

ACCOUNT OPENING FORM



ACME GROUP

www.acmecapitalmarket.com

Acme Group has grown over the past decades on the foundations of dedicated customer service, fair business practices, efficient, safe and trusted financial policies & is a leading provider of investment solutions.



Branch Code / Sub-Broker Name.....

Client Name.....

Client Code

Demat Account No. **IN 304721-**.....

Date of Registration.....

INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients, including Promoters/Partners /Karta/Trustees and whole time directors and persons authorized to deal in securities on behalf of company/firm/others.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRIs, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/Judicial/Military officers, senior executives of state owned corporations, important political party officials, etc.

B. Proof of Identity (POI): - List of documents admissible as Proof of Identity:

1. Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
2. PAN card with photograph.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): - List of documents admissible as Proof of Address:

(*Documents having an expiry date should be valid on the date of submission.)

1. Passport/ Voters Identity Card/ Ration Card/ Registered Lease or Sale Agreement of Residence/ Driving License/ Flat Maintenance bill/ Insurance Copy.
2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook -- Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/ Gazetted Officer/Notary, public/Elected representatives to the Legislative Assembly/ Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/ document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN

(Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from Pay-ing taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50, 000/- p.a.
5. In case of institutional clients, namely, FIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy /Consulate General in the country where the client resides are permitted to attest the documents

F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, as mentioned below:

Types of Entity	Documentary requirements
Corporate	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). • Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. • Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly. • Copies of the Memorandum and Articles of Association and certificate of incorporation. • Copy of the Board Resolution for investment in securities market. • Authorised signatories list with specimen signatures.
Partnership Firm	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Copy of partnership deed. • Photograph, POI, POA, PAN of Partners. <ul style="list-style-type: none"> • Certificate of registration (for registered partnership firms only). • Authorised signatories list with specimen signatures.
Trust	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year). • Copy of Trust deed. • Photograph, POI, POA, PAN of Trustees. <ul style="list-style-type: none"> • Certificate of registration (for registered trust only). • List of trustees certified by managing trustees/CA.
HUF	<ul style="list-style-type: none"> • PAN of HUF. • Bank pass-book/bank statement in the name of HUF. <ul style="list-style-type: none"> • Deed of declaration of HUF/ List of coparceners. • Photograph, POI, POA, PAN of Karta.
Unincorporated association or a body of individuals	<ul style="list-style-type: none"> • Proof of Existence/Constitution document. • Resolution of the managing body & Power of Attorney granted to transact business on its behalf. • Authorized signatories list with specimen signatures.
Banks/Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. • Authorized signatories list with specimen signatures.
Foreign institutional Investors (FII)	<ul style="list-style-type: none"> • Copy of SEBI registration certificate. • Authorized signatories list with specimen signatures
Army/ Government Bodies	<ul style="list-style-type: none"> • Self-certification on letterhead. • Authorized signatories list with specimen signatures
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Societies Registration Act. • Committee resolution for persons authorised to act as authorised signatories with specimen signatures. <ul style="list-style-type: none"> • List of Managing Committee members. • True copy of Society Rules and Bye Laws certified by the

INSTRUCTIONS/ CHECK LIST (for filling additional information related to trading account)

1. Additional documents in case of trading in derivatives segments - illustrative list:

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income - Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement.	Bank account statement for last 6 months
Any other relevant documents substantiating ownership of assets.	Self declaration with relevant supporting documents.

- *In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.
2. Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.
 3. Demat master or recent holding statement issued by DP bearing name of the client.
 4. For individuals:
 - a. Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office.
 - b. In case of non-resident clients, employees at the stock broker's local office, overseas can do in-person' verification. Further, considering the infeasibility of carrying out 'in-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
 5. For non-individuals:
 - a. Form need to be initialized by all the authorized signatories.
 - b. Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.

ACCOUNT OPENING KIT - NSE, BSE & NSDL

Location	
Client Code	

INDEX

S.No.	Name of the Document	Brief Significance of the Documents	P. No.
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES			
1.	KRA FORM	Documents Capture the Basic Information about the constituent (Individual, Non individual & Identity detail of Related Person)	1-9
2.	Additional Information Related to Demat account	A. Documents basic information (Individual/Non-Individual) B. Nomination C. Declaration by HUF D. Schedule of Demat Charges	10-17
3.	Additional Information Related to Trading account, DIS	Document captures the additional information about the constituent relevant to trading account and instruction checklist (individual & non individual) deceleration/under taking, Undertaking for DIS issuance	10-21
4.	Tarrif Plan	Product Plan/ Brokerage Tarrif Plan (Subject to Change)	22
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER AND DEPOSITORY PARTICIPANT			
5.	FATCA & CRS Declaration	FATCA & CRS Declaration (Individual/ Non-Individual)	23-25
6.	Internet & Wireless Technology based Trading Letter	Authorised to Stock Broker	26
7.	Voluntary Documents	A. SMS and Email related trading and transaction/ Authorization for sharing personal information/Authorization for Sharing personal information/ Authorization to pledge the shares and securities/Verbal order acceptance authorisation/ Running account authorization	27-28
8.	MF(NSE,BSE) BANK	A. Bank Mandate Form/Mutual fund facility B. MF Approved Platform	29
9.	Terms and conditions	Mutual Fund Terms and conditions	30-31
10.	Letter of Authority	CASH/F&O/Currency Derivative Segment of NSE/BSE, Name Mismatch Declaration	32-33
11.	Disclosure Information & Lien and set-off / Addendum to client	Right to Exercise Set-Off / Lien, Addendum to the Client Registration / Key Information & Disclosure information (PHLA)	34-35
12.	DDPI	Demat Debit and Pledge Instruction (DDPI)	36

NOTE: Please check the page number serial



EXCHANGE NAME / D. P.	SEGMENT	SEBI REGISTRATION NO.	DATE
NSE	Cash	INZ000311839	09/08/2024
NSE	F&O	INZ000311839	09/08/2024
NSE	Currency Derivatives	INZ000311839	09/08/2024
BSE	Cash	INZ000311839	10/04/2023
BSE	F&O	INZ000206539	10/04/2023
BSE	Star MF	59578	31/01/2024
NSDL	Depository Participant	IN-DP-777-2024	29/08/2024

Registered Office :

F-23/1, LANE F-23, BLOCK F, KRISHNA NAGAR, DELHI-110051
Ph.: 9311759200 | Fax: 020-4456411
E-mail : backoffice@acmegroup.global | Website : www.acmecapitalmarket.com

Corporate Address :

208-209 & 215, Ocean Complex 2nd Floor, Noida-201301
Ph.: 9311759200 | Fax: 020-4456411
E-mail : backoffice@acmegroup.global | Website : www.acmecapitalmarket.com

Compliance Officer Details (NSE, BSE & NSDL) :

Name : Nishant Kumar Ghosh
Phone No. : 0120-4456411
Email id : compliance@acmegroup.global

CEO's Details :

Name : Raman Talwar
Phone No. : 0120-4456411
Email id : ramon.talwwar@acmegroup.global

For any grievance/dispute please contact **ACME Capital Market Limited.** at the above address or email id: and **grievance@acmecapitalmarket.in** Ph.: 120-4456411. In case not satisfied with the response, please contact the concerned exchange(s) at :

Exchange Name	Email ID	Phone No.
NSE	ignse@nse.co.in	+91-22-26598100
BSE	is@bseindia.com	+91-22-22721233/34
NSDL	relations@nsdl.co.in	+91-22-24994200

Filing of Complaints on SEBI Scores-Easy & Quick (<https://www.scors.gov.in/scores/Welcome.html>)

- Register on SCORES portal
- Manadatory details for Filing complaints on SCORE i.e Name, Pan, Address, mobile no., Email ID
- Benefits: (i) Effective communication (ii) Speedy redressal of the grievances

ACKNOWLEDGEMENT

I / We acknowledge receipt of the documents at serial 1-36 mentioned overleaf under INDEX and part of form (client copy) I / We have read the contents of these and agree to abide by them. I / We further understand that the copies of rest of the documents mentioned in Index shall be provided to me / us after Verification / Acceptance / Execution by the broker and Depository Participant.

 (1)

Sole/First Holder Signature



Second Holder Signature



Third Holder Signature

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



ACME CAPITAL MARKET LIMITED

Corp Office: 208-209, 215, Ocean Complex
Second floor, Sec-18, Noida-201301



Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: _____

Application Type*: New KYC Modification KYC

KYC Mode*: Please Tick ()

Normal EKYC OTP EKYC Biometric Online KYC Offline EKYC Digilocker

1. Identity Details (please refer guidelines overleaf)

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

Name* (same as ID proof) _____

Maiden Name+ (if any) _____

Fathers/Spouse's Name* _____

Mothers Name* _____

Gender* Male Female Transgender

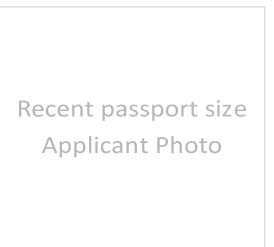
Marital Status* Single Married

Nationality* Indian Other _____

Residential Status* Resident Individual Non Resident Indian

Please Tick () Foreign National Person of Indian Origin+

(Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC. Select NRI or Foreign National based on Nationality of the individual)



Cross Signature across photograph

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

A — Aadhaar Card XXXX XXXX ____ (Expiry Date) _____

B — Passport Number _____ (Expiry Date) _____

C — Voter ID Card _____ (Expiry Date) _____

D — Driving License _____

E — NREGA Job Card _____

F — NPR _____

Z — Others _____ (any document notified by Central Government)

Identification Number _____

2. Address Details* (please refer guidelines overleaf)

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line3 _____

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

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Applicant e-SIGN

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

Line 1* _____
 Line 2 _____
 Line3 _____
 City/
 Town/Village* _____ District* _____ Pin Code* _____
 State* _____ Country* _____
 Address Type* Residential/Business Residential Business Registered Office Unspecified

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

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

3. Contact Details (in CAPITAL)

Email ID* _____
 Mobile No. * _____
 Tel (off) _____ Tel (Res) _____

4. Applicant Declaration

<p>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.</p> <p>I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.</p> <p>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.</p> <p>DATE: _____ (DD-MM-YYYY) PLACE: _____</p>	Applicant e-SIGN	Applicant Wet Signature

5. For Office Use Only

In-Person Verification (IPV) carried out by*	Intermediary Details*
IPV Date _____ Emp. Name _____ Emp. Code _____ Emp. Designation _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) AMC / Intermediary Name : <div style="border: 1px solid black; padding: 5px; text-align: center;">ACME CAPITAL MARKET LTD.</div>
Employee Signature and Stamp	Institution Name and Stamp



Know Your Client (KYC)

Application Form (For Non- Individuals Only)

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

Application Number:

Application Type*: New KYC Modification KYC

1. Entity Details (please refer guidelines)

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

Name* (same as ID proof) _____

Date of Incorporation* _____ Place of Incorporation* _____

Date of Commencement* _____ Registration Number* _____

Entity Type*
Please Tick ()

<input type="checkbox"/> Private Ltd. Co.	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Partnership
<input type="checkbox"/> Trust/Charity/NGO	<input type="checkbox"/> HUF	<input type="checkbox"/> FPI Category I	<input type="checkbox"/> FPI Category II
<input type="checkbox"/> AOP	<input type="checkbox"/> Bank	<input type="checkbox"/> Government Body	<input type="checkbox"/> Defence Establishment
<input type="checkbox"/> Body of Individuals		<input type="checkbox"/> Society	<input type="checkbox"/> LLP
<input type="checkbox"/> Non-Government Organization			
<input type="checkbox"/> Others _____			

2. Proof of Identity+ (please refer the guidelines)

- Officially Valid Document(s) in respect of person authorized to transact
- Certificate of Incorporation/Formation _____ Registration Certificate _____
- Memorandum of Articles and Association Partnership Deed Trust Deed
- Board Resolution Power of attorney granted to its manager, officer, employees to transact on its behalf
- Activity Proof –1* (For Sole Proprietorship Only) Activity Proof –2* (For Sole Proprietorship Only)

3. Address Details* (please refer the guidelines)

A. Registered Address*

Line 1* _____

Line 2 _____

Line 3 _____

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

State* _____ Country* _____

B. Correspondence/Local Address in India (if different from above)*

Line 1* _____

Line 2 _____

Line 3 _____

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

State* _____ Country* _____

	Applicant Digital Signature (DSC)

Proof of Address* (attested copy of any one POA to be submitted—#Not more than 3 months old)

<input type="checkbox"/> Certificate of Incorporation/Formation	<input type="checkbox"/> Registration Certificate	<input type="checkbox"/> Other document _____
<input type="checkbox"/> Latest Telephone Bill# (Landline only)	<input type="checkbox"/> Latest Electricity Bill#	<input type="checkbox"/> Latest Bank Account Statement#
<input type="checkbox"/> Registered Lease/ Sale Agreement of Office Premises	Validity/Expiry Date of POA (Expiry Date) _____	
<input type="checkbox"/> Any other proof of address document (as listed overleaf)	_____	

4. Contact Details

Email ID _____	Mobile No. _____
Email ID _____	Mobile No. _____
Tel (off) _____	Fax _____

5. Annexures Submitted

Number of Related Persons -

6. Remarks / Additional Information

7. Applicant Declaration

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake 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.

DATE: _____ (DD-MM-YYYY)

PLACE: _____

Applicant Digital Signature (DSC)

Applicant Wet Signature

8. For Office Use Only

KYC carried out by*	Intermediary Details*
KYC Date _____	<input type="checkbox"/> Self certified document copies received (Originals Verified)
Emp. Name _____	<input type="checkbox"/> True Copies of documents received (Attested)
Emp. Code _____	AMC / Intermediary Name OR Code:
Emp. Designation _____	<input type="text" value="ACME CAPITAL MARKET LTD."/>
Employee Signature and Stamp	Employee Signature and Stamp

— This space is intentionally left blank — This space is intentionally left blank — This space is intentionally left blank — This space is intentionally left blank —

Know Your Client (KYC)
Annexure (For Non- Individuals Only)



ACME CAPITAL MARKET LIMITED

Corp Office: 208-209, 215, Ocean Complex
Second floor, Sec-18, Noida-201301



Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: _____

Application Type*: New KYC Modification KYC

1. Identity Details of Related Person (please refer guidelines overleaf)

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

Name* (same as ID proof) _____

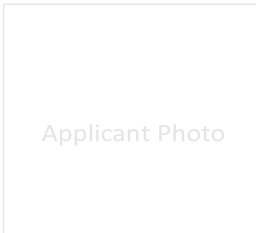
Maiden Name+ (if any) _____

Fathers/Spouse's Name* _____

Date of Birth* ____-____-____

Gender* Male Female Transgender

Nationality* Indian Other _____



Related Person Type*

Director Promoter Karta Trustee Partner Court Appointed Official Proprietor

Beneficiary Authorized Signatory Beneficial Owner Power of Attorney Holder

Others _____ (please specify) DIN: _____ (mandatory if the related person is Director)

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

A — Aadhaar Card XXXX XXXX _____

B — Passport Number _____ (Expiry Date) ____-____-____

C — Voter ID Card _____

D — Driving License _____ (Expiry Date) ____-____-____

E — NREGA Job Card _____

F — NPR _____

Z — Others _____ (any document notified by Central Government)

Identification Number _____

2. Address Details* (please refer guidelines overleaf)

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line 3 _____

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

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Applicant e-SIGN

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

Line 1* _____
 Line 2 _____
 Line3 _____
 City/Town/Village* _____ District* _____ Pin Code* _____
 State* _____ Country* _____
 Address Type* Residential/Business Residential Business Registered Office Unspecified

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

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

3. Contact Details

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

4. Applicant Declaration

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake 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. DATE: ____ _ (DD-MM-YYYY) PLACE: _____	Applicant e-SIGN	Applicant Wet Signature

5. For Office Use Only

KYC carried out by*	Intermediary Details*
KYC Date ____ _ Emp. Name _____ Emp. Code _____ Emp. Designation _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) <div style="border: 1px solid black; padding: 5px; text-align: center;">ACME CAPITAL MARKET LTD.</div>
Employee Signature and Stamp	Institution Name and Stamp

Know Your Client (KYC)
Annexure (For Non- Individuals Only)



ACME CAPITAL MARKET LIMITED

Corp Office: 208-209, 215, Ocean Complex
 Second floor, Sec-18, Noida-201301



Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number:

Application Type*: New KYC Modification KYC

1. Identity Details of Related Person (please refer guidelines overleaf)

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

Name* (same as ID proof) _____

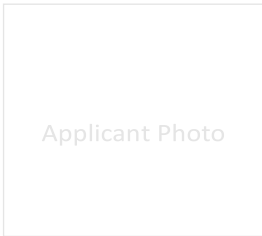
Maiden Name+ (if any) _____

Fathers/Spouse's Name* _____

Date of Birth* ____-____-____

Gender* Male Female Transgender

Nationality* Indian Other _____



Related Person Type*

Director Promoter Karta Trustee Partner Court Appointed Official Proprietor

Beneficiary Authorized Signatory Beneficial Owner Power of Attorney Holder

Others _____ (please specify) DIN: _____ (mandatory if the related person is Director)

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

A — Aadhaar Card XXXX XXXX _____

B — Passport Number _____ (Expiry Date) ____-____-____

C — Voter ID Card _____

D — Driving License _____ (Expiry Date) ____-____-____

E — NREGA Job Card _____

F — NPR _____

Z — Others _____ (any document notified by Central Government)

Identification Number _____

2. Address Details* (please refer guidelines overleaf)

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line 3 _____

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

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Applicant e-SIGN

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

Line 1* _____
 Line 2 _____
 Line3 _____
 City/Town/Village* _____ District* _____ Pin Code* _____
 State* _____ Country* _____
 Address Type* Residential/Business Residential Business Registered Office Unspecified

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

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

3. Contact Details

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

4. Applicant Declaration

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake 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. DATE: ____ _ (DD-MM-YYYY) PLACE: _____	Applicant e-SIGN	Applicant Wet Signature

5. For Office Use Only

KYC carried out by*	Intermediary Details*
KYC Date ____ _ Emp. Name _____ Emp. Code _____ Emp. Designation _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) <div style="border: 1px solid black; padding: 5px; text-align: center;">ACME CAPITAL MARKET LTD.</div>
Employee Signature and Stamp	Institution Name and Stamp

Type of Entity	Additional Documents Required over and above PAN, POI and POA
Corporate	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last to financial years (to be submitted every year). • Copy of latest share-holding pattern including the list of all those holding control, either directly or indirectly , in the company in terms of SEBI takeover regulations, duly certified by the company secretary/ whole time director/ MD (to be submitter every year). • Photograph, POI, POA, PAN and DIN number of the whole time Director/ 2 directors in charge of day to day operations. • Photograph, POI, POA, PAN of individual promoters holding control —either directly or indirectly. • Copy of Memorandum and Articles of Association and Certificate of Incorporation. • Copy of Board Resolution for Investment in security markets. • Authorized signatories list with specimen signatures. • Shareholding pattern.
Partnership Firm	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last to financial years (to be submitted every year). • Certificate of Registration (for registered partnership firms only). • Copy of Partnership Deed. • Authorized signatories list with specimen signatures. • Photograph, POI, POA, PAN of Partners. • Shareholding pattern.
Trust	<ul style="list-style-type: none"> • Copy of Balance Sheet for the last to financial years (to be submitted every year). • Certificate of Registration (for registered Trusts only). • Copy of Trust Deed. • List of Trustees certified by Managing Trustees/ CA • Photograph, POI, POA, PAN of Trutees.
HUF	<ul style="list-style-type: none"> • PAN of HUF. • Deed of Declaration of HUF or List of Co-Parceners. • Bank Passbook / Bank statement in the name of HUF. • Photograph, POI, POA, PAN of KARTA.
Banks/Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years • Authorized signatories list with specimen signatures.
Unincorporated Association or a Body of Individuals	<ul style="list-style-type: none"> • Proof of existence or Constitution document. • Resolution of Managing Body and power od Attorney granted to transact business on its behalf.
Army/Government Bodies	<ul style="list-style-type: none"> • Copy of Constitution/Registration or Annual report/Balance Sheet for the last 2 financial years. • Authorized signatories list with specimen signatures.
Army/Government Bodies	<ul style="list-style-type: none"> • Self certification on letterhead. • Authorized signatories list with specimen signatures.
Registered Society	<ul style="list-style-type: none"> • Copy of Registration Certificate under Society Registration Act. • List of managing committee members. • Committee Resolution for persons authorized to act as authorised signatories with specimen signatures. • True copy of society rules and by-laws certified by Chairman/Secretary.
FPI Category I	<ul style="list-style-type: none"> • FPI Certificate • Constitution Documents • Copy of Board Resolution (optional) • Shareholding pattern and Ultimate Beneficiary Owners List (UBO) • Authorized signatories list with specimen signatures.
FPI Category II	<ul style="list-style-type: none"> • FPI Certificate • Constitution Documents • Copy of Board Resolution • Shareholding pattern and Ultimate Beneficiary Owners List (UBO) with UBO proof of identity • Authorized signatories list with specimen signatures.

ADDITIONAL INFORMATION RELATED TO DEMAT ACCOUNT (FOR INDIVIDUAL/HUF/NON-INDIVIDUAL ONLY) - NSDL



DP : NSDL • DP ID : IN304721
SEBI Regn. No. : IN-DP-777-2024

ACME CAPITAL MARKET LTD.

Corp-208-209, 215 Ocean Complex, Sec-18, Noida-201301

Ph.: 9311759200 |

E-mail : dp@acmegroup.global | Website : www.acmecapitalmarket.com

(To be filled by the Depository Participant)

Application No.								Date	D	D	M	M	Y	Y	Y	Y
DP Internal Reference No.																
DP ID	I	N	3	0	4	7	2	1	Client ID							

(To be filled by the applicant in **BLOCK LETTERS** in English)

I/We request you to open a demat account in my/our name as per following details :

HOLDERS DETAILS

Sole/First Holder's Name	PAN															
	UID															
Second Holder's Name	PAN															
	UID															
Third Holder's Name	PAN															
	UID															

Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Agriculturist
	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Retired
	<input type="checkbox"/> Government Service	<input type="checkbox"/> Housewife	<input type="checkbox"/> Government Service	<input type="checkbox"/> Housewife	<input type="checkbox"/> Government Service	<input type="checkbox"/> Housewife
	<input type="checkbox"/> Business	<input type="checkbox"/> Student	<input type="checkbox"/> Business	<input type="checkbox"/> Student	<input type="checkbox"/> Business	<input type="checkbox"/> Student
	<input type="checkbox"/> Professional	<input type="checkbox"/> Others (Please specify; _____)	<input type="checkbox"/> Professional	<input type="checkbox"/> Others (Please specify; _____)	<input type="checkbox"/> Professional	<input type="checkbox"/> Others (Please specify; _____)
Brief details:						

Name* _____

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

TYPE OF ACCOUNT (Please tick whichever is applicable)

<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual Director	<input type="checkbox"/> Individual Director's Relative
	<input type="checkbox"/> Individual HUF/AOP	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Minor
	<input type="checkbox"/> Individual Margin Trading A/c (Mantra)		<input type="checkbox"/> Others (Specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable	<input type="checkbox"/> NRI Repatriable Promoter
	<input type="checkbox"/> NRI Non-Repatriable Promoter	<input type="checkbox"/> NRI - Depository Receipts	<input type="checkbox"/> Others (Specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National-Depository Receipts	<input type="checkbox"/> Others (Specify) _____

Status						Sub-Status (To be filled by the DP)						
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify) _____												
SEBI Registration No. (if applicable)		SEBI Registration Date	D	D	M	M	Y	Y	Y	Y		
RBI Registration No. (if applicable)		RBI Approval Date	D	D	M	M	Y	Y	Y	Y		
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify) _____											

FINANCIAL DETAILS

Gross Annual Income Details : Income Range per annum : Below Rs. 1 Lac Rs. 1 Lac to 5 Lac
 (please specify) Rs. 5 Lac to 10 Lac Rs. 10 Lac to 25 Lac Rs. 25 Lac to 1 Crore >1 Crore

Net Worth (Net worth should not be older than 1 year) Amount Rs.....
 as on (date) (Compulsory for Non-Individuals)

Please tick, if any of the authorized signatories/Promoters/Partners/Karta/Trustees/Whole time directors is either
 Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP) (Please provide details as per annexure 2.2A)

Any other information :

DETAILS OF GUARDIAN (in case the account holder is minor)

Guardian Details (where sole holder is manor) [For account of a minor, two KYC & C-KYC application Form must be filled i.e. one for the guardian and another for the minor(to be signed by guardian0]

Guardian's Name		PAN									
Relationship with the applicant											
I/We instruct the DP to receive each and every credit in my/our account (if not marked, the default option would be 'Yes')	[Automatic Credit] Yes <input type="checkbox"/> No <input type="checkbox"/>										
I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end. (If not marked, the default option would be 'No')	Yes <input type="checkbox"/> No <input type="checkbox"/>										
Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly										
I/We request you to send Electronic Transaction-cum-Holding Statement at the email Id _____	Yes <input type="checkbox"/> No <input type="checkbox"/>										
I/We would like to share the email ID with the RTA	Yes <input type="checkbox"/> No <input type="checkbox"/>										
I/We would like to receive the Annual Report (Tick the applicable box. If not market the default option would be in Physical)	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical & Electronic										
<input type="checkbox"/> I/We wish to Open / Convert this Demat Account under BSDA Category. (Subject to Terms and Conditions related to BSDA) <input type="checkbox"/> I/We do not wish to Open / Convert this Demat Account under BSDA Category. Open / Convert this account as under : <input type="checkbox"/> Normal AMC <input type="checkbox"/> Lifetime AMC											
CAS Mode :	<input type="checkbox"/> Physical CAS Required <input type="checkbox"/> CAS not Required <input type="checkbox"/> CAS Electronic										
I/We wish to receive dividend/interest directly in to my bank account as given below through ECS. (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]	Yes <input type="checkbox"/> No <input type="checkbox"/>										

BANK DETAILS (Dividend Bank Details)

Bank Code (9 digit MICR Code)										
IFS Code (11 Character)										
Account Number										
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify)_____									
Bank Name										
Branch Name										
Bank Branch Address										
City										
State										
Country										
PIN										

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque books is issued, (or)
- (ii) Photocopy of the Bank Statement having name and address of the BO.
- (iii) Photocopy of the Passbook having name and address of the BO, (or)
- (iv) Letter from the Bank.

➤ In case of option (ii), (iii) and (iv) above, MICR Code of the branch should be present/mentioned on the document.

SMS Alert facility: [Mandatory if you are giving Power of Attorney (PoA). Ensure that the mobile number is provided in the KYC Application Form]

Sole / First Holder Yes No **Second Holder** Yes No **Third Holder** Yes No

Mode of Receiving Statement of Account [Tick any One]

Physical Form Electronic Form [Read Note 4 and ensure that email ID is provided in KYC Application Form]

Signatures
of Holder(s)



Signature of 1st Holder



Signature of 2nd Holder



Signature of 3rd Holder

OPTION FORM FOR ISSUE OF DIS BOOKLET

To,
ACME Capital Market Limited

I/We hereby state that: (select one of the Options given below)

- I/We required you to DIS booklet to me/us immediately on opening of my/our NSDL account through I/we have issued a Power of Attorney(POA)/registered for eDIS/Executed PMS agreement in favour of/with ACML (name of CM) for executing DIS for settling stock exchange trades (settlement related transaction) effected through such POA holder/ CM/ for executing DIS through eDIS
- I/We do not require the DIS booklet for the time being. Since I/We have issued a POA/registered for e-DIS/ with ACML (name of attorney/CM) for executing DIS for settling stock exchange trades (settlement related transactions) effected through such POA Holder/CM or for executing delivery instructions through eDIS. How ever DIS booklet should be issued to me/us immediately on my/our request at any latter date.

Signatures
of Holder(s)



Signature of 1st Holder



Signature of 2nd Holder



Signature of 3rd Holder

NOMINATION FORM - TRADING AND DEMAT ACCOUNTS

(Annexure-A)



ACME CAPITAL MARKET LTD.

Corp Add : 208-209, 215, Ocean Complex, Sec-18, Noida-201301 | Ph.: 9311759200 |

E-mail : backoffice@acmegroup.global | **Website :** www.acmecapitalmarket.com

(To be filled in by individual applying singly or jointly)

DATE	D	D	M	M	Y	Y	Y	Y	UCC						
------	---	---	---	---	---	---	---	---	-----	--	--	--	--	--	--

DP ID								Client ID							
-------	--	--	--	--	--	--	--	-----------	--	--	--	--	--	--	--

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

NOMINATION DETAILS




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

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

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

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

13.	Relationship of Guardian with nominee			
14.	Guardian Identification details - [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> AADHAAR <input type="checkbox"/> Saving Bank A/c No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			

	Name(s) of Holder(s)	Signature(s) of Holder
Sole/First Holder (Mr./Ms.)		 (6)
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

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

INSTRUCTIONS :

1. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non-individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
2. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
3. The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
4. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
5. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
6. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
7. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
8. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
9. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
10. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure D.
11. Savings bank account details shall only be considered if the account is maintained with the same participant.
12. DP ID and client ID shall be provided where demat details is required to be provided.

DECLARATION FORM FOR OPTING OUT OF NOMINATION**(Annexure-B)**

To,

ACME CAPITAL MARKET LTD.

Registered Office : F-23/1, LANE F-23, KRISHNA NAGAR, DELHI-110051 | Ph.: 9311759200

E-mail : care@acmegroup.global | Website : www.acmecapitalmarket.com

DATE	D	D	M	M	Y	Y	Y	Y	UCC								
------	---	---	---	---	---	---	---	---	-----	--	--	--	--	--	--	--	--

DP ID								Client ID									
-------	--	--	--	--	--	--	--	-----------	--	--	--	--	--	--	--	--	--

Sole/First Holder Name	
Second Holder Name	
Third Holder Name	

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

Signatures of Holder(s)



Signature of 1st Holder



Signature of 2nd Holder




Signature of 3rd Holder

DECLARATION

1. 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 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.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker, tariff sheet and all voluntary/non-mandatory documents.
3. I/We further confirm having read and understood the contents of the Rights and Obligations', Policies & Procedures document(s) and 'Risk Disclosure Document', 'Do's and Dont's'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/we have read, understood, agreed and received a duly executed copy of the:-
 - Account Opening Form, Trading Account Related Details and Tariff Sheet
 - Other disclosure/documents as agreed by me/us specifically in voluntary segment.
 - Terms & Conditions as mutually agreed by me/us
 - FATCA & CRS Terms & Conditions
 - Option Consent Letter
 - Other disclosure/documents as agreed by me/us specifically in voluntary segment.
 I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website.
4. I also give my consent to download my KYC Records from the Central KYC Registry (CKYCR) /KYC Registration Agency (KRA), only for the purpose of verification of my Identity and address from the data base of CKYCR Registry/ KRA. I understand that my KYC Record includes my KYC Records/Personal information such as my name, address, date of birth, PAN number etc.

Signatures of Holder(s)



Signature of 1st Holder



Signature of 2nd Holder



Signature of 3rd Holder

DECLARATION BY HUF

To, Date: _____
ACME CAPITAL MARKET LTD.

Regd. F-23/1, LANE F-23, KRISHNA NAGAR, DELHI-110051 | Ph.: 9311759200 |
 E-mail : care@acmegroup.global | Website : www.acmecapitalmarket.com

As our HUF firm wishes to open an account with you in the said name.....
 we beg to say that the first signatory to this letter, i.e.,is the Karta of
 the Joint Family and other signatories are the adult co-parceners of the said family.

We further confirm that the business of the said joint family is carried on mainly by the said Karta as also by the other signatories
 hereto in the interest and for the benefit of the entire body of co-parceners of the joint family. We all undertake that claims due to
 you from the said family shall be recoverable personally from all or any of us and also for the entire family properties of which the
 first signatory is the Karta, including the share of minor co-parceners. In view of the fact that ours is not a firm governed by the
 Indian Partnership Act of 1952, we have not got our said firm registered under the said Act.

We hereby undertake to inform you of the death or birth of a co-parcener of any change occurring at any time in the membership of
 our joint family during the currency of the account.

This is to certify that following are the family members under _____ (HUF)											
S. No.	Name	Gender (Male/Female)	Relationship with Karta	Signature	Date of Birth						
1.					D	D	M	M	Y	Y	Y
2.					D	D	M	M	Y	Y	Y
3.					D	D	M	M	Y	Y	Y
4.					D	D	M	M	Y	Y	Y
5.					D	D	M	M	Y	Y	Y
6.					D	D	M	M	Y	Y	Y
7.					D	D	M	M	Y	Y	Y

For _____ (HUF)

* Please stamp and sign.

 (8)

 Client Signature (Karta)

SCHEDULE OF DEMAT CHARGES



ACME CAPITAL MARKET LTD.

Member : NSE, BSE • DP (NSDL) DP ID : IN304721 • SEBI REGN. NO.: IN-DP- 777-2024
 Corp Office : 208-209, 215, Ocean Complex, Sec-18, Noida-201301 | Ph.: 9311759200 | Fax: 0120-4456411
 E-mail : dp@acmegroup.global | Website : www.acmecapitalmarket.com

ACTIVITY	<input type="checkbox"/> NORMAL DEMAT CHARGES	<input type="checkbox"/> BSDA DEMAT CHARGES
Statutory Charges at the time of Account opening	NIL	NIL
(i) Annual Maintenance Charges (Normal Scheme)	AMC Rs. 300/- + GST (Annually) (For individual a/c)	AMC free if shares valuation upto 50000 Rs. 100/- (share valuation is 50,001 to 2,00,000/-) When share valuation across 50000 AMC will be charge 100/- and valuation across 2,00,000 account operate as normal A/c.
(ii) Loyalty Plan (For Individuals only)	AMC life time free Rs. 1000 + GST AMC Rs. 1000/- + GST (For Corporate a/c)	
Dematerialisation	Rs. 20/- per DRF + Rs. 3/- per Cer. * (if quantity is more than 1000 on certificate then Rs. 3/- will be charged per 1000 quantity of shares)	Rs. 75/- per DRF + Rs. 10/- per Cer. * (if quantity is more than 1000 on certificate then Rs. 10/- will be charged per 1000 quantity of shares)
Rematerialisation	Rs. 20/- per certificate* or Rs. 20/- per 100 securities or part quantity whichever is higher	Rs. 75/- per certificate* or Rs. 75/- per 100 securities or part quantity whichever is higher
Transaction Charges		
A. Transaction Charges (Market)	0.02% subject to minimum Rs. 16.95/-	0.05% subject to minimum Rs. 35/-
B. Transaction Charges (Off-Market)	0.02% of value of transactions or minimum Rs. 50/- whichever is higher	0.05% of value of transactions or minimum Rs. 50/- whichever is higher
Custody Charges	Nil	
Creation of Pledge	Rs. 50/- per request of 0.02% of transaction value of securities whichever is higher	Rs. 100/- per request of 0.05% of transaction value of securities whichever is higher
Creation of Margin Pledge/Closure	Rs. 20/- per request	Rs. 25/- per request
Close of Pledge	Rs. 50/- per request of 0.02% of transaction value of securities whichever is higher	Rs. 100/- per request of 0.05% of transaction value of securities whichever is higher
Invocation of Pledge	Rs. 50/- per request of 0.02% of transaction value of securities whichever is higher	Rs. 100/- per request of 0.05% of transaction value of securities whichever is higher

Instructions for NORMAL DEMAT CHARGES

1. Out of Pocket Expenses
 - Dematerialisation of shares mailing charges Rs. 20/- per mail (local)
 - Dematerialisation of shares mailing charges Rs. 40/- per mail (out station)
 - In case of demat rejection postage shall be charged @ Rs. 30/- for dispatch of the client for removal of objection.
2. Instruction Booklet : Rs. 10/- & 20/- (Containing 10 & 20 leaves)
3. Non periodic statement & other communications shall be charged @ Rs. 20/- per mail.
4. Rs. 25/- for additional Client Master.
5. For weekly and fortnightly statement charges extra Rs. 10/- per page, Postage / Courier Charges will be extra.
6. Taxes and other govt. levies will be charged extra as applicable for time to time.
7. AMC will be charged in advance and charged yearly basis.
8. In case Bank mandate for debit through ECS is not given, Minimum credit balance of Rs. 200/- shall be maintained as interest free security.
9. In case of any upward revision is schedule of charges, 30 days notice would be given by publishing in newspaper/post shall treated as sufficient Notice.
10. In case of nonpayment of bill/dues within 15 days of due date, the depository services are liable to be discontinued within a period of 30 days from the date of demand. The renewal charges for resuming the services will be Rs. 100/-.
11. If client give POA to ACME Capital Market Ltd. then POA charge Rs. 110/- will be applicable (one time charged).
12. Any services not mentioned above will charged extra.
- 13 Rs. 100/- will be charged to client in case of New Delivery Instruction Booklet is requested without requisition slip.

Instructions for BSDA DEMAT CHARGES

1. Out of Pocket Expenses
 - Dematerialisation of shares mailing charges Rs. 20/- per mail (local)
 - Dematerialisation of shares mailing charges Rs. 40/- per mail (out station)
 - In case of demat rejection postage shall be charged @ Rs. 60/- for dispatch of the client for removal of objection.
2. Instruction Booklet : Rs. 50/- (Containing 20 leaves)
3. Non periodic statement & other communications shall be charged @ Rs. 20/- per mail.
4. Rs. 25/- for additional Client Master.
5. For weekly and fortnightly statement charges extra Rs. 10/- per page, Postage / Courier Charges will be extra.
6. Taxes and other govt. levies will be charged extra as applicable for time to time.
7. AMC will be charged in advance and charged quarterly basis.
8. In case of any upward revision is schedule of charges, 30 days notice would be given by publishing in newspaper/post shall treated as sufficient Notice.
9. In case of nonpayment of bill/dues within 15 days of due date, the depository services are liable to be discontinued within a period of 30 days from the date of demand. The renewal charges for resuming the services will be Rs. 100/-.
10. If client give POA to ACME Capital Market Ltd. then POA charge Rs. 110/- will be applicable (one time charged).
11. Any services not mentioned above will charged extra.

(9)

Sole/First Holder Signature

Second Holder Signature

Third Holder Signature

ADDITIONAL INFORMATION RELATED TO TRADING ACCOUNT

FOR INDIVIDUAL & NON-INDIVIDUAL

A. BANK ACCOUNT(S) DETAILS

Bank Name	Branch Address	Bank Account No.	Account Type	MICR Number	IFSC Code
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others..... In case of NRI: <input type="checkbox"/> NRE <input type="checkbox"/> NRO		
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others..... In case of NRI: <input type="checkbox"/> NRE <input type="checkbox"/> NRO		

B. DEPOSITORY ACCOUNT(S) DETAILS

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

C. OTHER DETAILS

Gross Annual Income Details (please specify)	Income Range per annum <input type="checkbox"/> Below `1 Lac <input type="checkbox"/> `1-5 Lac <input type="checkbox"/> `5-10 Lac <input type="checkbox"/> `10-25 Lac <input type="checkbox"/> `25 Lac -1 Crore <input type="checkbox"/> More than `1Crore Net- worth* Amount (`)..... As on (date) (___/___/20___) (Net worth should not be older than 1 year)
Occupation (please tick any one and give brief details):	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others.....
Please tick, if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)
Any other information	

* For Individual Client 'Net-worth' is Optional, In case of Non-Individual client 'Net-worth' will be mandatory.

D. TRADING PREFERENCES

* Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you..

EXCHANGE	NSE AND BSE				
All Segments	Cash & Mutual Fund	F & O	Currency	Debt	Commodity Derivatives
(10a)					

Sign if applicable

IF YOU DO NOT WISH TO TRADE IN ANY OF SEGMENT / MUTUAL FUND , PLEASE MENTION HERE

Note: If, in future, the client wants to trade on any new segment/new exchange, separate authorization/letter should be taken from the client by the stock broker. **Currency derivative segment include interest rate future.

E. PAST ACTIONS

Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock Exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years, give details (attach annexure if required)

.....

.....

F. DEALINGS THROUGH AUTHORISED PERSON AND OTHER STOCK BROKERS

If client is dealing through the authorised person, provide the following details:

Auth. Person's Name															
SEBI Registration Number															
Registered office address										PIN Code					
Website					Phone				Fax						
Whether dealing with any other stock broker/authorised person (if case dealing with multiple stock brokers/authorised persons, provide details of all)															
Name of stock broker															
Name of Auth. Person (if any)															
Client Code					Exchange										
Details of disputes/dues pending from/to such stock broker/authorised person															

G. ADDITIONAL DETAILS

Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify)	<input type="checkbox"/> Physical Contract Note
	<input type="checkbox"/> Electronic Contract Note (ECN)
I/We wish to avail facility provided by the exchange	<input type="checkbox"/> SMS Alert <input type="checkbox"/> E-mail Alert <input type="checkbox"/> Both
In case of ECN / E-mail Alert Pls. Specify your Email id	
In case of SMS Alert Pls. Specify your Mobile No	
Whether you wish to avail of the facility of internet trading/ wireless technology (please specify)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of years of Investment/Trading Experience	
Any other information	

In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorized to deal in securities on behalf of company/firm/others (attach annexure if require)

Name (1)											Please affix the recent passport size photograph of Authorised Signatory and sign across it	
Designation												
PAN					DIN (For Directors) / UID (for Others)							
Residential Address												
	City/Town/Village					Pin Code						
	State				Country							
Relationship with Applicant (i.e. promoters, whole time directors etc.)												
Whether Politically Exposed	<input type="checkbox"/> PEP (Politically Exposed Person) <input type="checkbox"/> RPEP (Related to Politically Exposed Person) <input type="checkbox"/> NO											




Name (2)											Please affix the recent passport size photograph of Authorised Signatory and sign across it				
Designation															
PAN						DIN (For Directors) / UID (for Others)									
Residential Address															
	City/Town/Village					Pin Code									
	State				Country										
Relationship with Applicant (i.e. promoters, whole time directors etc.)															
Whether Politically Exposed <input type="checkbox"/> PEP (Politically Exposed Person) <input type="checkbox"/> RPEP (Related to Politically Exposed Person) <input type="checkbox"/> NO															

H. INTRODUCER DETAILS

Name of the Introducer										
PAN of Introducer										
Status of the Introducer	<input type="checkbox"/> Sub-broker <input type="checkbox"/> Remisier <input type="checkbox"/> Authorized Person <input type="checkbox"/> Existing Client <input type="checkbox"/> Others (please specify):									
Address of the Introducer										
Phone No. of Introducer						Signature of the Introducer				

DECLARATION

1. I/We understand that the Stock Broker is relying on this information for the purpose of determining the status of the applicants named above in compliance with FATCA/CRS. The Stock Broker is not able to offer any tax advice on FATCA or CRS or its impact on the applicants and I/We shall seek advice from professional tax advisor for any tax questions. Further, I/We agree to submit a new form within 30 days if any information or certification on this form gets changed. I /We agree, as may be required by Regulatory authorities, Stock Broker shall be required to comply to report, reportable details to regulators / tax authorities / or close or suspend my/our account(s).
2. 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 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.
3. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
4. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website, if any.
5. I/We declare that **ACME Capital Market Ltd.**, the brokers, has put me/us on notice that it is engaged in not only client based trading but also in pro-account trading.
6. 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 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. In case nonresident 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 Depository Participant".

Name(s) of the Authorised Signatory	Signature of the Authorised Signatory
1.	 (11)
2.	
3.	

Date: DD / MM / YYYY

FOR OFFICE USE ONLY

UCC Code allotted to the Client: BO ID:

I / We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients

Date:

Signature of the Authorised Signatory

TARIFF SHEET**PRODUCT PLAN* / BROKERAGE (SUBJECT TO CHANGE)**

Name of the Plan _____ *Details as per executed addendum.

CASH SEGMENT

Brokerage	in %	Minimum Paise
Delivery Based		
Daily Square up		

DERIVATIVES SEGMENT

Brokerage	in %	Minimum Paise	* Brokerage per lot (in `)
Future			
Option			

*In case of option index only.

CURRENCY DERIVATIVES SEGMENT

Brokerage	in %	Minimum Paise	Brokerage per lot (in `)
Future			
Option			

In addition to brokerage, all statutory / exchange charges as applicable would also be levied.

In case of physical contract note are being dispatched to client, ` 25/- per contract note would be charged towards stationery & postage charges.

It is declared that I/we/the firm / the company:

1. Have not defaulted to any other broker/exchange and/or am/are not suspended/expelled/default member of any exchange.
2. Have not been declared bankrupt/insolvent.
3. Have not been prohibited for dealing in securities/commodities market by any authority.
4. Are not employee of any other broker/exchange.
5. An employee of ACME Group and the name of my employer is

I/we agree to pay processing charges (as applicable) / authorise you to debit for this application which will be payable even if my application is rejected due to any reason such as lack of proper supporting documents (Identify/Address/Bank proof etc.)

 (12)_____
Client Signature

FATCA & CRS Declaration - Non Individual

PAN Trading DP Code
 Name

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India Yes No

(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below)

Sr. No.	Country	Tax Identification Number	Identification Type (TIN or Other, please specify)
1.			
2.			
3.			

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

In case TIN or its functional equivalent is not available, please provide Company Identification number of Global Entity Identification Number or GIIN, etc.

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a specified U.S. Person, mention Entity's exemption code here

PART A (to be filled by Financail Institutions or Direct reporting NFEs)

1. We are a, Financial institution (Refer 1 of Part C) or Direct reporting NFE (refer 3(vii) of Part C) (please tick appropriate)

GIIN

Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below
 Name of sponsoring entity _____

GIIN not available (please tick as applicable) **Applied for** **Not obtained - Non-participating F1**
 Not required to apply for - please specify 2 digits sub-category (Refer 1 A of Part C)

PART B (please fill any one as appropriate "to be filled by NFEs other than Direct reporting NFEs")

1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C) Yes (If yes, please specify only one stock exchange on which the stock is regularly traded)
 Name of stock exchange _____

2. Is the Entity a related entity of a publicly traded company whose shares are regularly traded on an established securities market) (Refer 2b of Part C) Yes (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)
 Name of listed company _____
 Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company
 Name of stock exchange _____

3. Is the Entity an active NFE (Refer 2c of Part C) Yes Nature of Business _____
 Please specify the sub-category of Active NFE (Mention code - refer 2c of Part C)

4. Is the Entity a passive NFE (Refer 3(ii) of Part C) Yes Nature of Business _____

UBO Declaration (Mandatory for all entities except, a Publicity Traded Company or a related entity of Publicly Traded Company)

Category (Please tick applicable category) Unlisted Company Partnership Firm Limited Liability Partnership Company
 Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust
 Other (please specify _____)

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification number of EACH controlling person(s). (Please attach additional sheets if necessary)

Owner-documented FF's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)

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

* To include US, where controlling person is a US citizen or green card holder

If UBO is KYC compliant, KYC proof to be enclosed, Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.

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

§ Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary


DECLARATION

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform ACML. any modification to this information promptly.

I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI)

Name

Designation

 (14)

Signature of the Client :

Date:

Place:

For Investor convenience, ACME Capital Market Ltd. (ACML) collecting this mandatory information for updating across all Group Companies of ACML whether you are already an investor or would become an investor in future.

Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest ACML branch or you can dispatch the hard copy to-

ACME CAPITAL MARKET LTD.

Corp Office : 208-209, 215, Ocean Complex, 2nd Floor, sec-18, Noida-20301 Ph.: 9311759200 | Fax: 120-4456411

• For Detail Terms & Conditions please visit: www.acmecapitalmarket.com

INTERNET & WIRELESS TECHNOLOGY BASED TRADING LETTER

To,
ACME CAPITAL MARKET LTD.
Corp Office : 208-209, 215, Ocean Complex, Sec-18, Noida-201301 Ph.: 9311759200 | Fax: 120-4456411
E-mail : care@acmegroup.global| Website : www.acmecapitalmarket.com

Sub : Internet & Wireless Technology Based Trading

Sir,
I/We wish to trade through Internet & Wireless Technology Based Trading (IWTBT) facility provided by you as per the options mentioned below.

I/We want to opt for Web Base Trading CTCL/IBT Application Base Trading Exchange based Software

I/We hereby confirm you to send my/our username and password and other related information on the e-mail address mentioned by me/us in KYC.

Further, I/We confirm that I/We have fully read and understood the provisions laid down in the attached annexure pertaining to Internet & Wireless Technology based trading facility provided by stock brokers to clients and do hereby acknowledge the same and agree not to call into question the validity, enforceability and applicability of any provision/clauses in this document under any circumstance what so ever.

Thanks and Best Regards

for

 (15) _____

Client Signature

Client Name: _____

Client Code: _____

BANK MANDATE AUTHORIZATION

To
ACME CAPITAL MARKET LTD.
Corp Office- 208-209, 215, Ocean Complex
Second Floor, Sec-18, Noida-201301

Sub: Mutual Fund Service System (MFSS) facility/ BSE StAR MF and other MF approved platform


Dear Sir/Madam,

This is with reference to my/our request for availing Mutual Fund Services (MFSS) facility/BSE StAR MF and other MF approved platform as a client offered by NSE and BSE, I /we hereby undertake to provide funds to ACME Capital Market Ltd. (herein referred to as "ACML") equivalent to the subscription amount and applicable brokerage/fees /charges before applying for mutual fund units through the "ACML".

For this purpose, I/We hereby authorize "ACML" to utilize the surplus funds in my /our trading account held with "ACML" in its capacity as a Stock Broker and transfer funds to the extent of any shortfall towards subscription amount and / or applicable brokerage, fees, charges and other statutory levies (in case of both subscription and redemption) and/or any other obligation to meet the debit in my/our Mutual fund transaction account.

I further authorize "ACML" to process One Time Mandate Form duly executed by me in favour "ACML"/BSE and to honour the obligations that arises as a result of transactions undertaken by me/us and also debit my account for any other incidental charges including Account Maintenance Charges (AMC), applicable brokerages, fees, other statutory charges etc.

I / We hereby authorize "ACML", to execute an order in my/our account held with "ACML" for any transaction in Mutual Fund Unit which may include purchase/redemption/switch/SIP etc. on my/our instructions provided by me/us either electronically or in writing, verbally/telephonically. I hereby agree and understand that the said instructions shall be valid and binding upon me/us.

Sign here : (20) 

MUTUAL FUND FACILITY

To, **ACME CAPITAL MARKET LTD.**
Corp Office- 208-209, 215, Ocean Complex
Second Floor, Sec-18, Noida-201301

Sub: Mutual Fund Service System (MFSS)Facility/ BSE StAR Mutual Fund Facility & other MF approved platform.

Sir, I/We am/are registered as your client for the purpose of trading in the Capital Market segment and/or Derivatives segment. I/We am/are interested in availing the trading facility of the Exchanges for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the MFSS and/or BSE StAR MF and/or other MF. For the purpose of availing these facilities, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of this facility and I/we further confirm that the details contained in same remain unchanged as on date.

I/We are willing to abide by the terms and conditions as mentioned in the NSE Circular dated November 24, 2009, BSE circular dated December 2, 2009 and as may be specified by the Exchanges from time to time in this regard. I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India and Association of Mutual Funds of India (AMFI). I/We shall read and understand the contents of the of the Scheme Information Document and Key Information Memorandum, addenda issued regarding each Mutual Fund Schemes with respect to which I/we choose to subscribe/redeem. I/We further agree to abide by the terms and conditions, rules and regulations of the Mutual Fund Schemes. I/we agree and authorize you to issue payment on my behalf by debiting my account with the value of my/our transactions along with charges.

I/we therefore request you to register me/us as your client for participating in mutual fund trading facility of exchanges.

Details of terms & conditions for the Investor / Client for using MFSS facility BSE StAR MF & other MF Platform

- I. Pre-requisites for becoming Investor / Client for the MFSS facility/ BSE StAR MF /other MF platform.
 - I.1. The client who is desirous of investing in units of mutual fund schemes through the MFSS / BSE StAR /other MF platform.
 - I.2. The Client intends to execute his instruction for the subscription/ redemption of units of Mutual Fund Schemes through the broker who is a Mutual fund Intermediary (MFI) of the MFSS / BSE StAR /other MF platform
 - I.3. The client has satisfied itself of the capacity of the MFI to deal in Mutual Fund units and wishes to execute its instruction through the MFI and the client shall from time to time continue to satisfy itself of such capability of the MFI before executing transacting through the MFI.
 - I.4. The Client has approached to the MFI with the application for availing the MFSS facility/BSE StAR/other MF platform
 - I.5. The client has submitted relevant KYC (Know Your Client) details to the MFIs
- 2. Terms and Conditions**
 - 2.1. The client shall be bound by circulars/ notices issued by NSEIL/BSE from time to time including the Circulars issued by NSEIL/BSE and rules, regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
 - 2.2. The client shall notify the MFI in writing if there is any change in the information in the 'client registration form' provided by the client to the MFI at the time of registering as a client for participating in the MFSS / BSE STAR/other MF platform or at any time thereafter.
 - 2.3. The client shall submit to the MFI a completed application form in the manner prescribed format for the purpose of placing a subscription order with the MFI
 - 2.4. The client has read and understood the risks involved in investing in Mutual Fund Schemes.
 - 2.5. The client shall be wholly responsible for all his investment decisions and instruction.
 - 2.6. The client shall ensure continuous compliance with the requirements of the Exchanges, SEBI and AMFI.
 - 2.7. The Client shall pay to the MFI fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that MFI renders to the Client.
 - 2.8. The client will furnish information to the MFI in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
 - 2.9. In the event of non-performance of the obligation by the MFI, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL/BSE or NSCCL/ Indian Clearing Corporation Ltd. (ICCL), other exchanges/Clearing Corporation.
 - 2.10. In case of any dispute between the MFIs and the investors arising out of the MFSS facility/ BSE StAR/other MF platform, exchanges and / or NSCCL/ICCL agrees to extend the necessary support for the speedy redressal of the disputes.

Sign here : (21) 

For Online Investing in Mutual Funds, the below mentioned terms and conditions are in addition to and binding on the existing Power of Attorney Executed by you.

Definitions :

"Unit" shall mean the interest of an investor, which consists of one undivided share in the Net Assets of the Scheme.

"Net Asset Value (NAV)" of the Units of the Scheme will be computed by dividing the net assets of the Scheme by the number of Units outstanding on the valuation date.

"Purchase" shall mean subscription to the units of the various schemes of the Mutual Fund.

"Redemption" shall mean sale of the units of the various schemes of the Mutual Fund.

"Switch" shall mean an option to the investor to shift his existing investment in any of the schemes of the Mutual Fund to another scheme of the Mutual Fund.

"Systematic Investment Plan (SIP) or "Automatic Investment Plan (AIP)" or "shall mean an option available to the investor for investing in a specified frequency of months in a specified scheme of the Mutual Fund for a constant sum of investment.

"Systematic Withdrawal Plan (SWP) or "Automatic Withdrawal Plan (AWP)" or " shall mean a facility provided to the investor to withdraw a pre-determined amount in a specified frequency of months from a specified scheme of the Mutual Fund.

1. Load shall mean a charge, which the Asset Management Company (AMC) may collect on entry and/or exit from a scheme.
2. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the Mutual fund / ACME Capital Market Limited responsible in any way.
3. The units of the scheme shall be allotted, redeemed or switched, as the case may be, at the Net Asset Value (NAV) prevalent on the date of the application, if the application for purchase, redemption or switch is received by the Fund before the cut-off time as specified on the website and consistent with the terms of the Scheme. ACME Capital Market Limited. shall take all necessary action to ensure that the NAV allotted is the NAV applicable on the date of the transaction. However, ACME Capital Market Limited. shall not be liable for any loss that may arise to the client as a result of the correct NAV not being allotted to the client's transactions on the website.
4. Any request falling due on a holiday would be processed on the next business day and respective NAV would be applicable as per the Mutual Fund's offer document.
5. In case of an NFO the units shall be allotted upon completion of allotment process. The NFO is open only for the period specified by the Mutual Fund. After the end of the NFO period, any forms submitted by the client shall be liable for being rejected by the chosen Mutual Fund and transfer of funds if any made by the client for the said transaction shall be at the sole risk and liability of the client.
6. In the case of Automatic Investment Plan, in the absence of sufficient allocated funds, unallocated funds to the extent available shall also be utilized. In the absence of sufficient funds, both allocated and unallocated, no investment shall be made for that particular period.
7. For change of address or any personal details of the client, the client shall send a letter or fax to ACME Capital Market Limited, signed by all the co-holders.
8. Investors are advised to read the risk factors carefully before taking an investment decision. Offer document(s) / abridged offer document(s) are available with Mutual Fund Asset Management Companies. Before taking an investment decision, investors must rely on their own examination of the issue and offer, including risk involved.
9. ACME Capital Market Limited. does not accept any liability for delay in processing time at the Mutual Fund's or Registrar's end.

10. It is explicitly stated herein that the Mutual Fund schemes offered online, have not been recommended by ACME Capital Market Limited., nor have they been sponsored by ACME Capital Market Limited., or its affiliates or its sponsors.

11. Neither ACME Capital Market Limited., nor any of the Mutual Funds shall be liable for any failure to perform its obligations, to the extent that such performance has been delayed, hindered or prevented by systems failures, network errors, delay or loss of data due to the above and in circumstances of acts of God, floods, epidemics, quarantine, riot or civil commotion and war.

12. ACME Capital Market Limited. shall provide its services on a best effort basis. However ACME Capital Market Limited. shall not be liable for failure of the system or for any loss, damage or other costs arising in any way out of:

- a) System failure including failure of ancillary or associated systems, or fluctuation of power, or other environmental conditions; or
- b) Accident, transportation, neglect, misuse, errors, frauds of the clients or agents or any third party; or
- c) Any fault in any attachments or associated equipment of the clients; or
- d) Any incidental, special or consequential damages including without limitation loss of profit.


The client further agrees to indemnify ACME Capital Market Limited. for any loss that may arise as a result of system failure, accident or any of the reasons mentioned above.

13. For all correspondences with ACME Capital Market Limited, the client shall quote his e-broking account no.
14. I/We hereby agree(s) to indemnify both the Mutual Fund and ACME Capital Market Limited and its employees for any loss arising as a result of any loss of data, unauthorized transaction / error during the financial transaction thereof.
15. I/We am/are aware that in order to comply with regulatory provisions under the Prevention of Money Laundering Act 2002, Rules issued there under and related guidelines/circulars issued by SEBI, KYC formalities are required to be completed for all Unit Holders, including Guardians and Power of Attorney holders, for any investment (whether new or additional purchase) of Rs. 50,000 or more in mutual funds. For the convenience of investors in mutual funds, all mutual funds have made special arrangements with CDSL Ventures Ltd. (CVL), a wholly owned subsidiary of Central Depository Services (India) Ltd. (CDSL). I / We hereby agree to indemnify the Mutual Fund/ACME Capital Market Limited / Registrar and its employees for any rejection/loss arising as a result of not completing KYC registration during the financial transaction thereof.

16. Upfront commission shall be paid directly by the investor to the AMFI registered Distributor based on the investors' assessment of various factors including the service rendered by the distributor.
17. The Distributor has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me / us.

The Terms and Conditions set hereinabove may be modified by ACME Capital Market Limited. without any prior notice to the client and the client's continued usage of the services shall be deemed to be an acceptance of the modified terms."

I/We have gone through the offer document/key information memorandum before deciding to make this investment in the mutual fund scheme.

Sign here : (23) 

To,

Date: _____

ACME CAPITAL MARKET LTD.

Corp Office : 208-209, 215, Ocean Complex, Sec-18, Noida-201301 | Ph.:9311759200 | Fax: 120-4456411

E-mail : dp@acmegroup.global | Website : www.acmecapitalmarket.com

Sub: Letter of Authority - CASH/F&O/Currency Derivative Segment of NSE/BSE

I/We are dealing with you as client at NSE/BSE in Cash, Derivative & Currency Derivative Segment and in order to facilitate ease of operations. I/We authorise you as under :

1. As I/We shall be dealing by ordering over phone and even if we visit the branch, the fluctuations in market are so rapid that it is not practical to give written instructions for order placement/modification and cancellation, I/We hereby authorize you to accept my / my authorised representative's verbal instructions for order placement/modification and cancellation in person or over phone (fixed line or mobile phone) and execute the same. I /We understand the risk associated with verbal orders and accept the same, and agree that I/We shall not be entitled to disown orders and consequent trades (if any) under the plea that same were not under mine/our instructions. I/We agree that I/We will not have the right to shift the burden of proof by asking you to prove the placement of orders through telephone recording or otherwise. I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my / our directions.
2. I/We understand that in case, of my/our failure to make the funds pay in or delivery of securities for my/our deals/trading by designated day, you are entitled to sell off in the market the securities received in payout and/or deem our position closed out at applicable rates;
or
I/We do hereby request you not to carry out such sell off in the market the securities received in payout and/or deem my/our positions closed out and I/We shall in consideration thereof shall pay the financial charges @ 2% per month for the debit balance if any, in my account & not settled as per the exchange requirements.
3. I/We hereby authorise you to keep all the securities which I/we have given you in margin including the payout of securities received by us for meeting margin / other obligation in any of the stock exchanges in whatever manner which may include pledging of shares in favour of bank and / or taking loan against the same or meeting margin/ pay-in obligation on my/our behalf or for giving the same as margin to the any of the Stock Exchanges or otherwise.
4. I/We hereby authorise you not to provide me/us Order Confirmation / Modification / Cancellation Slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We shall get the required details from contract notes issued by you.
5. Please debit the charges relevant with depository services from my trading account on monthly basis. I also agree to maintain the adequate balance in my trading account / pay adequate advance fee for the said reason. I/We have a Depository Account DP ID.....Beneficiary Client ID.....with ACME Capital Market Ltd.
6. I / We authorize Mr./Ms.....to deal/transact on my / our behalf and to place order, give instructions, make and receive payments of securities and monies, collect contract notes, bills, order confirmations, trade confirmations, account statements and any other documents or communication, to sign any document, settle the account, enter into any compromise and to do any and all act (s) on my/our behalf which I/ we can do and I/ we the undersigned do hereby agree and declare and confirm that all the acts, and things done by him/her or his/her substitutes shall be my / our acts, deed and things validly done by me / us to all intents and purposes.
7. We request that you may send/dispatch us contract notes/other documents through e-mail on my/our designated e-mail address of _____ I/We will completely rely on the log reports of your despatching software as a conclusive proof of dispatch of e-mail to me/us and will not dispute on the same.
8. I/We will inform you the change of my/our email ID, if any, in future either by regd. post or through a digitally signed e-mail.
9. I/We hereby agree and give my/our consent for sending the trade confirmations via SMS and I/We have also understood that we will not receive the telephonic trade confirmations.

For this purpose, I/We would like to confirm following details for the database maintained with you. Please update the records with the same.

Mobile No.:

10. I/We are aware and acknowledges that trading of all exchanges is in Electronic mode, based on VSat, leased line, ISDN, Modem, VPN, Internet and/or combination of technologies and computer system to place and route order and also involves many uncertain factors and complex hardware, software, systems, communication lines, peripherals, pay in payout of funds & securities, online & offline banking etc. these are susceptible to interruptions, delay, mistake and dislocations; and your services may at any time be unavailable without further notice and I/we understand that there exists a possibility of communication failure or system problems or slow or delay response from system or trading halt, or any such other problem/glitch whereby not been able to establish access to the trading system/network or delay in execution of trades, which may be beyond your control and may result in delay in processing or not processing of any orders either in part or in full. I understand that you are not making any representation or warranty that your service will be available to the Client at all times without any interruption. I/we agree that I/we shall not have any claim for any loss incurred by me/us against you on account of any suspension, delay, interruption, non- availability or malfunctioning of your System or Service for any reason whatsoever.

11. I/We confirm that I/we will never sublet the trading terminal on any term of connectivity from my place to any other place without your prior approval.

12. All fines/penalties and changes levied upon you due to my acts / deeds or transactions may be recovered by you from my account.

Thanking you

Yours faithfully

 (17)

Client Signature

Client Name: _____

Client Code: _____

DECLARATION FOR NAME MISMATCH WITH POSSIBLE SIGNATURE SPECIMEN

I hereby declare that, my name mentioned

1. In PAN Card is _____

& Signature Specimen on PAN

2. In Additional ID Proof i.e. Voter ID/Passport/Driving License is _____

& Signature Specimen on ID Proof

3. In Bank Account No _____ it is _____

& Signature Specimen on Bank

4. In _____ is this _____

& Signature Specimen is

Further I Declare that the names with signature specimen mentioned in above details document pertains to me, therefore I request you to register my account and make all the pay outs in the same name as mentions in my bank proof.

Thanks

Date: _____

 (18)

Client Signature

Client Name: _____

Client Code: _____

Client Code :

Dear Client,
To,

(1) **ACME CAPITAL MARKET LTD.**

[Member of the National Stock Exchange of India Ltd., Bombay Stock Exchange Ltd. (NSE, BSE)]

Regd. Office: F-23/1, Lane F-23, Krishna Nagar, Delhi-110051

(2) ACME Capital Market Ltd.

[Depository Participant (NSDL)]

Regd. Office: F-23/1, Lane F-23, Krishna Nagar, Delhi-110051

(Hereinafter jointly referred as 'ACML')

Dear Sir,

Sub : Right to Exercise Set-Off / Lien

I/We,, an individual / a sole proprietary concern/ a partnership firm / a body corporate/Trust, registered / incorporated, under the provisions of the Indian Partnership Act, 1932/the Companies Act, 1956 or any relevant Act, having my / our residence / registered office at.....
.....(hereinafter referred to as the "Client").

That I/we , am/are a Client of ACME Capital Market Ltd. (Jointly referred to as ACME) and have executed a separate Member Client Agreement with each of the aforesaid company/ies for investing/trading in securities admitted/permited for dealing on the respective Exchanges and also for investing/trading in those contracts admitted/permited for dealing on the Derivatives Market Segment of the respective Exchanges.

That in respect to the aforesaid agreements, I/we hereby authorise ACME to exercise the right to set off the balances in my/our accounts with ACME in any segment/exchange with respect to monies, securities. All monies, securities or other property, which ACME may hold on my/our account, shall be held subject to a general lien for the discharge of my/our obligations to ACME under these agreements. The right of lien and set-off conferred to ACME by me/us are as follows :


1. All securities in the demat account opened (if any) with the depository Participant (namely ACME Capital Market Ltd.) shall be subject to lien for the discharge of any or all payments due to ACME from me/us or any other obligations to ACME and may be held by ACME as a security against default by me/us in respect of the services already availed of by me/us from ACME.
2. The enforcement of the lien aforementioned shall be at the sole and complete discretion of ACME
3. I/We agree that ACME shall have the right of set-off amongst all trading account/(s) maintained by me/us with ACME.
4. The right of set-off as aforesaid shall extend to my/our trading accounts with respect to all broking transactions with associated concerns, affiliates or sister concerns of ACME as though such accounts are maintained with ACME.

Furthermore, the aforesaid lien/set-off conferred on ACME shall subsist even after the termination of the aforesaid Member - Client Agreements with ACME until all obligations under the said agreements are satisfied fully by me/us. The said right of lien/setoff shall be exercised by ACME jointly and/or, severally by each of the aforesaid companies

Thanking you,

Yours truly,

Date: _____

 (19)_____
Client Signature

Client Name: _____

Client Code: _____

In compliance with the provisions of Prevention of Money Laundering Act, 2002 and subsequent circulars issued by SEBI thereto, we hereby obliged to consider it as a part of client registration document: -

PREVENTION OF MONEY LAUNDERING

Prevention of Money Laundering Act, 2002 (herein refer to an "Act") came into affect July 1, 2005 vide notification No. GRE 436(E) dated July 1,2005 issued by Department of Revenue, Ministry of Finance, Govt. of India. Further SEBI vide Circular reference number ISD/CIR/RR/AML/1/06 dated January 18,2006 mandated that all the Stock Brokers should formulate and implement a proper policy framework as per the guidelines on anti money laundering measures and also to adopt a Know Your Client (KYC) policy. SEBI also issued another circular reference number CIR/ISD/AML/3/2010 dt. 31/12/10 advising all the Stock Broker to take necessary steps to ensure compliance with the requirement of Section 12 of the Act inter-alia, maintenance and preservation of records and reporting of information relating to cash and suspicious transactions to Financial Intelligence Unit-India (FIU-IND), New Delhi.

The constituents should ensure that the amount invested in the securities is through legitimate sources only and does not involve and is not designated for the purpose of contravention or evasion of the provision of the Income Tax Act, Prevention of Money Laundering Act, Prevention of corruption Act and/or any other law for the time being in force enacted by Govt. of India from time to time or any rules and regulations, notifications or directions issued there under.

To ensure appropriate identification of the constituents under its KYC policy and with view to monitor the transactions for the prevention of anti money laundering, the company has reserve the right to seek information, record constituents telephonic calls and/or obtained or retained documentation for establishing the identity of the constituents, proof of residence, source of funds, etc. It may re-verify identity and obtain any incomplete or additional information for this purpose.


The constituents or their attorney, if any, shall produce independent source documents, such as photographs, certified copies of ration card/passport/pan card/driving license or such other documents or produce such information as may be required from time to time for verification of the identity, residential address, financial information of the constituents by the company.

If the constituents refuses/fails to produce the required documents and information within the period specified in the communication sent by company to the constituents, then the company after applying due diligence measures believes that the transaction is suspicious in nature within the purview of the Act and SEBI circulars issued from time to time or on account of deficiencies in the documentation shall have absolute discretion to report suspicious transaction to FIU-IND or to reject the application or to freeze the account of constituent. Thus the KYC documentation shall comply by all the constituents in its true spirit and word.

The Company, its Directors, its Employees and agents shall not be liable in any manner for any claim arising whatsoever on account of freezing of account or on rejection of application etc. due to noncompliance of the provisions of the Act, SEBI circulars and KYC policy and or where company believes that transaction is suspicious in nature within the purview of the Act or SEBI circulars and reporting the same to FIU-IND.

This document form an integral part of the client registration form as addendum or key information memorandum and will be subject to amendments from time to time.

Date: _____

 (20)

Client Signature

Client Name: _____

Client Code: _____

DISCLOSURE INFORMATION (ACME CAPITAL MARKET PVT. LTD.)

To,
Dear Client,

Sir/Madam,

This is to inform you that we do client based trading and Pro-account Trading in National Stock Exchange of India Limited (NSE) and Bombay Stock Exchange Limited (BSE).

Thanks & best regards

For **ACME CAPITAL MARKET LTD.**

I acknowledge the receipt of the information given by ACME CAPITAL MARKET LTD. that they do client trading and Pro-account trading.

ACME Capital Market Limited

Annexure-A

Demat Debit and Pledge Instruction(DDPI)

Client UCC Code	
Demat / Client-ID	
Date	
Place	

I/We request to activate the DDPI facility for following purposes:-

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 1st holder
		Signature of 2nd holder
		Signature of 3rd holder
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 1st holder
		Signature of 2nd holder
		Signature of 3rd holder
3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms.	Signature of 1st holder
		Signature of 2nd holder
		Signature of 3rd holder
4.	Tendering shares in open offers through Stock Exchange platforms.	Signature of 1st holder
		Signature of 2nd holder
		Signature of 3rd holder

List of **ACME Capital Market Limited** demat accounts where securities can be moved /Pledge

Account Type	CM BP ID	DP Name	DP ID	Client ID
Client Unpaid Securities Pledgee A/C		Globe Capital Market Ltd.	IN300966	11255245
TM-Client Securities Pledge Account		Globe Capital Market Ltd.	IN300966	11255165
NSDL POOL A/C	In547045	Globe Capital Market Ltd.	IN300966	11228556
CDSL POOL A/C		Globe Capital Market Ltd.	12020600	02267514
NSDL POOL A/C	In548710	ACME Capital Market Ltd	IN304721	10000238
Client Unpaid Securities Pledgee A/C		ACME Capital Market Ltd	IN304721	10000447
Client Nodal MFOS Account		ACME Capital Market Ltd	IN304721	10000502
TM-Client Securities Pledge Account		ACME Capital Market Ltd	IN304721	10000439

Client Signature

* The same may be e Signed or signed physically

DP Signature & Seal & Stamp



ACME GROUP

REGED OFFICE:
F-23/1, LANE F-23, BLOCK- F, KRISHNA NAGAR, DELHI-110051

CORPORATE OFFICE:
215, OCEAN COMPLEX 2ND FLOOR, SEC-18, NOIDA-201301