

## **Bharat Bhushan Equity Traders Limited**

503, ROHIT HOUSE, 3, TOLSTOY MARG, NEW DELHI-110 001

TEL.: 011-49800907, 41505504, FAX: 49800933

Website: www.bbinvestments.in E-mail: dp@bharatbhushan.com

| Depositor            | y Account O | pening Form |  |
|----------------------|-------------|-------------|--|
| For : NON-INDIVIDUAL | ☐ FI        | ☐ FII       |  |

#### Annexure JB

#### 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.
- 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 NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- 11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., 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.
- 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 apostiled 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 paying taxes/filing tax returns in India.
- 4. In case of institutional clients, namely, FIIs, 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.

## **BHARAT BHUSHAN EQUITY TRADERS LIMITED**

503, Rohit House, 3, Tolstoy Marg, New Delhi-110001 Ph.: +91-11-49800900, Fax: +91-11-49800933



## Know Your Customer (KYC) Application Form | Non-Individual

| Г  | ease fill this form in EN  | GLISH and in BL       | OCK LETTER       | 15         |           |          |                         |         |        |            |       |
|----|----------------------------|-----------------------|------------------|------------|-----------|----------|-------------------------|---------|--------|------------|-------|
| A. | IDENTITY DETAILS           | l                     |                  |            |           |          |                         |         |        |            |       |
| 1. | Name of the Applicant      |                       |                  |            |           |          |                         |         |        |            |       |
| 2. | Date of incorporation      | D D M N               | 1 Y Y            | YY         | Place o   | incorpo  | oration                 |         |        |            |       |
| 3. | Date of commencement of    | f Business D          | D M M            | Y          | Y         | Υ        |                         |         |        |            |       |
| 4. | a) PAN                     |                       |                  | b)         | Registrat | ion No.  | (e.g. CIN)              |         |        |            |       |
| 5. | Status (Please tick any on | ie) :                 |                  | •          |           |          | ·                       |         |        |            |       |
|    | Private Limited Co.        | Ban                   | ık               |            | Pa        | rtnershi | ip                      |         |        |            |       |
|    | Public Limited Co.         | Gov                   | ernment Body     |            | ☐ FI      |          |                         |         |        |            |       |
|    | Body Corporate             | Non                   | n Government Or  | rganizatio | n FI      |          |                         |         |        |            |       |
|    | Trust                      |                       | ense Establishm  | •          | П н       | JF       |                         |         |        |            |       |
|    | Charities                  | Soc                   |                  |            | A(        |          |                         |         |        |            |       |
|    | NGO's                      |                       | •                |            | ☐ B(      |          |                         |         |        |            |       |
|    | Others (please speci       |                       |                  |            |           |          |                         |         |        |            |       |
| В. | ADDRESS DETAILS            |                       |                  |            |           |          |                         |         |        |            |       |
| 1. | Correspondence             |                       |                  |            |           |          |                         |         |        |            |       |
|    | Address                    |                       |                  |            |           |          |                         |         |        |            |       |
|    |                            | City/Town/Village*    |                  |            |           |          | PIN/Post Code*          |         |        |            |       |
|    |                            | State/U.T. Code*      |                  |            |           |          | ISO 3166* Country Code  |         |        |            |       |
| 2. | Specify the proof of addre | ss submitted for cor  | respondence ad   | ldress     |           |          |                         |         |        |            |       |
| 3. | Contact Details            | Tel. (Off.)           |                  |            |           |          | Tel. (Res.)             |         |        |            |       |
|    |                            | Fax No.               |                  |            |           |          | Mobile No.              |         |        |            |       |
|    |                            | Email ID              |                  |            |           |          |                         |         |        |            |       |
| 4. | Registered Address         |                       |                  |            |           |          |                         |         |        |            |       |
|    | (If different from above)  |                       |                  |            |           |          |                         |         |        |            |       |
|    |                            | City/Town/Village*    |                  |            |           |          | PIN/Post Code*          |         | $\Box$ |            |       |
|    |                            | State/U.T. Code*      |                  |            |           |          | ISO 3166* Country Code  | '       |        |            |       |
| 5. | Specify the proof of addre | ess submitted for reg | jistered address |            |           |          |                         |         |        |            |       |
| _  | OTHER RETAILS              |                       |                  |            |           |          |                         |         |        |            |       |
| C. |                            |                       |                  |            |           |          |                         |         |        |            |       |
| 1. | Gross Annual Income        |                       |                  |            | • .       |          |                         |         |        |            |       |
|    | Below ₹ 1 Lac              | ₹ 1-5 Lac             | ₹ 5-10 Lac       | !₹         | 10-25     | acs      | ₹ 25 Lacs - 1 Cror      | e       | Above  | <b>₹</b> 1 | Crore |
| 2. | Networth                   |                       |                  |            |           |          |                         |         |        |            |       |
|    | Amount (Rs.)               |                       |                  |            |           | As       | s on (date)             |         |        |            |       |
|    |                            |                       |                  |            |           | (*N      | Net worth should not be | e older | than   | 1 yea      | ar)   |

|                                   | are that the    | therein, i   | mmediate | ely. In case | ue and correct to the best of my/our knowle<br>any of the above information is found to<br>able for it. |   |
|-----------------------------------|-----------------|--------------|----------|--------------|---|---|
| Place :                           |                 |              |          |              |   |   |
| Date :                            |                 |              |          |              | nature of the Authorised Signatory(ies)   |   |
| 10. ATTESTATIO                    |                 |              |          | LY           |   |   |
| Document Received  KYC & IN-PERSO |                 | ertified Cop |          | OUT BY       | INSTITUTION DETAILS   |   |
| Emp. Name / Code                  | , v v z i i i i |              | 74111122 |              | Name : BHARAT BHUSHAN EQUITY  | ] |
| Emp. Designation                  |                 |              |          |              | TRADERS LIMITED   | - |
| Emp. Branch                       |                 |              |          |              | Code: <b>IN 0077</b>  |   |
| Emp. Signature                    |                 |              |          |              | NDML MI ID : P1158  |   |
| Date                              |                 |              |          |              | CVL POS Code: 1800000110  |   |
|                                   |                 |              |          |              |   |   |

# Details of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

|           | <u>'</u> | anow rour on  | ient (it i o) Ap |  | 1011-111dividue   |  |
|-----------|----------|---|------------------|--|---|--|
| S.<br>No. | Name     | Relationship<br>with Applicant<br>(i.e. promoters,<br>whole time<br>directors etc.) | PAN              | Residential /<br>Registered<br>Address | DIN of whole<br>time directors<br>/Aadhaar<br>number of<br>Promoters/<br>Partners/Karta | Photograph to be signed across with Rubber Stamp |
|           |          |   |                  |  |   |  |
|           |          |   |                  |  |   |  |
|           |          |   |                  |  |   |  |
|           |          |   |                  |  |   |  |
|           |          |   |                  |  |   |  |
|           |          |   |                  |  |   |  |
|           |          |   |                  |  |   |  |
|           |          |   |                  |  |   |  |

| <u></u> | Name & Signature of the Au | uthorised Signato | ry (ies) |   | Date : D | D M M Y Y Y Y |
|---------|----------------------------|-------------------|----------|---|----------|---------------|
|         |                            |                   |          | 3 |          |               |





# Bharat Bhushan Equity Traders Limited Depository Participant NSDL DP ID - IN301209

Depository Participant NSDL DP ID - IN301209 503, Rohit House, 3, Tolstoy Marg, New Delhi-110 001 Tel.: 49800907, 41505504, Fax: 49800933

## Annexure – K PART II – ACCOUNT OPENING FORM

|              |              |  |                 | (2 (      |                           |                          | UALS)             | Cilent-                      | ID   |               |                |                 |                 |                |                       |        |              |
|--------------|--------------|--|-----------------|-----------|---------------------------|--------------------------|-------------------|------------------------------|--|---------------|----------------|-----------------|-----------------|----------------|-----------------------|--------|--------------|
|              |              | st you to open a depos   |                 |           |                           | er the foll              | lowing            | Date                         | I  |               |                | M               | М               | V              | Y                     | Y      | V            |
| letai]<br>A) |              | lease fill all the details  oe of account  | s in CAPITAL    | LETTE     | ERS only)                 |                          |                   | Date                         |  |               |                | 171             | IVI             | 1              | 1                     | 1      | 1            |
|              |              | Body Corporate Qualified Foreign   | Investor        |           | FI<br>Mutual I            | Fund                     |                   | П                            | TII<br>Trust                                 |               |                |                 |                 |                |                       |        |              |
|              | L            | Bank   |                 |           | CM                        |                          |                   |                              | Other (                                      | Pleas         | e spe          | ecify           | <sup>/)</sup>   |                |                       |        | _            |
| 3)           | Det          | ails of Account holder   | r(s):           |           |                           |                          |                   |                              |  |               |                |                 |                 |                |                       |        |              |
|              |              |  |                 | N         | lame                      |                          |                   |                              |  |               |                | P               | PAN             |                |                       |        |              |
|              | Hol          | e/First<br>der<br>ond Holder   |                 |           |                           |                          |                   |                              |  |               |                |                 |                 |                |                       |        |              |
|              | Thi          | rd Holder  |                 |           |                           |                          |                   |                              |  |               |                |                 |                 |                |                       |        |              |
| C)           | of t<br>Pers | HUF, Partnership Firn<br>he karta, partner(s), to<br>sons (AOP) etc., shoul-<br>Name             | rustee(es) etc  | ., the na | ame & PA                  | tion of Per<br>AN of the | sons (A<br>HUF, P | OP) etc<br>artnersl<br>b) PA | nip Fin                                      | ough<br>rm, U | the a          | iccot<br>gister | unt is<br>red T | oper<br>Trust, | ned in<br>Asso        | the i  | name<br>on o |
| D)           |              | ome Details (please spe  |                 | _         |                           |                          |                   | 0) 1 A                       | <u>'                                    </u> |               |                |                 |                 |                |                       |        | Щ            |
| E)           | 1 2 3        | We authorise you to Account to be opera  SMS Alert facility                                      |                 |           |                           |                          | count.            |                              | Yes<br>Yes                                   |               | N              | lo              |                 |                |                       |        |              |
|              | 3            | Sr. No.  |                 | Н         | lolder                    |                          |                   |                              |  | Y             | es             |                 |                 |                | No                    |        |              |
|              |              | 1  |                 |           | ole/First H               | Holder                   |                   |                              |  | Ī             | <u> </u>       |                 |                 |                | 110                   |        |              |
|              |              | 1  |                 |           |                           |                          |                   |                              |  |               |                |                 |                 |                | ]                     |        |              |
| - 1          |              | 2  |                 | S         | econd Hol                 | lder                     |                   |                              |  |               |                |                 |                 |                | ]                     |        |              |
|              |              |  |                 |           | econd Hol<br>hird Holde   |                          |                   |                              |  |               |                |                 |                 |                | ]<br>]<br>]           |        |              |
| •            | 4            | 2 3 Mode of receiving St Account [Tick any or  |                 | T         |                           | er                       | Electro in KYC A  |                              | _  |               | ]<br>]<br>3 an | d ens           | sure th         |                | ]<br>]<br>]<br>ail ID | is pro | vided        |
| F)           |              | 2<br>3<br>Mode of receiving St   |                 | T         | hird Holde                | er                       |                   |                              | _  |               | 3 an           | d ens           | sure th         |                | ]<br>]<br>]<br>ail ID | is pro | vided        |
| F)           |              | 2 3 Mode of receiving St Account [Tick any or  | ne]             | T         | hird Holde<br>Physical Fo | er orm                   | in KYC A          | <i>Ipplicatio</i>            | n Forn                                       | n].           |                |                 |                 | aat ema        |                       | is pro | vided        |
| F)           | Bar          | 2 3 Mode of receiving St Account [Tick any or  | ne]  Savings Ac | T         | hird Holde<br>Physical Fo | er orm                   | in KYC A          | <i>Ipplicatio</i>            | n Forn                                       | n].           |                |                 |                 |                |                       | is pro | vided        |
| F)           | Bar<br>1     | 2 3 Mode of receiving St Account [Tick any or                | ne]  Savings Ac | T         | hird Holde<br>Physical Fo | er orm                   | in KYC A          | <i>Ipplicatio</i>            | n Forn                                       | n].           |                |                 |                 |                |                       | is pro | vided        |
| F)           | 1<br>2       | 2 3 Mode of receiving St Account [Tick any or othe details  Bank account type  Bank Account Numb | Savings Ac      | T         | hird Holde<br>Physical Fo | er orm                   | in KYC A          | <i>Ipplicatio</i>            | n Forn                                       | n].           |                |                 |                 |                |                       | is pro | vided        |
| F)           | 1 2 3        | Account [Tick any or   | Savings Ace     | T         | hird Holde<br>Physical Fo | er orm                   | O/I               | Application  Accou           | n Forn                                       | n].           |                |                 |                 |                |                       | is pro | vided        |
| 7)           | 1 2 3        | Account [Tick any or   | Savings Ac      | T         | hird Holde<br>Physical Fo | er orm                   | O/I               | ) Accou                      | n Forn                                       | n].           |                |                 |                 |                |                       | is pro | vided        |

| G) In ( | case of FIIs/Others (as may be applicable)  |
|---------|---|
|         | BI Approval Reference Number  |
| RB      | BI Approval date  D D M M Y Y Y   |
|         | BI Registration Number (for FIIs)   |
|         | ease tick, if applicable, for any of your authorized Politically Exposed Person (PEP)               |
| sign    | natories/Promoters/Partners/Karta/Trustees/whole time Related to a Politically Exposed Person (PEP) |
| dire    | ectors:   |
| I) Cle  | earing Member Details (to be filled up by Clearing Members only)                                    |
| 1       | Name of Stock Exchange  |
| 2       | Name of Clearing Corporation/ Clearing House  |
| 3       | Clearing Member ID  |
| 4       | SEBI Registration Number  |
| 5       | Trade Name  |
| 6       | CM-BP-ID (to be filled up by Participant)   |
| Jo      | any one singly  bintly by  as per resolution  Others (please specify)                               |
|         | thers (please specify)  |

#### **Declaration**

#### Authorised Signatories (Enclose a Board Resolution for Authorised Signatories)

| Sole/First Holder | Name | · Signature(s) |
|-------------------|------|----------------|
| First Signatory   |      |                |
| Second Signatory  |      |                |
| Third Signatory   |      |                |
| Other Holders     |      |                |
| Second Holder     |      |                |
|                   |      |                |
| Third Holder      |      |                |

#### Notes:

- 1. In case of additional signatures, separate annexures should be attached to the application form.
- 2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
- 3. For receiving Statement of Account in electronic form:
  - Client must ensure the confidentiality of the password of the email account.
  - II. Client must promptly inform the Participant if the email address has changed.
  - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.

| 4. | Strike | off | whichever | is | not | app] | licabl | e. |
|----|--------|-----|-----------|----|-----|------|--------|----|
|    |        |     |           |    |     |      |        |    |

| = = | : = : | <br>= | = = | = = | = = | = = | = | = : | = = | = = | = | = | = | = | = | == | = = | = = | = | = = | = = | = = | = = | = | = | = : | = = | = = | = | = | = : | = = | = = | = | = | = = | = = | = | = | = | = = | = = | = = | = = | - = | = | = | = : | = = | = | = |
|-----|-------|-------|-----|-----|-----|-----|---|-----|-----|-----|---|---|---|---|---|----|-----|-----|---|-----|-----|-----|-----|---|---|-----|-----|-----|---|---|-----|-----|-----|---|---|-----|-----|---|---|---|-----|-----|-----|-----|-----|---|---|-----|-----|---|---|

60 years with you BHARAT BHUSHAN

## Acknowledgement Bharat Bhushan Equity Traders Limited

503, Rohit House, 3, Tolstoy Marg, New Delhi-110 001

**DP ID - IN301209** 

| Received   | the    | application    | from     | M/s                                    | -     | as   | the   | S     | ole/firs | t l   | older   | alon    | gwith  |
|------------|--------|----------------|----------|--|-------|------|-------|-------|----------|-------|---------|---------|--------|
|            |        |                | and      |  | as t  | he s | econd | and   | third 1  | holde | rs resp | ectivel | y for  |
| onening of | a deno | eitory account | Planca a | usto the DP ID & Client ID elletted to | vou ( | CM   | חו מם | in or | oso of ( | Cloor | na Ma   | mbora)  | in all |

opening of a depository account. Please quote the DP ID & Client ID allotted to you (CM-BP-ID in case of Clearing Members) in all your future correspondence.

| Data |  |
|------|--|
| Date |  |

Participant Stamp & Signature



## **Bharat Bhushan Equity Traders Limited**

Declaration Form of Ultimate Beneficial Ownership [UBO] / Controlling Persons

| <u>I. I</u>                         | nvestor Details:  |  |  |  |  |  |                                 |  |   |
|-------------------------------------|---|--|--|--|--|--|---------------------------------|--|---|
| Na                                  | me of the Client  |  |  |  |  |  |                                 |  |   |
| II.                                 | Category:   | _  |  |  |  |  |                                 |  |   |
|                                     | _ ' '   |  | pany listed / Subs<br>I to provide UBO deta  | ,  | Controlled by a Listed   | Compa  | ny                              |  |   |
|                                     | Unlisted Company Partnership Firm / LLP Unincorporated Association / Body of Individuals            |  |  |  |  |  | Individuals                     |  |   |
|                                     | Public Charitable Trust Private Trust Religious Trust   |  |  |  |  |  |                                 |  |   |
|                                     | Trust created by a  | Trust created by a Will Others [please specify]  |  |  |  |  |                                 |  |   |
| UB                                  | UBO / Controlling Person(s) details   |  |  |  |  |  |                                 |  |   |
| S.<br>No.                           | Name of UBO   | Country of Tax<br>Residency  | Taxpayer Identification<br>Number / PAN /<br>Equivalent ID Number  | % of beneficial interest                                       | Address & Contact<br>details (include city, Pin<br>code, State, Country)   | Gender<br>(Male/<br>Female)                    | PEP                             | Nationality  | Occupation<br>[Service/<br>Business/<br>Others]                           |
|                                     |   |  |  |  |  |  |                                 |  |   |
|                                     |   |  |  |  |  |  |                                 |  |   |
|                                     |   |  |  |  |  |  |                                 |  |   |
|                                     |   |  |  |  |  |  |                                 |  |   |
|                                     | e: If the given rows are natory.  | ot sufficient, re  | equired information ir   | the given  | format can be enclosed as  | additiona                                      | l shee                          | t(s) duly signe  | d by Authorized   |
| Dec                                 | laration  |  |  |  |  |  |                                 |  |   |
| any<br>for i<br>info<br>Auth<br>the | of the above specified<br>t. We hereby authorize<br>rmation provided by<br>norities or any Indian o | I information in the Bharat Bhus including in the government or foreign government version version in the second second in the s | is found to be false of<br>han Equity Traders L<br>all changes, update<br>ernmental or statution<br>ou informed in writi | or untrue<br>td to disc<br>s to such<br>ory or jud<br>ng about | s true and correct to the or misleading or misrepre lose, share, rely, remit in a information as and whe licial authorities / agencie any changes / modification required at your end. | esenting,<br>any form,<br>n provid<br>s withou | we ar<br>mode<br>ed by<br>t any | e aware that<br>e or manner,<br>us to any c<br>obligation of | : we may liable<br>all / any of the<br>of the relevant<br>a dvising us of |
| Signature                           |   |  |  | Date:<br>Place:  |  |  |                                 |  |   |
|                                     |   |  |  |  |  |  |                                 |  |   |

#### **INSTRUCTIONS ON CONTROLLING PERSONS / ULTIMATE BENEFICIAL OWNER**

As per SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of controlling persons [CP] / ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such CPs/ UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

#### A. For Investors other than individuals or trusts:

- (i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlementto:
  - more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
  - more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership;
  - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

#### B. For Investors which is a trust

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

#### C. Exemption in case of listed companies / foreign investors

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies. Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client.

## FEMA / FATCA-CRS DECLARATION

To,

## **Bharat Bhushan Equity Traders Ltd.**

503, Rohit House, 3 Tolstoy Marg, New Delhi-110001

## **FEMA / FATCA-CRS Declaration**

| 2. If Y       |                             | country other than India Yes No No etails of all countries where you hold tax residency and   | its Tax Identification                                   |  |
|---------------|-----------------------------|---|--|--|
| Sr.<br>No.    | Country of<br>Tax Residency | Tax Payer Identification No.  | Identification Type<br>(TIN or other,<br>please specify) |  |
| 1.            |                             |   |  |  |
| 2.            |                             |   |  |  |
| 3.            |                             |   |  |  |
| and be misrep | elief. In case any of the   | the information provided above is true and correct to the above specified information is found to be false or at I may liable for it. I also declare that I have complied & w | untrue or misleading or                                  |  |
| Yours         | faithfully,                 |   |  |  |
| <u>&amp;</u>  | (Signature)                 | -   |  |  |
| Name          | :                           |   |  |  |
| Client        | ID / Trading Code:          |   |  |  |
| Place         | :                           |   |  |  |
| Date          | :                           |   |  |  |

## **DEED OF DECLARATION OF HUF**

| l,  |                                   |                             | son of |                        |  |  |
|---|-----------------------------------|-----------------------------|--------|------------------------|--|--|
|   | ng at                             |                             |        |                        |  |  |
| aged aboutyears do hereby declare -   |                                   |                             |        |                        |  |  |
| <ol> <li>That I am Karta of</li></ol>                                       |                                   |                             |        |                        |  |  |
| Sr.<br>No.  | Name of<br>Coparcener /<br>Member | Date of Birth<br>(Dd/MM/YY) | Gender | Relation<br>with Karta | Coparcener/<br>Member<br>(Pl. Specify) | Signature<br>(in case of minor<br>to be signed by<br>Guardian) |
| 1.  |                                   |                             |        |                        |  |  |
| 2.  |                                   |                             |        |                        |  |  |
| 3.  |                                   |                             |        |                        |  |  |
| 4.  |                                   |                             |        |                        |  |  |
| 5.  |                                   |                             |        |                        |  |  |
| 3. That the above statements are true to the best of my knowledge & belief. |                                   |                             |        |                        |  |  |
| <b>⊗</b><br>(Signa  | ture of KARTA of HUF)             | _                           |        |                        |  |  |



## BHARAT BHUSHAN EQUITY TRADERS LTD.

# Depository Services SCHEDULE OF CHARGES

(Corporate Accounts) w.e.f 01/10/2013

#### SCHEDULE-A

| S.No. | DETAIL OF SERVICES                                | CHARGES  |
|-------|---|--|
| 1.    | ACCOUNT OPENING                                   | NIL  |
| 2.    | ACCOUNT CLOSING                                   | NIL  |
| 3.    | ANNUAL MAINTENANCE                                | Rs.1000/- p.a.   |
| 4.    | Sell (Mkt/Off-Mkt)                                | 0.3% (Min. Rs. 15/-)<br>Rs. 14/- for SPEED-E                                     |
| 5.    | Purchase (Mkt/Off-Mkt)                            | NIL  |
| 6.    | Demat   | Rs. 3/- Per Certificate  |
| 7.    | Remat   | 0.3% (Min. Rs. 12/- per 100 Shares or Rs.<br>12/- per Cert. whichever is higher) |
| 8.    | Pledge (Creation/Closure/Invocation)              | 0.02% (Min Rs. 50/-)   |
| 9.    | CUSTODY   | NIL  |
| 10.   | IDEAS   | Rs. 10/- p.m.  |
| 11.   | SPEED-E   | Rs. 120/- p.a.   |
| 12.   | KRA Upload / Download Charges (w.e.f. 01-04-2012) | Rs. 100/- per PAN  |

#### OTHERS

| a) Demat / Remat - | Courier Charges   | Rs. 40/- |
|--------------------|-------------------|----------|
| a) Demai/Remai-    | · Courier Charges | RS. 40/- |

b) Demat / Remat Rejection - Courier Charges Rs. 40/-

c) Additional Delivery Instruction Book Rs. 25/-

d) Lost / Misplaced Delivery Instruction Book Rs. 50/-

e) Late Submission of Instructions on Pay-in-day Rs. 10/- per instruction

f) Failed Instructions Rs. 10/- per instruction

9) Modifications in Demat A/c NIL

h) Ad-hoc statements Rs. 100/-

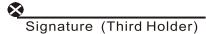
i) Document handling charges (per dispatch) Rs. 25/-

**Note**: ● Charges quoted above are for the services listed and are exclusive of GST, Regulatory Charges and NSDL Charges.

- Any service not quoted above will be charged separately.
- Management reserves the right to Freeze/Suspend/Revise Charges of the account as per NSDL rules.









## Regd. Office

Regd. Office: 503, Rohit House, 3 Tolstoy Marg, New Delhi-110001

Ph.: +91-11-49800900, Fax: +91-11-49800933

E-mail: dp@bharatbhushan.com • Website : www.bbinvestments.in

#### **Branches**

#### **CONNAUGHT PLACE**

304/404, Rohit House 3 Tolstoy Marg, New Delhi-110001

Ph.: +91-11-49800900

H- 45, Connaught Place, New Delhi- 110001

Ph.: +91-11-41513308, 41503585 E-mail: corporate@bharatbhushan.com

#### **NOIDA**

Krishna Apra Plaza, Plot No. P3, Sector 18, Commercial Market, Noida, Uttar Pradesh.

Ph.: +91-120-4358612-13

Email: noida@bharatbhushan.com

#### **VASANT KUNJ**

19, Vasant Arcade, Vasant Kunj, New Delhi 110070 Ph.: +91-11-26894527, 26894602 E-mail: vk@bharatbhushan.com

#### **GURGAON**

265,Central Arcade, Phase-II, DLF City, Gurgaon, Haryana Ph.: +91-124-4101706-07 Email: gurgaon@bharatbhushan.com

#### **JAIPUR**

412, City Mall, C-21B, Bhagwan Das Road, Panchbati, Jaipur-302001 Ph.:+91-141-4049938-39 Email: jaipur@bharatbhushan.com