signature of Authorized Signatory

Date: Place:

Know Your Client (KYC) Application	on Form – <i>For Individuals</i>		COARAC
- -	□ EKYC OTP □ Offline E-kyc □ Digilock	er	K SAMC (
	I this form in ENGLISH and in BLOCK L	EMMED ()	RADING APP
(Please tick the box on left margin of a corresponding row)	appropriate row where the CHANGE/COF		
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C. Date of Birth:* / /			>≈
6. Nationality:*	☐ Indian ☐ Other (Please Spe	ecify)	(
Status:*	Resident Individual Nor	Resident	
	Foreign National (Passpor	Copy Mandatory)	
7. A. PAN:*	B. (UID)/Aadhaar, if any:		
8. Proof of Identity Submitted	PAN Card		
B. ADDRESS DETAILS			
1. Correspondence Address:*			
Address Line 1:			
Address Line 2:			
Address Line 3 :			
City/Town/Village:	PIN Code:		
State:	Country:		
2. Specify Proof of Address submitte	ed for Residence/Correspondence Address	:	
	from above or overseas address, (mandato		licant)
Address Line 1 :	Trom uco to or overseus ucuress, (munumo	y ror rom reordent rapp	
Address Line 2:			
Address Line 3:			
City/Town/Village:	PIN Code:		
State:	Country:		
4. Specify Proof of Address submitt	·		
5. Contact Details:*	ca for I eminiem radioss.		
a. Mobile Number:	b. EMAIL ID:		
c. Tel. (Office):	d. Tel. (Residence):		
, ,			
6. Any other Information:			
7. Are you a Tax Resident of any cou			
	in which you are resident for tax purposes		·
Country	Tax Identification Number %	Identification Type(TIN or Other , Please specify)
C. <u>DECLARATION</u>			

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

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we 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 address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.



Applicant Signature



Seal & Signature of Authorized Signatory

Date: Place:

Know Your Client (KYC) Application	on Form – <i>For Individuals</i>		COARAC
- -	□ EKYC OTP □ Offline E-kyc □ Digilock	er	K SAMC (
	I this form in ENGLISH and in BLOCK L	EMMED ()	RADING APP
(Please tick the box on left margin of a corresponding row)	appropriate row where the CHANGE/COF		
A. <u>IDENTITY DETAILS</u>			
1. Name of the Applicant:*			
2. Father's/Spouse's Name:*			Please affix your
3. Mother's Name:*			
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C. Date of Birth:* / /			>≈
6. Nationality:*	☐ Indian ☐ Other (Please Spe	ecify)	(
Status:*	Resident Individual Nor	Resident	
	Foreign National (Passpor	Copy Mandatory)	
7. A. PAN:*	B. (UID)/Aadhaar, if any:		
8. Proof of Identity Submitted	PAN Card		
B. ADDRESS DETAILS			
1. Correspondence Address:*			
Address Line 1:			
Address Line 2:			
Address Line 3 :			
City/Town/Village:	PIN Code:		
State:	Country:		
2. Specify Proof of Address submitte	ed for Residence/Correspondence Address	:	
	from above or overseas address, (mandato		licant)
Address Line 1 :	Trom uco to or overseus ucuress, (munumo	y ror rom reordent rapp	
Address Line 2:			
Address Line 3:			
City/Town/Village:	PIN Code:		
State:	Country:		
4. Specify Proof of Address submitt	·		
5. Contact Details:*	ca for I eminiem radioss.		
a. Mobile Number:	b. EMAIL ID:		
c. Tel. (Office):	d. Tel. (Residence):		
, ,			
6. Any other Information:			
7. Are you a Tax Resident of any cou			
	in which you are resident for tax purposes		·
Country	Tax Identification Number %	Identification Type(TIN or Other , Please specify)
C. <u>DECLARATION</u>			

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

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we 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 address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.



Applicant Signature



Seal & Signature of Authorized Signatory

Date: Place:



Additional KYC Form for Opening a Demat Account

For Individuals

SAMCO SECURITIES LIMITED

DEPOSITORY PARTICIPANT – CENTRAL DEPOSITORY SERVICES LTD

A- 302, 3rd Floor		D: 12054200 SEBI REGN NO. IN-DP-Clenapati Bapat Marg, Prabhadevi, Mumbai Email: depository@samco.in)22-2222	7777,	Fax:	022-	-2403	1691	,	
(To be filled by the D	Depository Participant)	Emain depository wsameo.ii									
Application No.	Date	DP Internal Reference	e No								
DP ID	1 2 0 5 4 2 0 0		Client ID	Ш	П						
(To be filled by the a	pplicant in BLOCK LETTER	S in English)									
I/We request you to o	open a demat account in my/ or	ir name as per following details:-									
Sole / First		PAN									
Holder's Name		UID		0			Ш				
		UCC									
		Exchange Name & ID									
Sole / Second Holder's Name		PAN					Ц				
Holder's Name		UID		0	Ш		Ц	\bot	Ш		
		UCC									
		Exchange Name & ID									
Sole / Third Holder's Name		PAN			Ш		Ц				
noider's Name		UID		0	Ш	Ш	Ц				
		UCC					Ш				
		Exchange Name & ID									
persons, the name of	the Firm, Association of Perso	artnership Firm, Unregistered Trust, etc., ans (AOP), Partnership Firm, Unregistered						e of 1	he na	ntural	
Type of Account (Pl	ease tick whichever is application	able)									
Status			Sub – Status	1							
☐ Individual		☐ Individual Resident ☐ Individual Director's Relative ☐ Individual Promoter ☐ Individual Margin Trading A/C (MA	□ In	☐ Individual-Director ☐ Individual HUF / AOP ☐ Minor ☐ Others(specify)							
□NRI		□ NRI Repatriable□ NRI Repatriable Promoter□ NRI – Depository Receipts	□ N	RI Non-l RI Non-l thers (sp	Repatr		Pron	noter			
☐ Foreign Nationa	al	☐ Foreign National ☐ Foreign National - Depository Receipts ☐ Others (specify)									

Details of Guardian (in	case th	e accoun	t holder is minor)					
Guardian's Name :						PAN :		
Relationship with the applicant :								
I / We instruct the DP to (If not marked, the defau				our account		[Automatic Credit] ☐ Yes ☐ No		
I / We would like to instruction without any other further (If not marked, the defau	instruc	tion from	my/our end	structions in my /our accou	unt	☐ Yes ☐ No		
Account Statement Requ	irement	t 🗌 As	per SEBI Regulation	☐ Daily ☐ Weekly ☐ F	ortnight	ly Monthly		
I / We request you to ID	send E	Electronic	Transaction-cum-Ho	olding Statement at the e	mail	☐ Yes ☐ No		
I / We would like to shar	e the en	nail ID w	ith the RTA			☐ Yes ☐ No		
I / We would like to rece (Tick the applicable box.				☐ Electronic / ☐ Both	Physical	and Electronic		
	default	t option v		account as given below the is mandatory for locations		☐ Yes ☐ No		
Bank Details [Dividend I	Bank D	etails]						
Bank Code (9 digit MIC)	R code)							
IFS Code (11 character)								
Account number								
Account type			☐ Saving ☐ Cur	rrent Others (specify)				
Bank Name			_ 2 _					
Branch Name								
Bank Branch Address:								
City:						DIN anda	<u> </u>	
(ii) Photocopy of the Bank (iii) Photocopy of the Pass (iv) Letter from the Bank. In case of options (ii), (iii) Other Details	book ha	aving nan	ne and address of the		mention	ed on the document.		
	-							
Gross Annual Income Details			per annum: ncome range(In Lakh	Rs.): Below 1 🗌 1-5 🔲 1	l-10 🔲 1	10-25 ☐ Above 25 ☐		
		orth as or				Rs:		
						[Net worth shou	ıld not be older than 1 year]	
Occupation								
Please tick, if applicable	: [Dolitica Politica	ally Exposed Person (PEP) Related to Politi	cally Ex	posed Person (RPEP)		
Any other information:								
SMS Alert Facility Refer to Terms & Condit given as Annexure - 2.4	tions	[(Man		ing Power of Attorney (PC u do not wish to avail of th		y, cancel this option).	•	
Texting Facility (TRUST). under Refer to Terms and Conditions ☐ You			stood the Terms and C s ☐ No wish to register the fol	Conditions prescribed by Cl	DSL for	gistered for SMS Alert Faci the same. r my/our below mentioned I		
		Stock	c Exchange Name/ID	Clearing Member Name	Clearin	ng Member Id (Optional)		
						_		
Easi	Easi To register for easi, please visit our website www.cdslindia.com . Easi allows a BO to view his ISIN balan transactions and value of the portfolio online.					w his ISIN balances,		



Nomination Form

[Annexure A to SEBI circular No. SEBI/HO/MIRSD/RTAMB/CIR/P/2021/601dated July 23, 2021on Mandatory Nomination for Eligible Trading and Demat Accounts]

	TM / Name and		5							(-			FOR NOMINA dividual applyin	TION ig singly or jointl	y)	
	Date D	D	М	М	Υ	Υ	ΥΥ				UCC/ DP ID	1	N		Clie	nt ID
I/W	le wish to make	a nomi	nation.	[As p	er de	etails	given b	elow	w]							
No	mination Deta	ils														
I/W	e wish to make	a nomi	nation	and d	o he	reby i	nomina	te th	ne following	g person(s)) who shall re	cei	ve all the as	sets held in m	y / our account in	the event of my / our
de	ath.															
No th	mination can l ree nominees i	n the	de upt accou	nt.	D	etail	s of 1s	st No	ominee		Details o	f 2ı	nd Nomine	2	Details of 3rd	Nominee1
1	Name of the (Mr./Ms.	nomin	ee(s)													
2	Share of each Nominee	Equa [If no pleas perce	illy t equal e speci ntage]	ly, fy						%				%		9
3	Relationship Applicant (If	With t Any)	he													
4	Address of No City / Place: State & Country:	omine	e(s)													
		PI	NCODI	E												
5	Mobile/Telepl nominee(s)	hone N	lo. of													
6	Email ID of no	omine	e(s)													
7	Nominee Ider -[Please tick any oprovide details of D Photograph & S D PAN D Aadhaar Saving Bank ac D Proof of Identity D Demat Account	ntificatone of fo same] ignature count no ID	ion de llowing	etails and												
Sr.	Nos. 8-14 should	d be fill	ed only	y if no	mine	ee(s) i	s a mir	or								
8	Date of Birth nominee(s)}	{in ca	se of	minor	r											
9	Name of Gua {in case of m	rdian (inor n	Mr./M omine	s.) e(s)}												
10	Address of Go City / Place: State & Country:	uardia	n(s)													
	PIN	ICODE														
11	Mobile/Telep Guardian	hone n	o. of													
12	Email ID of G	uardia	n													
13	Relationship nominee	of Gua	rdian	with												
14	Guardian Ide -[Please tick any of provide details of Photograph & S - PAN	one of fo same] ignature	llowing	etails and												
					_		Name	e(s) c	of holder(s)					Signatur	re(s) of holder*
So	le / First Holder	(Mr./Ms	.)		\perp											
Se	cond Holder (Mr	./Ms.)														
Th	ird Holder (Mr./N	1s.)														
* Sig	nature of witnes	s. alon	a with	name	and	addr	ess are	reau	uired. if the	e account			We Accept			

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)

For SAMCO SECURITIES LTD

Authorized Signatories REGD. OFFICE: 66 ,Samruddhi House,Bhaudaji Cross Lane, Opp.South Indian Gymkhana,Matunga(C.R.), Mumbai-400019

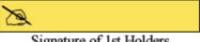
<u>Demat Debit and Pledge Instruction</u>

S.No.	Purpose	Signature of Client*
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	Signature of 1 st Holders Signature of 2 nd Holders Signature of 3 rd Holders
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.	Signature of 1 st Holders Signature of 2 nd Holders Signature of 3 rd Holders
3.	Mutual Fund transactions being executed on Stock Exchange order entryplatforms	Signature of 1 st Holders Signature of 2 nd Holders Signature of 3 rd Holders
4.	Tendering shares in open offers through Stock Exchange platforms)	Signature of 1 st Holders Signature of 2 nd Holders Signature of 3 rd Holders

Demat Account Details-Samco Securities Limited

Demat Account Details-Samco Securities Limited

EXCHANGE & SEGMENTS	TYPE OF A/C	NSDL	CDSL
BSE CASH	EARLY PAYIN A/C		1100001000018570
NSE CASH	EARLY PAYIN A/C		1100001100018602
NSE CASH	POOL A/C	IN560708	1205420000002691
NSE CASH	TM/CM CMPA A/C		1205420001505078
NSE CASH	SLB POOL A/C		1205420001834205
NSE CASH	TM/CM CSMFA A/C		1205420001506582
NSE CASH	TM/CM CSMFA A/C		1205420000002307







Signature of 1st Holders

Signature of 2nd Holders

Voluntary Authorization Letter

To,

SAMCO SECURITIES LIMITED

A- 302, 3rd Floor, Naman Midtown, A Wing, Senapati Bapat Marg,

Prabhadevi, Mumbai – 400013

Dear Sir,

Sub: Voluntary Authorization Letter

BO ID: 12054200 Client code :

SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4	MOBILE NO. +91(Mandatory, if you are giving Power of Attorney / Demat Debit and Pledge Instruction POA / DDPI)] if DDPI is not granted & you do not wish to avail of this facility, cancel this option).							
Transactions Using Secured Texting Facility (TRUST). Refer to Terms and Conditions Annexure – 2.6	understood the Terms and Co □ Yes □ No	onditions prescribed by CI owing clearing member II	mber registered for SMS Alert Fa DSL for the same. Os under my/our below mentioned Clearing Member Id (Optional)	·				
Easi	To register for easi, please visit our website www.cdslindia.com. Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.							

2) Authorisation to debit trading account for the demat account charges

I/We have opened/have a beneficiary account with your CDSL depository along with a trading account for investment and trading purpose. It would be difficult for me/us to keep issuing separate cheques against your depository bills. I/We therefore authorise you to debit the charges payable towards operations of the above account. I/We are aware of the charges for operating the said account. Any such sum debited to my trading account shall be binding on me/us.

3) Option form for issue of DIS Booklet (Voluntary)

I/We hereby state that: [select one of the option given below]

OPTION 1: I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL account though I/ We have issued a Demat Debit and Pledge Instruction (DDPI) in favour of **SAMCO Securities Limited** for executing delivery instructions for settling stock exchange trades [Settlement related transactions] effected through such Clearing Member.

OR

OPTION 2: I / We do not require the delivery Instruction Slip(DIS)for the time being, Since samco provides an OTP based online instruction service & we will issue a DDPI in favour of **SAMCO Securities Limited** for executing the delivery instructions for settling stock exchange trades [settlement related transaction]effected through such Clearing Member. However, the Delivery Instruction Slip (DIS)booklet should be issued to me / us immediately on my / our request at any later date.

I We here by select □ OPTION 1 ☒ OPTION 2

4) Request for bill/transaction/holding statement through email.

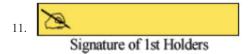
I/We request you to send me/us bill, transaction and holding statement of my CDSL Demat account no. **12054200**_____at following email address:

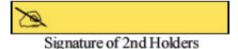
I/We fully agree and are aware of following Terms and Conditions mentioned below.

- (a) that I/We will not receive the bill, transaction and holding statements in paper form.
- (b) that I/We will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the internet/email account.
- (c) that I/We am/are aware that the bill, transaction and holding statements may be accessed by other entities in case the confidentiality / secrecy of the login name and password is compromised.
- (d) that I/We in case bill, transaction and holding statements are sent by email, I/We will immediately inform the SAMCO SECURITIES LIMITED. about change in email address, if any.

In case, the SAMCO Securities Limited is not able to provide bill/transaction statement to its Clients by email or on website due to any reason (including bounced emails), SAMCO Securities Limited will ensure that the transaction statement is provided to me/us in paper form as per the time schedule stipulated in the Bye Laws & Business Rules of CDSL.

I/We hereby request you to sent the statements: □ daily □ fortnightly □ weekly □ monthly







Signature of 2nd 110

Date:

SAMCO TARIFF SHEET

To,

SAMCO SECURITIES LIMITED

A- 302, 3rd Floor, Naman Midtown, A Wing, Senapati Bapat Marg,

Prabhadevi, Mumbai – 400013

I/ We agree to pay the charges as per t	Collowing charges structure for our Trading account with SAMCO effective _	
Client ID	Client Name	

Rs 20 per executed order or 0.25% of Turnover whichever is lower

Charge Head	Brokerage / Charges
Equity Delivery	Rs 20 per executed order or 2.50% of Turnover whichever is lower

^{*}Turnover for Options is calculated as (Strike + Premium) *Lot Size

In addition to the brokerage charge the following charges will also be levied

Schedule of Charges:

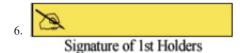
- 1. Turnover Charges
- 2. Securities Transaction Tax
- 3. GST
- 4. Stamp Duty: State-wise stamp duty as applicable will be levied
- 5. Clearing Member charges (on actual basis)
- 6. SEBI Turnover Fees
- 7. Call N Trade Charges for Broker assisted trades
- 8. Demat Charges
- 9. Payment gateway charges will be applicable.
- 10. Any additional service request would be charged as per the applicable rates.

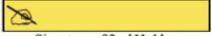
Detailed explanation of the Schedule of Charges is available online at https://samco.in/charge_list

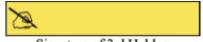
DEMAT CHARGES

Sr No.	Services	Corporate	Individual
1	Account Maintenance	Rs.800/- plus GST	Rs.400/- plus GST
2	Deliveries/Debit (Market & Off Market) 1. Within SAMCO DP 2. Outside SAMCO DP (Charges are inclusive of CDSL tariff)	Rs.15/- plus GST per transaction 0.02% on transaction value subject to min. Rs.25/- per transaction plus GST	Rs.15/- plus GST per transaction 0.02% on transaction value subject min. Rs.25/- per transaction plus GST
3	Pledge (Creation/Closure/Invocation)	Rs.25/- per ISIN plus GST	Rs.25/- per ISIN plus GST
4	Dematerialisation	Rs.10/- per certification plus Rs.50/- per request towards postal charges plus GST	Rs.10/- per certification plus Rs.50/- per request towards postal charges plus GST
	Rematerialization	Actual CDSL charges plus Rs.50/- per request towards postal charges plus GST	Actual CDSL charges plus Rs.50/- per request towards postal charges plus GST

- All charges mentioned above are inclusive of CDSL Charges.
- · Any service, which is not mentioned above, will be charged separately as per the rates applicable from time to time.
- SAMCO reserves the right to revise the tariff structure from time to time with a notice of 30 days.
- Billing will be made on monthly basis.
- In addition to the above, all other statutory / regulatory levies such as GST etc. are recovered at the applicable rates from time to time.
- All instruction for transfer must be received at the DP at least 3.30 p.m. for the same day execution date & 5.00 p.m. for next day execution date on the pay in date accepted only at client's risk.
- Operation instruction for the joint account must be signed by all the holders.







Signature of 2nd Holders

Signature of 3rd Holders

Date:

Client Signature

Name of the Applicant

Most Important Terms and Conditions (MITC) (For non-custodial settled trading accounts)

- 1. Your trading account has a "Unique Client Code" (UCC), different from your demat account number. Do not allow anyone (including your own stock broker, their representatives and dealers) to trade in your trading account on their own without taking specific instruction from you for your trades. Do not share your internet/ mobile trading login credentials with anyone else.
- 2. You are required to place collaterals as margins with the stock broker before you trade. The collateral can either be in the form of funds transfer into specified stock broker bank accounts or margin pledge of securities from your demat account. The bank accounts are listed on the stock broker website. Please do not transfer funds into any other account. The stock broker is not permitted to accept any cash from you.
- 3. The stock broker's Risk Management Policy provides details about how the trading limits will be given to you, and the tariff sheet provides the charges that the stock broker will levy on you.
- 4. All securities purchased by you will be transferred to your demat account within one working day of the payout. In case of securities purchased but not fully paid by you, the transfer of the same may be subject to limited period pledge i.e. seven trading days after the pay-out (CUSPA pledge) created in favor of the stock broker. You can view your demat account balances directly at the website of the Depositories after creating a login.
- 5. The stock broker is obligated to deposit all funds received from you with any of the Clearing Corporations duly allocated in your name. The stock broker is further mandated to return excess funds as per applicable norms to you at the time of quarterly/ monthly settlement. You can view the amounts allocated to you directly at the website of the Clearing Corporation(s).
- 6. You will get a contract note from the stock broker within 24 hours of the trade.
- 7. You may give a one-time Demat Debit and Pledge Instruction (DDPI) authority to your stock broker for limited access to your demat account, including transferring securities, which are sold in your account for pay-in.
- 8. The stock broker is expected to know your financial status and monitor your accounts accordingly. Do share all financial information (e.g. income, networth, etc.) with the stock broker as and when requested for. Kindly also keep your email Id and mobile phone details with the stock broker always updated.
- 9. In case of disputes with the stock broker, you can raise a grievance on the dedicated investor grievance ID of the stock broker. You can also approach the stock exchanges and/or SEBI directly.
- 10. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. You will not have any protection/recourse from SEBI/stock exchanges for participation in such schemes.

Date

Place

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Signature of 1st Holders

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Signature of 2nd Holders

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Signature of 3rd Holders

Good Till Triggered (GTT) Policy

1. Purpose

The purpose of this Goods Till Triggered (GTT) Order Policy is to define the procedures and conditions under which GTT orders are placed, managed, and executed. This policy aims to provide clarity on how GTT orders work and ensure that they are handled in a transparent and efficient manner.

2. Definition

A GTT order is a type of conditional order that remains valid until a predefined trigger condition is met. Once the trigger condition is satisfied, the GTT order is activated and executed according to the specified instructions.

3. Scope

This policy applies to all GTT orders placed by clients for the purchase or sale of securities, or other financial instruments through our trading platform.

4. Order Placement

Trigger Condition: The client must specify the conditions under which the GTT order will be activated. This could include price levels, quantity, or other relevant criteria. Further on trigger of price, the GTT order will then be executed with exchange. Order Details: The client must provide complete details of the GTT order, including the trigger condition, order type (buy/sell), quantity, price, and any additional instructions.

5. Validity

Duration: GTT orders are valid until the trigger condition is met or until the order is canceled by the client. GTT orders do not expire until activated or explicitly canceled. The validity of GTT orders is till 31st Dec 2099, after placing the request if they are not triggered according to the specified conditions.

Trigger Satisfaction: Once the trigger condition is met, the GTT order is activated and treated as a standard order, subject to market conditions and execution practices.

6. Order Execution

Activation: Upon activation, the GTT order will be executed based on the prevailing market conditions and the instructions provided by the client.

Partial Execution: If only part of the order can be filled, the remaining quantity may remain open or be canceled based on client instructions.

Market Conditions: Execution is subject to market liquidity and other factors. The company does not guarantee that the order will be executed at the specified price.

7. Modification and Cancellation

Modification: Clients may modify the trigger condition, order details, or other relevant parameters of a GTT order before it is activated. Cancellation: Clients can cancel a GTT order at any time before it is triggered. Once activated, the order can only be canceled or modified according to standard order management procedures. In the event of corporate actions, all existing GTT orders are canceled one day before the ex-date of the corporate action and clients will be intimated on the same day.

8. Risk Disclosure

Date

Place

Market Risk: Clients should be aware of market risks, including price volatility and liquidity issues, which may impact the execution of GTT orders.

System Risk: There may be technical issues or system limitations that affect the activation and execution of GTT orders. The company does not guarantee that the order will be triggered and executed during market volatility.

9. Compliance and Reporting

Regulatory Compliance: GTT orders and their execution are subject to relevant regulatory requirements and compliance standards. The GTT orders are subject to certain terms and conditions which are listed on our official website www.samco.in Reporting: Clients will receive reports and confirmations regarding the status and execution of their GTT orders as per standard practices.

Signature of 1st Holders

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Signature of 3rd Holders

Signature of 2nd Holders

Policy on facility of voluntary freezing/blocking the online access of the trading account

1. SCOPE AND APPLICABILITY

Samco Securities Limited, being a Trading Member providing Internet Based Trading/ Mobile Trading/ other online access for trading, is required to make available to the clients at least two modes as prescribed by the exchanges through which the client may request for voluntary freezing/ blocking the online access of trading account if any suspicious activity is observed in the trading account.

2. Mode of receipt of request for freezing/blocking the trading A/c:

Following modes shall be provided by the Company for receipt of request for freezing/blocking the clients trading A/c:

- 1. Client can raise voluntary freeze request through his own Back-office login under Profile section and complete 2FA authentication.
- 2. A dedicated land Line No.: 022-69080514 is provided to clients to place request for voluntary freezing/blocking of the online access of the clients' trading account.

3. Procedure to be followed on receipt of request for freezing/blocking the trading A/c.:

n receipt of request from clients through any of the prescribed modes of communications; for freezing/blocking of the online access of the trading account from the client:

- 1. Company shall validate that the request is received from a registered client and issue an acknowledgement for the same.
- 2. Company shall freeze/block the online access of the client's trading account and simultaneously cancel all the pending orders of the said client.

To validate that the request for freezing/blocking of the online access of the trading account is received from the respective client; company shall verify, whether request is received from the registered e-mail Id / mobile number of the client

3. The timelines for freezing/blocking of the online access of the clients' trading account is as under:

Scenario	Timelines for issuing acknowledgement as well as freezing/ blocking of the online access of the trading account
Request received during the trading hours and within 15 minutes before the start of trading	Within 15 Minutes
Request received after the trading hours and 15 minutes before the start of trading	Before the start of next trading session

- 4. Post freezing/blocking the client's trading account, company shall send a communication on the registered e-mail ID of the client, stating that the online access to the trading account has been frozen/blocked and all the pending orders in the client's trading account, if any, have been cancelled along with the process of re-enablement for getting the online access to the trading account.
- 5. Company shall also communicate / provide the details of open positions of client (if any) along-with contract expiry information within one hour from the freezing/blocking of the trading account.
- 6. Company shall maintain the appropriate records/logs including, but not limited to, request received to freeze/block the online access of trading account, confirmation given for freezing/blocking of the online access of the trading account and cancellation of pending orders, if any, sent to the clients.

4. Re-enabling the client for online access of the trading account: -

Company shall re-enable the online access of trading account after carrying out necessary due diligence including validating the client request received on support@samco.in and unfreezing / unblocking the online access of the trading account.

5. Clarification

Freezing/blocking is only for the online access to the client's trading account, and there shall be no restrictions on the Risk Management activities of company.

The request for freezing/ blocking does not constitute request for marking client Unique Client Code (UCC) as inactive in the records of respective Exchanges.

Place	

Date







* Joint Accounts

Event	Transmission of Account / Folio to
Demise of one or more joint holder(s)	Surviving holder(s) through name deletion
Demise of all joint holders simultaneously – having nominee	Nominee
Demise of all joint holders simultaneously – not having nominee	Legal heir(s) of the youngest holder

^{**} If % is not specified, then the assets shall be distributed equally amongst all the nominees (see table in 'Transmission aspects').

- Date of Birth (DoB): please provide, only if the nominee is minor.
- Guardian: It is optional for you to provide, if the nominee is minor.

1) I/We want the details of my/our nominee to be printed in the statement of holding, provided to me/us by the AM	MC / DP as follows; (please tick,
as appropriate):	

Name of nominee(s):	Nomination:	Yes	~	No
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2) I hereby authorize _(nominee number _) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5 of the circular.

He / She is authorized to encash my assets up to $_\%$ of assets in the account / folio or Rs $_$.

(strike off portions that are not relevant)

3) This nomination shall supersede any prior nomination made by me / us, if any.

-	

^{*} Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

Rights, Entitlement and Obligation of the investor and nominee:

- If you are opening a new demat account / MF folios, you have to provide nomination. Otherwise, you have to follow procedure as per 3.10 of this circular.
- You can make nomination or change nominee any number of times without any restriction.
- You are entitled to receive acknowledgement from the AMC / DP for each instance of providing or changing nomination.
- Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominee(s) or for each nominee(s) to open separate single account / folio.
- In case all your nominees do not claim the assets from the AMC / DP, then the residual unclaimed asset shall continue to be with the AMC in case of MF units and with the concerned Depository in case of Demat account.
- You have the option to designate any one of your nominees to operate your account / folio, in case of your physical incapacitation.
 This mandate can be changed any time you choose.
- The signatories for this nomination form in joint folios / account, shall be the same as that of your joint MF folio / demat account i.e.
 - o 'Either or Survivor' Folios / Accounts any one of the holder can sign
 - o 'Jointly' Folios / Accounts both holders have to sign

^{***} Provide only number: PAN or Driving Licence or Aadhaar (last 4). Copy of the document is not required.

^{****} To be furnished only in following conditions / circumstances:

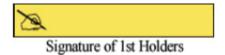
Transmission aspects

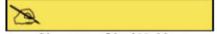
- AMCs / DPs shall transmit the folio / account to the nominee(s) upon receipt of 1) copy of death certificate and 2) completion / updation of KYC of the nominee(s). The nominee is not required to provide affidavits, indemnities, undertakings, attestations or notarization.
- Nominee(s) shall extend all possible co-operation to transfer the assets to the legal heir(s) of the deceased investor. In this regard, no dispute shall lie against the AMC / DP.
- In case of multiple nominees the assets shall be distributed pro-rata to the surviving nominees, as illustrated below.

% share as specified by investor at the time of nomination		% assets to be apportioned to surviving nominees upon demise of investor and nominee 'A'		Total % share	
Nominee	% share	Nominee	% initial share	% of A's share to be	
A	60%			apportioned	
В	30%	A	0	0	
D C		В	30%	45%	100%
C	10%	С	10%	15%	
Total	100%	Total	-	60%	

Date

Place







Signature of 2nd Holders

Signature of 3rd Holders

Form ISR - 3

Declaration Form for Opting-out of Nomination by holders of physical securities in Listed Companies

(see SEBI Circular No. SEBI/HO/MIRSD/MIRSD-PoD-1/P/CIR/2023/37 dated March 16, 2023 on Common and Simplified Norms for processing investor's service request by RTAs and norms for furnishing PAN, KYC details and Nomination)

[Under Section 72 r/w Section 24 (1) (a) of Companies Act, 2013 r/w Section 11(1) and 11B of SEBI Act, 1992 and Clause C in Schedule VII and Regulation 101 of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015)]

Registered Address of the Company:	
I / we the holder(s) of the securities particulars given hereunder, <u>do not wish to nominate</u> any person(s) in whom shrights in respect of such securities in the event of my /our death.	
I/ we understand the issues involved in non-appointment of nominee are aware that in case of my / our death, my / our legal heir(s) / repres required to furnish the requisite documents / details, including, Will issued by the Court like Decree or Succession Certificate or Letter of A Probate of Will or any other document as may be prescribed by authority, for claiming my / our aforesaid securities.	entative(s) are or documents
Name(s) and Address of Security holders(s) * Sole / First Holder Name	Signature(s)
Second Holder Name	
Third Holder Name	
* Signature of witness, along with name and address are required, if the holder affixes thumb impression, instead of signature	e account