

## Open doors to **limitless opportunities**

**Trading & Demat Account Opening Form**

- For Individuals & NRI



Sr. No.:

Client Code

**Segments:**

Equity | Derivatives | Currency | Commodities

**BOOKLET 1 (SECURITIES & COMMODITIES)**

S. No.	Name of the Document	Brief Significance of the Document	Page No.
<b>MANDATORY FORM AS PRESCRIBED BY SEBI &amp; EXCHANGES</b>			
1	Account Opening Form	A. KYC form - Document captures the basic information about the constituents and an instruction/checklist. (To be filled by customer)	3-6
		B. Document captures the additional information for Trading & Demat Account	7-11
2	Tariff sheet	Document detailing the demat fee schedule & rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s).	12-13
3	Power of Attorney (POA)	POA in favour of TFMPL, facilitates hassle free settlement of securities transaction, NFO / IPO Application, mutual fund purchase and redemption for and on behalf of the client	14-15
4	Authorisation for Running Account	Authorisation letter to Torus Financial Markets Pvt. Ltd. facilitates maintaining of fund with the member for every pay-in of funds obligation / margin obligation	16
5	Mutual Fund Service Request	Mutual Fund Service System (MFSS) facility of NSE/BSE StAR	17
6	Confirmation for SB/AP	Confirmation of the arrangement with Authorised Person/Bank Mandate	19
7	Office Use	Acknowledgement and office use copy	21

**SECURITIES BOOKLET 2**

S. No.	Name of the Document	Brief Significance of the Document	Page No.
<b>MANDATORY FORM AS PRESCRIBED BY SEBI &amp; EXCHANGES</b>			
1	Rights and Obligations (Trading)	Document stating the Rights & Obligations of stock broker/trading member, authorized person and client for trading on exchanges (including additional rights & obligations in case of internet wireless technology based trading).	1-6
2	Rights and Obligations (DP)	Documents detailing Rights & Obligations of beneficial owner and depository participant	6-8
3	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the Securities	9-12
4	Guidance note	Document detailing do's and don'ts for trading on exchange, for the education of the Investors.	12-13
5	Policies and Procedures	Document describing significant policies and procedures of the stock broker	14-18
6	Rights and Obligations (SLBS)	Documents detailing Rights & Obligations of Clearing Member/Participant and its Client	18-21
<b>VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER</b>			
7	General Terms and Condition	General terms and conditions governing Securities trading and broking services of TFMPL	22-33
8	T&C for BSDA	Terms & Conditions for Basic Services Demat Account	34

Note: **Booklet 1** to be filled by client and returned to TFMPL. **Booklet 2** to be read, understood by the client for future reference

**Torus Financial Markets Private Limited**

SEBI Registration No: Stock Broker: BSE, NSE, INZ000299936 dated: 30-06-2021 | Research Analyst: INH000008695.  
 Mutual Funds Distribution: AMFI ARN No.241161 CDSL SEBI Reg. No. IN-DP-664-2022 |Member ID: NSE 90245, BSE 6761.,  
 Clearing Member for NSE FO: Globe Capital Market Limited Clg. Member Code: 06637 | Clearing corporation: NSE Clearing Ltd (NCL)

Mutual Funds Distribution: AMFI ARN No.241161

CDSL SEBI Reg. No. IN-DP-664-2022

**Registered office address:** 1501, Lodha Aria, Cs.n0. 6/207, T J Road, Sewri, Mumbai - 400015

**Correspondence office address:** C- Wing, 1802, Lotus Corporate Park, Off Western Express Highway, Jai Coach, Goregaon, East Mumbai- 400063

**Tel.:** (91) (22) 69243000 **Fax:** (91) (22) 69243000 **Website:** www.tickweb.heytorus.com **CIN:** U65990MH2021PTC356714

**Compliance Officer Name:** Ms. Bansi Sanghvi **Phone No.** (91) (22) 69243000 **email id:** tfm.compliance@torusgroup.in

**For any grievance/dispute:** Please contact Torus Financial Markets Private Limited at the above address or email id - customer.support@torusgroup.in / grievance@torusgroup.in / dpgrievance@torusgroup.in and Phone no. (91) (22) 6243 6000 / 2581 6000.

**In case not satisfied** with the response, please contact the concerned exchange(s) at: NSE: ignse@nse.co.in

BSE: is@bseindia.com Phone no. NSE: 022-26598190 / 1800 22 0051 BSE: 022-22721233/34

<b>Important Instructions</b>	
1	All details to be filled in Capital letters in Black/Blue Ink Only.
2	Holder's Names in all the required fields should be filled as per the supporting documents submitted.
3	Email ID & Mobile number are very important as account related passwords and transaction details will be communicated on that.
4	Provide correct Bank IFSC & MICR code for hassle free transactions in future.
5	Ensure Signatures are done on all MANDATORY forms & VOLUNTARY documents (Opted by Client)
6	All KYC documents must be self attested and corrections should be counter signed on left hand side of the page.
7	Details of the Names, Address, Telephone Number(s), etc., of the Magistrate / Notary Public / Special Executive Magistrate / Special Executive Officer are to be provided in case of attestation done by them.
8	In case of applications containing a Power of Attorney, the relevant Power of Attorney or the self-certified copy thereof, must be lodged along with the application.
9	All correspondence / queries shall be addressed to the first / sole applicant.
10	Strike off option whichever is not applicable in the AOF
11	Fields marked with "*" are mandatory fields.
12	Please fill the form in English and in BLOCK letters.
13	Please fill the date in DD-MM-YYYY format.
14	Please read section wise detailed guidelines/instruction at the end
15	List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
16	List of two character ISO 3166 country codes is available on the website.
17	KYC number of applicant is mandatory for update application.
18	For particular section update, please tick (✓) in the box available before the section and <b>strike off</b> the sections not required to be updated..
19	Annexure A1 for related person, refer website.

## CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

### A. Clarification / Guidelines on filling 'Personal Details' Section

1. Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.

### B. Clarification/Guidelines on Filling 'Current Address Details' Section

1. In case of deemed POA such as utility bill, the document need not be uploaded on C-KYCR
2. PoA to be submitted only if the submitted PoI does not have current address as per PoI is invalid or not in force.
3. State / U,T code and Pin / Post code will not be mandatory for Overseas addresses.
4. In Section 2, one of I, II, and III is to be selected. In case of online E-KYC authentication, II is to be selected.
5. In Section 3, one of I, II, III and IV is to be selected. In case of online E-KYC authentication, II is to be selected.
6. List of documents for 'Deemed Proof of Address:-

Document Code	Description
---------------	-------------

- |    |  |
|----|--|
| 1. | Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas ,water bill).  |
| 2. | Property or Municipal tax receipt.   |
| 3. | Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.  |
| 4. | Letter of allotment of accommodation from employer issued by State Government Departments or Public Sector Undertakings, if they contain the address.  |
| 5. | Letter of allotment of accommodation from employer issued by State Government or Central Governments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.   |
| 7. | Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.  |
| 8. | "Equivalent e-document" means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation & Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules,2016. |
| 9. | 'Digital KYC process' has to be carried out as stipulated in the MPL Rules, 2005.  |

### C. Clarification / Guidelines on filling 'Contact Details' section

1. Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
2. Do not add 'D' in the beginning of Mobile number.

### D. Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person, if available

### E. Clarification on Minor

1. Guardian details are optional for minors above 10 years of age for opening of bank account only
2. However, in case guardian details are available for minor above 10 years of age, the same (or C-KYCR number of guardian) is to be uploaded.

**CHECK LIST FOR FILLING KYC FORM (List of documents to be Submitted) - For Individual**

	Acceptable Documents (Self attested copies required)	CKYC Code	Please Tick
PAN card	of Account Holder		
Photograph	One Colored Front Face Photograph on photographic Paper (Passport Size)		
Proof of Identity (Any One)	1. Valid Passport (Name, Address & Photo page)	A	
	2. Voter ID (front and back)	B	
	3. PAN Card	C	
	4. Valid Driving License (Name, Address & Photo page)	D	
	5. Unique identification number (UID) (Aadhaar) [Aadhar consent is mandatory, please refer our website for consent format]	E	
	6. Other <sup>1</sup> (Pls. Specify)_____	Z	
Proof of Address (Any One)	1. Unique identification number (UID) (Aadhaar) [Aadhar consent is mandatory, please refer our website for consent format]	01	
	2. Valid Passport (Name, Address & Photo page)	02	
	3. Valid Driving License (Name, Address & Photo page)	03	
	4. Voter ID (front and back)	04	
	5. Electricity Bill (not more than 2 months old)	S01	
	6. Resident Landline Tel. Bill (not more than 2 months old)	S02	
	7. Registered Lease/Leave & License Agreement	S05	
	8. Other* (Pls. Specify)_____	99	
Bank Proof Provide for all the Bank Account Mentioned (Any One)	1. Bank Statement / Bank Passbook with cheque leaf (not more than 2 months old, seal & signature of Bank Official)	specifying name of the Customer, and IFSC Code of the bank	
	2. Banker's Certificate on letter head of the Bank (ORIGINAL)		
	3. Cancelled Personalized Cheque leaf		
Proof of Income (Any One)	1. Copy of ITR Acknowledgement		
	2. Copy of Annual Accounts		
	3. In case of salary income - Salary Slip, Copy of Form 16		
	4. Net-worth certificate		
	5. Copy of Demat Account Holding Statement		
	6. Bank Account Statement for last 6 months reflecting income		
GSTIN	Kindly provide the GST number in place provided in additional KYC for Demat and Trading account along with the copy of GST registration certificate.		

**Important Instructions**
**General:**

- Trading Account will be in the name of First/Sole holder of Demat and/or Bank A/c only
- Thumb impression and signatures other than English, 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
- Witness should be a person other than co-holder / joint holder
- The applicant should authenticate any corrections/ alteration in the account opening form
- All the fields in the Form must be filled up otherwise the Form may be rejected
- The Applicant has to sign wherever sign mark F,S,T is mentioned {F-First Holder, S-Second Holder, T-Third Holder}
- In case of Second or Third Holder applying for demat account, download the Know Your Client (KYC) form from our website and submit along with AOF, with proofs.
- Signature should be preferably in black ink. In case of any correction/cancellation, please provide counter signature on the left side of the page.

**Bank Details:**

- Cheque/DD towards Registration fees & other charges should be drawn in favour of "Torus Financial Markets Private Limited"
- It is mandatory to provide complete All Bank Accounts' details. In absence of complete details, form may be rejected.

**Demat Account:**

- For Demat Account, Joint Holder and Nominee cannot be the same person
- Photographs to be signed across and pasted (Not Stapled) for all the holders in Demat as well as the nominee and his/her guardian
- In case of joint applicants for Demat Account, copy of PAN, Proof of Address and Proof of Identity for all Applicants is mandatory
- Demat Account cannot be linked with Trading Account where minor is the joint holder in Demat account

**1. PERSONAL DETAILS** (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>			
Father / Spouse Name*	<input type="text"/>			
Mother Name	<input type="text"/>			
PAN*	<input type="text"/>			
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> <input type="text"/> )		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian	<input type="checkbox"/> Person of Indian Origin	
	<input type="checkbox"/> Foreign National			



**2. TICK IF APPLICABLE**  RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA

ADDITIONAL DETAILS REQUIRED\* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence\* \_\_\_\_\_  
 ISO 3166 Country Code of Birth\* \_\_\_\_\_ Place / City of Birth\* \_\_\_\_\_  
 Tax Identification Number or equivalent (If issued by jurisdiction)\* \_\_\_\_\_

**3. PROOF OF ADDRESS (PoA)\***

**3.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS** (Please see instruction C at the end. Certified copy of any one of the following Proof of Identity need to be submitted).

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

<input type="checkbox"/> A - Passport Number	<input type="checkbox"/> C-Driving Licence D-	<input type="checkbox"/> E-National Population Register Letter	Proof Number _____
<input type="checkbox"/> B- Voter ID Card	<input type="checkbox"/> NAREGA Job Card	<input type="checkbox"/> F-Proof of Possession of Aadhaar	<input type="text"/>
<input type="checkbox"/> II. E-KYC Authentication	<input type="checkbox"/> III. Offline verification of Aadhaar <input type="text"/>		

**Address**

Line 1\*   
 Line 2   
 Line 3   
 District\*  Pin / Post Code\*  State  City / Town / Village\*  Country

**3.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS\***(Please see instruction F at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

<input type="checkbox"/> A - Passport Number	<input type="checkbox"/> C-Driving Licence D-	<input type="checkbox"/> E-National Population Register Letter	Proof Number _____
<input type="checkbox"/> B- Voter ID Card	<input type="checkbox"/> NAREGA Job Card	<input type="checkbox"/> F-Proof of Possession of Aadhaar	<input type="text"/>
<input type="checkbox"/> II. E-KYC Authentication	<input type="checkbox"/> III. Offline verification of Aadhaar <input type="text"/>		
<input type="checkbox"/> IV. Deemed proof of address : _____			

**Address**

Line 1\*   
 Line 2   
 Line 3   
 District\*  Pin / Post Code\*  State  City / Town / Village\*  Country

**4 CONTACT DETAILS** (All communication will be sent on provided Mobile No./E-Mail Id) (Please refer instruction G at the end)

Tel. (Off) - Mobile -  
 Tel. (Res) - Email ID

**5. REMARKS (If any) :** \_\_\_\_\_

**6. APPLICANT DECLARATION :** I hereby declare that the details furnished above are true and correct to the best of my 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 aware that I may be held liable for it. I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number / address.

Date : -- Place :

**F2**

Signature / Thumb Impression of Applicant  
Signature as per our record

**Office use only**

Torus Financial Markets Pvt. Ltd - POS:1100094800 / CKYC: \_\_\_\_\_

**Documents Received**

<input type="checkbox"/> Certified Copies	<input type="checkbox"/> Digital KYC Process
<input type="checkbox"/> E-KYC data received from UDAI	<input type="checkbox"/> Equivalent e-document
<input type="checkbox"/> Data received from Offline Verification	<input type="checkbox"/> Video Based KYC

IPV Done  on / /

Employee Name \_\_\_\_\_  
 Designation \_\_\_\_\_  
 Code \_\_\_\_\_  
 Branch \_\_\_\_\_  
 Signature \_\_\_\_\_



1. PERSONAL DETAILS (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>			
Father / Spouse Name*	<input type="text"/>			
Mother Name	<input type="text"/>			
PAN*	<input type="text"/>			
Date of Birth*	<input type="text"/>			
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> <input type="text"/> )		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian	<input type="checkbox"/> Person of Indian Origin	
	<input type="checkbox"/> Foreign National			



2. TICK IF APPLICABLE  RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA

ADDITIONAL DETAILS REQUIRED\* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence\* \_\_\_\_\_  
 ISO 3166 Country Code of Birth\* \_\_\_\_\_ Place / City of Birth\* \_\_\_\_\_  
 Tax Identification Number or equivalent (If issued by jurisdiction)\* \_\_\_\_\_

S1 Signature / Thumb Impression

**3. PROOF OF ADDRESS (PoA)\***

3.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction C at the end. Certified copy of any one of the following Proof of Identity need to be submitted).

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

<input type="checkbox"/> A - Passport Number	<input type="checkbox"/> C-Driving Licence D-	<input type="checkbox"/> E-National Population Register Letter	Proof Number _____
<input type="checkbox"/> B- Voter ID Card	<input type="checkbox"/> NAREGA Job Card	<input type="checkbox"/> F-Proof of Possession of Aadhaar	<input type="text"/>
<input type="checkbox"/> II. E-KYC Authentication <input type="checkbox"/> III. Offline verification of Aadhaar <input type="text"/>			

**Address**

Line 1\*   
 Line 2   
 Line 3   
 District\*  Pin / Post Code\*  State  City / Town / Village\*  Country

3.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS\*(Please see instruction F at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

<input type="checkbox"/> A - Passport Number	<input type="checkbox"/> C-Driving Licence D-	<input type="checkbox"/> E-National Population Register Letter	Proof Number _____
<input type="checkbox"/> B- Voter ID Card	<input type="checkbox"/> NAREGA Job Card	<input type="checkbox"/> F-Proof of Possession of Aadhaar	<input type="text"/>
<input type="checkbox"/> II. E-KYC Authentication <input type="checkbox"/> III. Offline verification of Aadhaar <input type="text"/> <input type="checkbox"/> IV. Deemed proof of address : _____			

**Address**

Line 1\*   
 Line 2   
 Line 3   
 District\*  Pin / Post Code\*  State  City / Town / Village\*  Country

4 CONTACT DETAILS (All communication will be sent on provided Mobile No./E-Mail Id) (Please refer instruction G at the end)

Tel. (Off)  -  Mobile  -   
 Tel. (Res)  -  Email ID

5. REMARKS (If any) : \_\_\_\_\_

**6. APPLICANT DECLARATION** : I hereby declare that the details furnished above are true and correct to the best of my 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 aware that I may be held liable for it. I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number / address.

Date :   /   /      
 Place :

S2

Signature / Thumb Impression of Applicant  
 Signature as per our record

**Office use only**

Torus Financial Markets Pvt. Ltd - POS:1100094800 / CKYC: \_\_\_\_\_

**Documents Received**

<input type="checkbox"/> Certified Copies	<input type="checkbox"/> Digital KYC Process
<input type="checkbox"/> E-KYC data received from UDAI	<input type="checkbox"/> Equivalent e-document
<input type="checkbox"/> Data received from Offline Verification	<input type="checkbox"/> Video Based KYC

IPV Done  on   /   /

Employee Name \_\_\_\_\_  
 Designation \_\_\_\_\_  
 Code \_\_\_\_\_  
 Branch \_\_\_\_\_  
 Signature \_\_\_\_\_

1. PERSONAL DETAILS (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PAN*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> <input type="text"/> )		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian	<input type="checkbox"/> Person of Indian Origin	
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T1 Signature / Thumb Impression

2. TICK IF APPLICABLE  RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA

ADDITIONAL DETAILS REQUIRED\* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence\* \_\_\_\_\_  
 ISO 3166 Country Code of Birth\* \_\_\_\_\_ Place / City of Birth\* \_\_\_\_\_  
 Tax Identification Number or equivalent (If issued by jurisdiction)\* \_\_\_\_\_

**3. PROOF OF ADDRESS (PoA)\***

3.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction C at the end. Certified copy of any one of the following Proof of Identity need to be submitted).

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

<input type="checkbox"/> A - Passport Number	<input type="checkbox"/> C-Driving Licence D-	<input type="checkbox"/> E-National Population Register Letter	_____ Proof Number _____
<input type="checkbox"/> B- Voter ID Card	<input type="checkbox"/> NAREGA Job Card	<input type="checkbox"/> F-Proof of Possession of Aadhaar	<input type="text"/>
<input type="checkbox"/> II. E-KYC Authentication	<input type="checkbox"/> III. Offline verification of Aadhaar	<input type="text"/>	

**Address**

Line 1\*   
 Line 2   
 Line 3   
 District\*  Pin / Post Code\*  State  City / Town / Village\*  Country

3.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS\*(Please see instruction F at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

<input type="checkbox"/> A - Passport Number	<input type="checkbox"/> C-Driving Licence D-	<input type="checkbox"/> E-National Population Register Letter	_____ Proof Number _____
<input type="checkbox"/> B- Voter ID Card	<input type="checkbox"/> NAREGA Job Card	<input type="checkbox"/> F-Proof of Possession of Aadhaar	<input type="text"/>
<input type="checkbox"/> II. E-KYC Authentication	<input type="checkbox"/> III. Offline verification of Aadhaar	<input type="text"/>	<input type="checkbox"/> IV. Deemed proof of address : _____

**Address**

Line 1\*   
 Line 2   
 Line 3   
 District\*  Pin / Post Code\*  State  City / Town / Village\*  Country

4 CONTACT DETAILS (All communication will be sent on provided Mobile No./E-Mail Id) (Please refer instruction G at the end)

Tel. (Off) - Mobile -  
 Tel. (Res) - Email ID

5. REMARKS (If any) : \_\_\_\_\_

**6. APPLICANT DECLARATION** : I hereby declare that the details furnished above are true and correct to the best of my 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 aware that I may be held liable for it. I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number / address.

Date :   /   /    Place :

T2

Signature / Thumb Impression of Applicant  
 Signature as per our record

**Office use only**

Torus Financial Markets Pvt. Ltd - POS:POS:1100094800 / CKYC: \_\_\_\_\_

**Documents Received**

<input type="checkbox"/> Certified Copies	<input type="checkbox"/> Digital KYC Process
<input type="checkbox"/> E-KYC data received from UDAI	<input type="checkbox"/> Equivalent e-document
<input type="checkbox"/> Data received from Offline Verification	<input type="checkbox"/> Video Based KYC

IPV Done  on   /   /

Employee Name \_\_\_\_\_  
 Designation \_\_\_\_\_  
 Code \_\_\_\_\_  
 Branch \_\_\_\_\_  
 Signature \_\_\_\_\_



Torus Financial Markets Private Limited  
 C- Wing, 1802, Lotus Corporate Park, Off Western Express Highway, Jai Coach, Goregaon, East Mumbai- 400063.

**DEPOSITORY ACCOUNT(S) DETAILS**

**Important Instructions** • Leave this Client ID blank if you are opening DP Account along with Trading Account.

Depository Name **CDSL** • The First Holder in the DP Account must be the Trading Account Holder.

Depository Participant Name: Torus Financial Markets Private Limited

Depository Name: **CDSL** DP ID: \_\_\_\_\_ Client ID: \_\_\_\_\_ Trading Code: \_\_\_\_\_

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"/> NRI	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Individual Minor	<input type="checkbox"/> Individual Margin Trading A/C (MANTRA)
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Individual HUF / AOP	Others(specify) _____	
	<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 Depository Receipts	<input type="checkbox"/> Others (specify) _____

(To be filled by the applicant in BLOCK LETTERS in English with black ballpoint pen). I/We request you to open a Demat Account in my / our name as per the following details:

Name *	_____
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\*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.

**Holders Details**

Sole/First Holder's Name \_\_\_\_\_

UID \_\_\_\_\_ PAN \_\_\_\_\_

Second Holder's Name \_\_\_\_\_

UID \_\_\_\_\_ PAN \_\_\_\_\_

Third Holder's Name \_\_\_\_\_

UID \_\_\_\_\_ PAN \_\_\_\_\_

**OTHER DETAILS**

**Sole / First Holder**

Gross Annual Income:  Below 1 Lac  1-5 Lac  5-10 Lac  10-25 Lac  >25 Lacs

Net-worth in ₹ \_\_\_\_\_ (\*Net worth should not be older than 1 year) as on (date)

Occupation:  Private Sector Service  Public Sector  Government Service  Business  Professional  Agriculturist  
 Retired  Housewife  Student  Forex Dealer  Others \_\_\_\_\_

Please tick, If Applicable:  Politically Exposed Person  Related to a Politically Exposed Person

**Second Holder**

Gross Annual Income:  Below 1 Lac  1-5 Lac  5-10 Lac  10-25 Lac  >25 Lacs

Net-worth in ₹ \_\_\_\_\_ (\*Net worth should not be older than 1 year) as on (date)

Occupation:  Private Sector Service  Public Sector  Government Service  Business  Professional  Agriculturist  
 Retired  Housewife  Student  Forex Dealer  Others \_\_\_\_\_

Please tick, If Applicable:  Politically Exposed Person  Related to a Politically Exposed Person

**Third Holder**

Gross Annual Income:  Below 1 Lac  1-5 Lac  5-10 Lac  10-25 Lac  >25 Lacs

Net-worth in ₹ \_\_\_\_\_ (\*Net worth should not be older than 1 year) as on (date)

Occupation:  Private Sector Service  Public Sector  Government Service  Business  Professional  Agriculturist  
 Retired  Housewife  Student  Forex Dealer  Others \_\_\_\_\_

Please tick, If Applicable:  Politically Exposed Person  Related to a Politically Exposed Person

Details of Guardian (in case the Demat Account holder is minor)

Guardian's

Name

PAN  Relationship with the applicant

**TRADING PREFERENCES - Exchange (Segments)**

Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client

NSE,BSE	Segements	Client signature	All Exchanges	Segements	Client signature
	Cash				All Segments
F&O			MCX,NCDEX	Commodity Derivative	
Currency					
Debt					

**BANK ACCOUNT(S) DETAILS**

Bank Name	Branch Name /Add/Code (city, state, country, pincode)	Bank A/c No.	A/c Type (S/C/O)+	MICR Code (9 digit)	IFSC Code (11 character)

\* S-Saving C-Current (will not be able to do online fund transfers) O- Others-In case of NRI/NRE/NRO †For Demat A/c & Default for Pay out  
 (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book 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 options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.

**DEPOSITORY ACCOUNT(S) DETAILS, IF AVAILABLE**

Depository Participant Name	Depository Name (CDSL)	DP ID	Beneficiary ID (BO ID)

<b>SMS Alert Facility</b> Refer to Annexure for Terms & Conditions - cum - registration / modification form for receiving SMS Alerts from CDSL	MOBILE NO. (as specified in KYC form) [(Mandatory , if you are giving Power of Attorney ( POA)] (if POA is not granted & if you do not wish to avail of this facility, please cancel this option).	<input checked="" type="checkbox"/>
Easi	To register for easi, please visit our website <a href="http://www.cdslindia.com">www.cdslindia.com</a> . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.	<input checked="" type="checkbox"/>

**ADDITIONAL DETAILS (if not marked, the default option would be 'YES')**

I/We wish to receive Contract Note and other related reports/statements/documents in electronic mode. YES  NO

E-mail/SMS alerts from exchanges/depositories will be sent on Mobile no & Email id mentioned in KYC form:  
 Mobile No. belongs to: Self  Spouse  Dependent Children  Dependent Parents  Owner's PAN   
 Email. belongs to: Self  Spouse  Dependent Children  Dependent Parents  Owner's PAN

I/We wish to update my GSTIN number YES  NO   
 If yes, please provide your 15 digit GSTIN No.

**Client Classification:-**

Please mention commodity/ name and select the classification. If no option is selected, Retail - Individual will be considered as default.

Name of the Commodity	Physical Commodity Trader / Value Chain Participant	Processor / Miller	Retail - Individual	Farmer(Only for Agri-commodity)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I/We wish to avail of the facility of internet trading/ wireless technology (please specify)

YES  NO

**MANDATORY**

Number of years of Investment/Trading Experience      Years       No Experience

I / We instruct the DP to receive each and every credit in my / our account      [Automatic Credit]  
(If not marked, the default option would be 'Yes')       Yes       No

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       No

**Account Statement Requirement**       As per SEBI Regulation       Daily       Weekly       Fortnightly       Monthly

I / We request you to send Electronic Transaction-cum-Holding Statement at the email       Yes       No

ID : as specified in KYC form

I / We would like to share the email ID with the RTA       Yes       No

I / We would like to receive the Annual Report       Physical /       Electronic /       Both Physical and Electronic  
(Tick the applicable box. If not marked the default option would be in Physical)

I / We wish to receive dividend / interest directly in to my bank account as given below through ECS?       Yes       No  
(If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]

I/We authorize and agree to receive call or SMS or email or WhatsApp from **TFMPL** & its associates  
with reference to products and offerings. This authorization shall override my/our registration  
for DND/DNC/NDNC, if any.       Yes       No

I/We authorize Torus Financial Markets Pvt. Ltd and its Group Entities, its agents/representatives and other business partners to  
collect and share the information provided by you/customer with the TFMPL group Entities and other business partners for the  
purposes as detailed under the Privacy Policy and the Terms of Use. I/we declare and acknowledgment that I/we have read and  
understood the terms of the Privacy Policy and terms of Use updated on the website and shall bound by the same.       Yes       No

**DEALINGS THROUGH AUTHORISED PERSON AND OTHER STOCK BROKERS**

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

Authorised Person Name

SEBI Registration number      NSE INZ \_\_\_\_\_      BSE INZ \_\_\_\_\_

Registered Office            City/Town/Village

Address            State

Pin Code            Country       Tel No. Fax

Mobile No. \_\_\_\_\_      Email id \_\_\_\_\_      Website \_\_\_\_\_

Whether dealing with any other stock broker/ authorised person (if case dealing with multiple stock brokers/authorised person, provide details of all	Name of stock broker _____
	Name of Authorised Person, if any _____
	Client Code _____ Exchange _____
	Details of disputes/dues pending from/to such stock broker/authorised person: _____

**PAST ACTIONS**

Details of any action proceedings initiated/pending taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partnes/promoters/whole time directors/authorized persons in charge of dealing in securities/ commodities during the last 3 years	
--	--

**INTRODUCER DETAILS (optional)**

Name of Introducer

Status of Introducer       Remiser       Authorised Person       Existing Client       Employee       Others (please specify)

Authorised Person / Client Code / Employee Code (SAP ID)

Address

City/Town/Village       Pin Code

State

Tel No.

Signature of Introducer

**Any other information:** \_\_\_\_\_

**NOMINATION FORM - Annexure A**  
(To be filled in by Individual applying singly or jointly)

**MANDATORY**

DP ID: 12094800	BO ID								Client Code	Date	D	D	M	M	Y	Y	Y	Y
-----------------	-------	--	--	--	--	--	--	--	-------------	------	---	---	---	---	---	---	---	---

to,  
Torus Financial Markets Private Limited  
C- Wing, 1802, Lotus Corporate Park, Off Western Express Highway, Jai Coach, Goregaon, East Mumbai- 400063.

Dear Sir/Madam,

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.

Nomination can be made upto three		Nominee - 1	Nominee - 2	Nominee - 3
Name of the nominee(s) Mr./Ms)				
Share of each Nominee	Equally	%	%	%
	[If not equally, please specify percentage]	Any odd lot after division shall be transferred to the first nominee mentioned in the form.		
*Relation with the BO:				
Address of nominee(s)				
Telephone No./Mobile No.				
Email Id:				
Nominee Identification details <small>[Please tick any one of following and provide details of same]</small>				
<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID				
Date of Birth (Mandatory if Nominee is a minor):				
Name of Guardian of Nominee (if the nominee is minor):				
Address of Guardian of Nominee				
Telephone No./Mobile No.				
Email Id:				
Guardian Identification details <small>[Please tick any one of following and provide details of same]</small>				
<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID				
*Relationship of the Guardian with the Nominee:				

Details of the Witness	First Witness
Name of Witness	
Address of Witness	
Signature of Witness	<b>W1</b>

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

**\* Marked is Mandatory field**

This nomination shall supersede any prior nomination made by me/us and also any testamentary document executed by me/us.

	First/ Sole Holder	Second Holder	Third Holder
Name			
Signature	<b>F9</b>	<b>S3</b>	<b>T3</b>

**(To be filled by DP)**

Nomination Form accepted and registered wide Registration No. \_\_\_\_\_ dated \_\_\_\_\_.

Place: \_\_\_\_\_ Date: \_\_\_\_\_

Photocopy of this Nomination form is given to the client as acknowledgement.

For Depository Participant  
(Authorised Signatory)

**NOMINATION FORM - Annexure B**  
Declaration Form for opting out of nomination

DP ID: 12094800	BO ID									Client Code		Date	D	D	M	M	Y	Y	Y	Y
-----------------	-------	--	--	--	--	--	--	--	--	-------------	--	------	---	---	---	---	---	---	---	---

To,  
Torus Financial Markets Private Limited  
C- Wing, 1802, Lotus Corporate Park, Off Western Express Highway, Jai Coach, Goregaon, East Mumbai- 400063.

Dear Sir/Madam,

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.

	First/ Sole Holder	Second Holder	Third Holder
Name			
Signature	F10	S4	T4

**OPTION FORM FOR ISSUE OF DIS BOOKLET**

To,  
Torus Financial Markets Private Limited  
1C- Wing, 1802, Lotus Corporate Park, Off Western Express Highway,  
Jai Coach, Goregaon East, Mumbai- 400063.  
Email: customer.support@torusgroup.in/Grievance@torusgroup.in

Dear Sir / Madam,

I / We hereby state that: [Select one of the options given below]

**OPTION 1:**

I/We **REQUIRED YOU TO ISSUE** Delivery Instruction Slip (DIS) booklet to me/us immediately on opening my/our CDSL account though I/We have issued Power of Attorney (POA) in favour of Torus Financial Markets Private Limited for executing delivery instructions for setting stock exchange trades {Settlement related transactions} effected through you.

**OPTION 2:**

I/We **DO NOT REQUIRE** the Delivery Instruction Slip (DIS) for the time being, since I have issued Power of Attorney (POA) in favour of Torus Financial Markets Private Limited for executing delivery instructions for setting stock exchange trades {Settlement related transactions} effected through you. However, the Delivery Instruction Slip (DIS) booklet should be issued to me/us immediately on my/our request at any later date.

	First/ Sole Holder	Second Holder	Third Holder
Name			
Signature	F11	S5	T5

**IMPORTANT:** Welcome Kit and Password for your account will be sent on your registered email ID, login ID and alerts on mobile no. as mentioned in KYC form.



Fee Head		DP Charges	
1.	<b>Annual Maintenance Charges (AMC)</b> (levied on monthly basis) Basic Services Demat Account BSDA (Only for Individual having one demat account): A. If Holding value at any date is not greater than Rs. 50,000/- B. If Holding value at any date between Rs. 50,001/- to Rs. 200,000/- C. If Holding value in Debt segment at any date is not greater than Rs. 1,00,000/- D. If Holding value in Debt segment at any date between Rs. 1,00,001/- to Rs. 200,000/-	Category	Charges
		<input type="checkbox"/> BSDA	A. Nil B. ₹ 100/- p.a. C. Nil D. ₹ 100/- p.a.
	<b>Regular Demat Account (Non BSDA):</b> For Individual /HUFs / Trust For NRIs / Foreign Nation For Corporate / Other Non Individuals	<input type="checkbox"/> Non BSDA	₹ 400/- p.a. ₹ 1000/- p.a.
	If not marked, the default option would be non BSDA Account (for individuals only)		
	<b>Lifetime Free AMC* (New)</b> For Individual /HUFs / Trust (Refundable deposit of Rs. 2500/-)	<input type="checkbox"/> Life time AMC	Nil
2.	<b>Transaction Charges: SELL (Market &amp; Off Market)</b>		
	For instructions given in physical form	0.04 % of transaction value or Minimum of ₹ 27/- per ISIN	
	For instructions received through Internet/ online trading through Torus Financial Markets Pvt. Ltd.	0.04 % of transaction value or Minimum of ₹ 27/- per ISIN	
	Extra charges for processing of instructions submitted on the execution date (accepted at Client's risk, only for physical instructions)	₹ 10/- per ISIN	
3.	<b>Dematerialisation:</b> For each request form: ₹ 30/-   Extra for each certificate: ₹ 5/-		
	<b>Rematerialisation:</b> A fee of `40/- for 100 securities or part thereof or a flat fee of `25/- per certificate whichever is higher in addition to Registered post charges, subject to minimum `25/-		
4.	Closure of Account, Failed instruction Charges, Custody Charges, Account Opening, Request for Modification of details like Bank Account/Client Address.	Nil	
5.	Pledge Set up/Removal/Confirmation/Innovation		0.05% of transaction value or min ` 30/-
	Margin Pledge/Unpledge: ` 5/- per ISIN Invocation of Margin Pledge/Repledge: ` 5/- per ISIN	Margin Repledge/Re-Unpledge: ` 1/- per ISIN Client securities under Margin Funding' a/c: ` 12/- per ISIN	
6.	<b>Additional Account Statements:</b> Non BSDA For Individuals/HUFs/Corporate For NRIs / Foreign Nationals (at Indian address) For NRIs / Foreign Nationals (at foreign address) Physical Statement (for BSDA client-Two statements will be provided free of cost in billing cycle)		₹ 40/- per statement ₹ 100/- per statement ₹ 1000/- per statement  ₹ 25/- per statement
	7. Re-issue of DIS booklet		₹ 50/-

- Deposit amount will be refunded only on closer of Demat Account by credit to the ledger of client.
- There will be a charge of ₹100/- for dishonour of any cheque or unsuccessful attempt to recover payment through direct debit or ECS. The depository services are liable to discontinuation if TFMP is unable to recover charges from the customer, for any reason whatsoever. There will be a charge of ₹250/- for resumption of services in such cases. TFMP will resume services after a minimum of 3 working days from the date of receipt. Any service, which is not mentioned above, will be charged separately as per the rates applicable from time to time.
- Torus Financial Markets Pvt. Ltd. reserves the right to revise the tariff structure from time to time with a notice of 30 days. This notice may be given by ordinary post or by an advertisement in a National Daily or by email to customers. We shall charge the Depository AMC only if there is any holding in the account on the last day of the month OR if there is any transaction in that particular month. The AMC will be charged at the beginning of every month for previous month. We understand that in case the demat account is requested to be closed during the month, any charges due till that date of request, the same will be charged to me/us. GST and other government/ statutory levies will be charged extra.
- Holding statement, Transaction statement, changes request conformation and Bills may be sent to the email ID of the client, registered in our system and by posting on the website of www.rsec.co.in. (a) In case client(s) give(s) the written request for physical copy of the transaction statements, the same shall be provided at the address of the client(s) registered in our systems. (b) The Client(s) will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the internet/email account. (c) The Client(s) is/are aware that the transaction statement may be accessed by other entities in case of the confidentiality/secretory of the login name and password is compromised. (d) In case transaction statements are sent by email, the Client(s) shall immediately inform the DP about change in email address, if any. (e) DPs and Client(s) shall have the right to terminate such service provided a written notice is given atleast 10 days in advance to the other party.
- For BSDA (Circular No. CIR/MRD/DP/22/2012 dated August 27, 2012): a) The individual shall have only one BSDA in his/her name across all depositories (CDSL). b) Value of securities held in BSDA shall not exceed ₹2,00,000/- (Rupees Two Lakhs) at any point of time. c) If the value of holding in such BSDA exceeds the prescribed criteria at any date, the DPs may levy charges as applicable to regular accounts (non BSDA) from that date onwards. d) All BOs opting for the facility of BSDA, shall register their mobile number for availing the SMS alert facility for debit transactions. e) In case the individual already has BSDA or open a new BSDA on a later date, then status of this demat account as BSDA will cease to exist. f) Refer 'BSDA Terms and Conditions' for more details. g) Two statements will be provided free of cost in billing cycle. Additional Physical statement will be charged ₹25/- per statement, whereas electronic statement will be provided free of charge.

	First/Sole Holder or Guardian (In case of Minor)	Second Holder	Third Holder
Signatures			
Name	F12	S6	T6



1	<b>APPLICATION PROCESSING CHARGES: ` 950/-+ (Inclusive of GST)</b>		+ In case of NRI ` 3500/-
<b>Brokerage Scheme Name (Opted): _____</b>			
<b>Capital Market Segment (NSE &amp; BSE)*</b>		<b>Brokerage % for Delivery Trades</b>	<b>Brokerage % for Intra day Trades</b>
First Leg-->			
Second leg same day		Not Applicable	
Minimum (paisa per share)			
<b>Derivatives Segment (NSE &amp; BSE )*</b>		<b>Brokerage % for Trades in Future</b>	<b>Brokerage ( ` Per lot) for Trades in Option</b>
First Leg-->			
Second leg same day			
Second leg other day			
<b>Currency Segment (NSE &amp; BSE)</b>			
<input type="checkbox"/> CURR 3000 or <input type="checkbox"/> _____ Future _____ Option _____			
<b>In case Brokerage Scheme NOT opted, SAC R-Fixed 1 brokerage scheme will be assigned. (Del: 0.50%, Intraday / Futures: 0.05%, Options: Rs. 100 per lot).</b>			
*Minimum brokerage per share would be levied as applicable in respective schemes.			
Intraday brokerage will be levied on both sides for all segments depending upon the brokerage scheme.			
Levies such as GST, Stamp duty, Transaction Charges, Other charges will be charged as per norms defined from time to time.			
<b>CURR 3000:</b> Future: 0.03% & Options: Rs. 10 per lot. COMM5000 brokerage scheme will be assigned (Intraday/Futures: 0.05%, Del.: 0.50%)			
2	<b>DELAYED PAYMENT INTEREST (DPI) :</b>		
The Delayed Payment Interest will be levied at the rate of 21% p.a. (plus taxes, if any applicable) for all the debits, from payin /payout date, compounded monthly. Delayed Payment Interest will be charged on the debits in client ledger.			
For the purpose of debit, it will include:-			
1. Debit against cash / commodity market transaction with or without NRML      2. Debit against Margin short-fall,			
3. Debit against MTM on F&O transaction/ Commodity Future Transaction      4. Debit on account of DP AMC Fees,			
5. Debit on account of Brokerage due (including statutory charges)      6. Debit on account of "Delayed Payment Interest".			
Any Non- cash collateral balance in your account will not be adjusted against the cash margin requirement in F&O segment for the purpose of Debit Calculation. Marking of Pledge is purely for Exposure & Risk management Purpose only.			
<b>Guidelines for DPI:-</b>			
1. The Delayed Payment Interest will be accrued (at applicable rates) everyday (including holiday) at EOD on the debit balance in client ledger.			
2. On first week of every month, a debit entry will be passed in client ledger for the total Delayed Payment Interest accrued for the previous month.			
3. Once the DPI is posted in client ledger & because of that client ledger is in debit, DPI will be charged on that debit as well.			
4. Accrued Delayed Payment Interest during the month will be deducted (on daily basis) from Exposure Limits allotted to client for trading purpose & from the funds available for withdrawals.			
3	<b>OTHER CHARGES:</b>		
Particulars		Charges ( ` )	
Order placed by client at the Call & Trade desk (Call Centre)		20 per call (First 20 calls per month will be free)	
Enquiry Charges (First five enquiries are free every month)		5 per enquiry	
Physical copy of duplicate contract notes		40 per contract note	
Physical copy of duplicate Ledger statement		40 per statement	
4	No transaction charges will be levied for the following mode of funds transfer till further notification: NEFT/RTGS/UPI		

Client Name \_\_\_\_\_

Date 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

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Signature / Thumb Impression of Applicant \_\_\_\_\_

THIS POWER OF ATTORNEY is made on the date, and place as mentioned in the Schedule hereunder by the persons mentioned in the Schedule under title "Demat Account Holders" (hereinafter referred to as "Demat Account Holders") IN FAVOUR OF Torus Financial Markets Pvt. Ltd., a Company incorporated under the Companies Act, 1956 having its Registered Office at Torus Financial Markets Pvt. Ltd. Regd. Office - 1501, Lodha Aria CHS, CS No.: 6/207, TJ Road, Sewri, Mumbai - 400 015 (hereinafter referred to as "Attorney" / "Torus Financial Markets Pvt. Ltd." which expression shall unless repugnant to the context thereof shall mean and include its successor) acting through its directors, officers or such other persons as may be authorised by the Attorney from time to time in this regard

**WHEREAS:**

The persons mentioned in the Schedule under title "Client Details" (hereinafter referred to as "the Client") has opened/is desirous of opening a Trading Account with Torus Financial Markets Pvt. Ltd..

The Demat Account Holders hold demat account/s with Torus Financial Markets Pvt. Ltd., a Depository Participant details whereof are mentioned in the Schedule hereunder under title "Demat Account Details" (hereinafter referred to as "the Demat Account").

The Client is also the first holder/sole holder of the Demat Account; (the Account Holders).

To facilitate proper execution of various transactions carried out by the Client, including but not limited to transactions placed by the Clients for Shares, Securities, Derivatives, Futures & Options Contracts, Bonds, IPOs /Public Offers of various Companies and in various Mutual Fund Schemes and such other Services /Products/Facilities availed by the Client from time to time.

With respect to these aforesaid activities, the Client is now desirous of constituting and appointing Torus Financial Markets Pvt. Ltd. as their lawfully constituted attorney and confer upon it the powers hereinafter stated.

**NOW KNOW ALL AND THIS POWER OF ATTORNEY WITNESSETH** that I/we, the Account Holders hereby nominate, appoint and constitute Torus Financial Markets Pvt. Ltd., acting through its directors, officers or employees or such other persons as may be authorised by Torus Financial Markets Pvt. Ltd. in this regard from time to time as the true and lawful attorney to do the following acts, deeds, and things for and on my/our behalf; namely:

1. To operate and debit the Demat Account(s) which is in my/our name for facilitating transactions by/through TFMPPL to meet all margin / settlement obligations and for recovering any outstanding amounts due from me/us to TFMPPL and for any of the facilities / services offered by TFMPPL and availed by me/us and to do the following:
  - a. to transfer securities from the Demat Account for the purpose of delivering the same in respect of securities sold by me/us or other obligations in respect of any transactions done or any of the Exchange(s) by me/us;
  - b. to transfer securities from my/our Demat Account to Demat account(s) of the Attorney mentioned herein below or to any other accounts as may be updated/amended by proper communication without executing a new Power of Attorney every time.
  - c. to block and/or hold all or any of the Securities lying in the Demat Account(s) including in the Attorney's internal systems belonging to me/us or in such other manner as the Attorney may determine, without any further instructions to transfer all the said securities to the Attorney or any account(s) of the Attorney or in accordance with the instructions of the Attorney;
  - d. subject to permitted laws, to create/mark a lien, charge or pledge (including Margin Pledge/repledge) on all or any of the securities lying in the Demat Account(s) including in TFMPPL internal systems belonging to me/us or in such other manner as the Attorney may determine, without any further instructions to transfer all the said Securities to the Attorney or any account(s) of the Attorney or in accordance with the instructions of the Attorney;

- e. to sign, deliver, endorse and/or acknowledge all instructions, forms, transfer deeds, depository forms and instruments, slips, receipts and other instruments and writings which are required, necessary or advisable for performing all or any of the powers or authorities hereby conferred;
- f. To effect all non-cash corporate actions in respect of the securities held in my/our Demat Account, if applicable;
2. To sign the application forms, composite application forms, applications and the required documents for us/me to apply, subscribe and /or renounce in the Initial Public Offering (IPO), follow-on issues, further issues, rights issue or other offerings of the securities and to facilitate in investment and redemption units of mutual fund schemes;
3. To do all such acts, deeds and things as may be necessary for or incidental to the powers granted hereby;

AND GENERALLY to do, perform and execute all such other acts, deeds, instruments, matters and things on my/our behalf as the said Attorney may think fit to all intents and purposes as I/we myself/ourselves could do if I/we were personally present AND for the further, better and more effectually doing, effecting, executing and performing the several matters and things aforesaid AND I/we hereby ratify and confirm and agree and undertake to ratify and confirm whatsoever the said Attorney shall lawfully do or cause to be done by virtue of these presents.

The Attorney is authorized to send to me / us consolidated summary of scrip wise buy and sell positions by way of short messaging services or e-mails on a daily basis.

I/we hereby ratify and confirm any and all transactions, trades or dealings effected in and for my/our above mentioned accounts by my/our Attorney.

This Power of Attorney and authorization is in addition to (and in no way limits or restricts) any and all rights which the Attorney may have under any other agreement or agreements between the Attorney and me/us.

The Attorney hereby agrees to return to me/ us the Securities that may have been received by it erroneously or that it was not entitled to receive.

This Power of Attorney and authorization shall not be affected by lapse of time. It shall continue in full force and effect until the Attorney shall receive written notice of revocation thereof, signed by me/us;

This Power of Attorney shall be terminated by me/us without any notice period and in the event of termination thereof by my/our death/dissolution, until the Attorney shall have received actual notice thereof, and such revocation or termination shall in no way affect the validity of this POA, with reference to any transaction(s) initiated by me/us or by my/our Attorney prior to the actual receipt by the Attorney of a notice of such revocation or termination, as above provided.

I/We have read carefully the provisions of this Power of Attorney and understand that it authorizes my/our Attorney, to exercise all rights and powers set forth with respect to my/our Demat Account. I/We understand that anything my/our Attorney may do in the exercise of such rights and powers shall be fully binding upon me/us. The powers hereby given to the Attorney shall be given the widest interpretation.

This Power of Attorney does not intend to give any exclusive rights to the Attorney on the Demat Account.

The powers granted herein together with this POA shall be valid and effective only upon acceptance of the grant by TFMPPL in whose favour the same is granted.

This Power of Attorney shall be governed by the laws of India and shall be subject to the Jurisdiction of the Courts at Mumbai.

This Power of Attorney shall be governed by the laws of India and shall be subject to the Jurisdiction of the Courts at Mumbai.

**Torus Financial Markets Private Limited - Demat Account details**

**NSE - CDSL:** 120948000000069, **NSDL:** CMBP ID - IN545277

**Client Unpaid Securities Account:** CDSL: 1209480000000088

**Torus Financial Markets Private Limited - Bank Account details**

**Name of the Bank & Branch -** HDFC Bank Ltd, Mumbai. **Bank Account Number -** 57500000835623

IN WITNESS WHEREOF I/We have hereunto set and subscribed our respective hands on the day and date as first mentioned in the Schedule

**Client Details**

The schedule hereinabove referred to

Name of the Client	Client Code	<input type="text"/>
Correspondence Add.		

**Bank Account Holder(s)**

First Holder
Second Holder

**Demat Account Holder(s)**

First Holder
Second Holder
Third Holder

**Bank Account Details**

Bank & Branch
Account No.

**Demat Account Details**

Torus Financial Markets Private Limited	
DP ID 12094800	
Client ID	<input type="text"/>

IN WITNESS WHERE OF I/We have hereunto set and subscribed our respective hands on the day and date as first mentioned in the Schedule

Witness Name : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_

Signature : **W2** \_\_\_\_\_

Place: Mumbai

Accepted

For Torus Financial Markets Pvt. Ltd.

Authorised Signatory

Date:

(Required for online trading facility)

I/We am/are registered client with you and dealing in Capital Market/ Derivative Market/ Currency Market. I/We am/are aware that payout / dividend received / credited from the exchange(s) against settlement of transaction as per settlement cycle is available within 1 working day of the payout from the Exchange. It is difficult for me/us to make available the required funds on every pay-in of funds obligation / margin obligation, hence we request you to maintain our account on a running basis and retain the payout received / credit balance in our account for my/our future obligation / margin obligation or other liabilities unless we instruct otherwise. I/We hereby further authorize you to debit / credit / transfer the amounts between the various segments either on the same Exchange and / or Exchanges to meet my/our obligation or various dues payable to you / Exchange(s). If payment of funds is required, I/We shall request you in writing or through the web option for funds withdrawal on the web login. Further it may be noted that if required I/We may revoke this authorization at any time after giving request in writing. This running account authorisation would continue until it is revoked by me/us. The actual settlement of funds shall be done at least once in the preference This running account authorisation would continue until it is revoked by me/us. The actual settlement of funds shall be done at least once in the preference period selected below:

 Once in a calendar Quarter

OR

 Once in a calendar month

While settling the account having outstanding obligations on the settlement date, you may retain the requisite funds towards such obligations and may also retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the exchanges. I/We shall bring any dispute arising from the statement of account or settlement so made to your notice within 7 working days from the date of receipt of funds or statement as the case may be. In case of non receipt of any such communication the statement / settlement of running account shall be considered as final as agreed and accepted by me/us.

**F15**

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Signature / Thumb Impression of Applicant**CONSENT TO USE AADHAAR CARD COPY FOR NEW REGISTRATION**

I understand that I can submit either of the following document copy as an address proof for registration.

- |                    |                |                  |
|--------------------|----------------|------------------|
| a. Voter ID Card   | d. Ration Card | e. Aadhaar Card  |
| b. Driving License | c. Passport    | f. Utility Bills |

I willingly give my consent to TFMPPL to accept copy of my Aadhaar card and proceed with the referred application, further I/we authorise TFMPPL to share the same with exchanges / depositories / regulators if required.

Thanking you,  
Yours Sincerely.

**F16**

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Signature / Thumb Impression of Applicant

## LETTER FOR NSE MFSS / BSE STAR MF

To,

Date 

D	D	M	M	Y	Y	Y	Y
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**Torus Financial Markets Private Limited**C-Wing 1802, Lotus Corporate Park, Off Western Express Highway,  
Jai Coach, Goregaon East, Mumbai - 400063.**Sub: Mutual Fund Service System (MFSS) Facility of NSE/ BSE STAR MF**

Dear Sir,

I / We am / are registered as your client with Client Code as mentioned below for the purpose of trading in the Capital Market Segment.

I / We am / are interested in availing the facility of the following Exchange for the purpose of dealing in the units of Mutual funds Scheme permitted to be dealt with.

NSE MFSS BSE STAR MF 

For the purpose of availing the facility, I / We state that Know Your Client details as submitted by me/us for the securities broking may be considered for this purpose and I / We further confirm that the details contained in same remain unchanged as on date.

I / We am / are willing to abide by the terms and conditions as mentioned in the Circular dated November 24, 2009 and as may be specified by the Exchange from time to time in this regard.

I / We shall also ensure compliance with the requirements as may be specified from time to time by the Securities and Exchange Board of India and/ or Association of Mutual Funds of India (AMFI).

I / We shall read and understand the contents 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 therefore request you to register me/ us as your client for participating in the MFSS/ BSE STAR MF.

**Terms and Conditions**

- The client shall be bound by circulars issued by NSEIL/ BSE, Rules, Regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
- The client shall notify the Participant in writing if there is any change in the information in the 'client registration form' provided by the client to the Participant at the time registering as a client for participating in the New MFSS/ BSE STAR MF or at any time thereafter.
- The client shall submit to the Participant a completed application form in the manner prescribed format for the purpose of placing a subscription order with the Participant.
- The client has read and understood the risks involved in investing in Mutual Fund Schemes.
- On redeem of Demat units the corresponding funds will be credited only to your ledger account only.
- Torus Financial Markets Pvt. Ltd. reserve the right to discontinue any type of transaction with a notice of 15 days in advance.
- The client shall be wholly responsible for all his investment decisions and instruction.
- The client shall ensure continuous compliance with the requirements of the NSEIL, BSE, SEBI and AMFI.
- The Client shall pay to the Participant 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 Participant renders to the Client.
- The client will furnish information to the Participant 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.
- In the event of non-performance of the obligation by the Participant, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL/ BSE or NSCCL/ ICCL.
- In case of any dispute between the Participants and the investors arising out of this facility, NSEIL/BSE and / or NSCCL/ ICCL agrees to extend the necessary support for the speedy redressal of the disputes.

Thanking You.

Yours faithfully

**F17****IMPORTANT:** Welcome Kit and Password for your account will be sent on your registered email ID, login ID and alerts on mobile no. as mentioned in KYC form.

Client Name: \_\_\_\_\_

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**CONFIRMATION OF THE ARRANGEMENT WITH AUTHORISED PERSON**

**VOLUNTARY**

Date

To

Torus Financial Markets Private Limited  
C-Wing 1802, Lotus Corporate Park, Off Western Express Highway,  
Jai Coach, Goregaon East, Mumbai - 400063.

I/we confirm that I/we have been introduced to Torus Financial Markets Pvt. Ltd. by an Authorised Person (AP) (as mentioned below) appointed by TFMPL pursuant to relevant Exchange (s) norms.

In this connection I/we am/are aware of the following:

1. The AP shall not receive or pay any money or securities or commodities in his/her/its own name or account. All receipts and payments of securities, commodities and funds shall be made only in the name or account of the TFMPL;
2. The AP shall receive his/its remuneration-fees, charges, commission, salary etc for his/its services only from the TFMPL and he/she/it shall not charge any amount whatsoever from the clients;

In view of the foregoing, I/we acknowledge that the AP is not authorised by TFMPL to enter into any private arrangement with any clients of TFMPL including those introduced by him/her/it. I /we further agree and accept that I/we will not hold TFMPL responsible for any loss, damage, other liability or consequence, direct or indirect, arising out of any error of commission or omission by the AP with regard to any dealings and or transactions based on or resulting out of any private agreements (if any), between me/ us and the AP.

I/we agree that all debit instruction slips and other documents in respect of my/our depository Beneficiary Owner account with Torus Financial Markets Pvt. Ltd. shall not be left in the custody of the AP, either blank, partially filled up and/ or executed /signed. I /we further agree and accept that I/we will not hold TFMPL responsible for any loss, damage, other liability or consequence, direct or indirect, arising out of my/our action in leaving such blank, partially filled up and/ or executed /signed documents with the AP.

Your faithfully

**Client Signature**

**F18**

**Trading Client Name**

I /We hereby agree for the arrangement with the client Accepted by <input type="checkbox"/> Authorised Person	
<b>Signature</b>	
<b>Authorised Person Name</b>	
<b>Authorised Person Code</b>	

**IMPORTANT:** Welcome Kit and Password for your account will be sent on your registered email ID, login ID and alerts on mobile no. as mentioned in KYC form.

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CUT HERE

**NACH/ECS/AUTO DEBIT  
MANDATE INSTRUCTION FORM**

UMRN

Date

       

Sponsor Bank Code

Utility Code

**(tick )**

I/We hereby authorize

**BSE Limited**

to debit (tick )

SB/CA/CC/SB-NRE/SB-NRO/Other

**CREATE**

**MODIFY**

**CANCEL**

Bank a/c number

with Bank

IFSC

or MICR

an amount of Rupees

FREQUENCY  Mthly  Qtly  H-Yrly  As & when presented

DEBIT TYPE  Fixed Amount  Maximum Amount

Reference 1 (Mandate Reference No.)

Phone No.

Reference 2 (Unique Client Code-UCC)

Email ID

I agree for the debit of mandate processing charges by the bank whom I am authorizing debit my account as per latest schedule of charges of the bank.

**PERIOD**

From

       

To

       

Or  **Until Cancelled**

**F19**

1. First Holder

**S8**

2. Second Holder

**T8**

3. Third Holder

- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/ Corporate to debit my account, based on the instructions as agreed and signed by me.

- I have understood that I'm authorised to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/Corporate of the bank where I have authorised the debit.

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## Terms And Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL

### [SMS Alerts will be sent by CDSL to BOs for all debits]

#### Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
2. 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. 'BO' means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

#### Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

#### Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.
5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
6. **The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at [complaints@cdslindia.com](mailto:complaints@cdslindia.com). The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.**
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.



Date

Application No.:

To,  
**Torus Financial Markets Private Limited**  
 C-Wing 1802, Lotus Corporate Park, Off Western Express Highway,  
 Jai Coach, Goregaon East, Mumbai - 400063.

I/We hereby acknowledge that the following documents/ process were made available/ explained to me:

- 1 . Rights and Obligations of Stock Brokers, Authorized Person and Clients (Securities & Commodities)
- 2 . Rights and Obligations of Beneficial owner and Depository Participant (DP)
- 3 . Rights and Obligations of Clearing Member/Participant and its Client (SLBS)
- 4 . Risk Disclosure Document (Securities & Commodities)
- 5 . Additional Risk Disclosure documents for Options Trading (Commodity)
- 6 . Guidance Note - Do's and Don'ts for Trading on the Exchange(s) for Investors
- 7 . Policies and Procedures of TFMPL pursuant to the SEBI circular dated December 03, 2009
- 8 . General Terms and Conditions governing Securities & Commodities trading and Broking services of TFMPL
- 9 . Terms and Conditions for Basic Services Demat Account (BSDA), if applicable

I/We understand that the Voluntary documents executed by me are out of my/our free will.

I/We hereby confirm that I have clearly understood and agree to abide by the Policies and Procedures, Rights and obligations, Terms and Conditions (containing para 1 to 105) and Tariff Structure and be bound by same and by the bye laws as are in force from time to time as described by TFMPL. I also understand and agree that these Policies and Procedures, Terms and Conditions and Tariff Structure can be changed by TFMPL from time to time with prior notice of 30 days through email.

I/We aware that the welcome kit, login Id and password of my trading account will be sent on my email ID and alerts on Mobile no. furnished in KYC form and any changes thereof.

I/We hereby declare that any change in the information submitted by me/us in regard to FATCA/CRS shall be intimated to TFMPL immediately.

I/We have been informed that the forms/ documents / tariff would be made available to us through our log-in in our account on TFMPL website. I/We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application and I/We undertake that it would be my/our responsibility to check, scrutinize the said forms and documents within 15 days of account opening and intimate discrepancies if any therein to TFMPL immediately and in any case within one month of account opening. We further agree that any false/misleading information given by me/us or suppression of any material information will render my/our account liable for termination and suitable action.

	First/Sole Holder or Guardian (In case of Minor)	Second Holder	Third Holder
Signature	<b>F19</b>	<b>S9</b>	<b>T9</b>

**IMPORTANT:** Welcome Kit and Password for your account will be sent on your registered email ID, login ID and alerts on mobile no. as mentioned in KYC form.

Client Name \_\_\_\_\_

BO ID

Torus Financial Markets Private Limited, C-Wing 1802, Lotus Corporate Park, Off Western Express Highway, Jai Coach, Goregaon East, Mumbai - 400063.  
 Tel.: (91) (22) 69243000 | Fax: (91) (22) 69243000 | E-mail: customer.support@torusgroup.in /Grievance@torusgroup.in

We hereby acknowledge the receipt of the **a)** Account Opening Form (Trading & Demat) **b)** Received Option Form for Issue/ Non Issue of DIS Booklet from:

First Holder	Cheque Details	Chq. No.	Date	Amount						
Second Holder	Account Opening									
Third Holder	Margin									
P	A	R	T	N	E	R	C	O	D	E

\*Application processing charges of ` 950/-+ is not refundable.

+ In case of NRI ` 3500/-

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**FOR OFFICE USE ONLY**

Form handed to Branch CSE \_\_\_\_\_

Sr. No.:

**Mapping for Equity, Derivatives, Currency**

Entity	Name	Code									
Branch											
Sales (Sourcing)											
RM (Service)											
Dealer / ATPC											
Partner / Omnesys											
Lead ID											

**UCC Code allotted to the Client** \_\_\_\_\_

	Documents Verified with Originals by	Client Interviewed by	In-Person Verification done by
<b>Name of the Employee</b>			
<b>Employee Code</b>			
<b>Designation of the Employee</b>			
<b>Date</b>			
<b>Signature</b>			

Application Type\*  New  Update    KYC Number \_\_\_\_\_ (Mandatory for KYC update request)  
 Account Type\*  Normal  Update  Simplified (for low risk customer)  Small

**Margin Amount:** \_\_\_\_\_

**Bank Details**  
 (Bank Name/ Branch/  
 Cheque No/ Date) \_\_\_\_\_

\*Application processing charges of ` 950/- is not refundable.  
 \*In case of NRI ` 3500/-  
 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.

CUT HERE

**Disclaimer**

The acknowledgment slip given is only to acknowledge receipt of the documents collected by the representative of the Company and in no way to be construed as an acceptance of documents. Kindly quote the application no. printed in the acknowledgment slip for any query related to the status of client's application.



**TORUS FINANCIAL MARKETS PRIVATE LIMITED**

Corporate Address: C-Wing, 1802, Lotus Corporate Park,

Off Western Express Highway, Jai Coach, Goregaon East, Mumbai - 400063.

Email: [corporate@torusgroup.in](mailto:corporate@torusgroup.in) | Tel: +91 22 69243000 | CIN: U65990MH2021PTC356714