

MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGE

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REGISTERED OFFICE ADDRESS

RKSV Securities India Private Limited
 807, New Delhi House, Barakhamba Road
 Connaught Place, New Delhi, 110 011
 Telephone: +91-22-6130-9999
 Fax: +91-22-6710-7492
 Email: contact@rksv.in, www.rksv.in

CEO / COMPLIANCE OFFICER (BSE/NSE/MCX)

Mr. Ravi Kumar
 Telephone: +91-22-6130-9999
 Email: compliance@rksv.in, www.rksv.in

COMPLIANCE OFFICER (DP)

Mr. Amit Lalan
 Telephone: +91-22-6130-9999
 Email: compliance@rksv.in, www.rksv.in

CLEARING MEMBER INFORMATION

RKSV Securities India Pvt. Ltd
 ISSL Settlement & Transaction Services Limited: INF231133630, INF011133834, INE231308334
 CIN: U74900DL2009PTC189166

CORRESPONDENCE OFFICE ADDRESS

RKSV Securities India Private Limited Salasar
 Business Park,
 Off 150 Feet Flyover Road,
 Bhayander West,
 Thane,
 Maharashtra 401101
 Telephone: +91-22-6130-9999
 Fax: +91-22-6710-7492
 Email: contact@upstox.com, www.upstox.com

SEBI REGISTRATION NUMBERS

SEBI Regn. No. NSE: INB/ INF/ INE 231394231
 SEBI Regn. No. BSE: INB/ INF 011394237
 Registration Date: July 23, 2010
 SEBI Regn. No. DP: IN-DP-118-2015
 Registration Date: September 4, 2015

For any grievance/ dispute please contact RKSV Securities India Pvt. Ltd. at the above address and/ or email id: complaints@rksv.in and/ or Phone No. +91-22-6130-9999. In case you are not satisfied with the response, please contact the concerned exchange(s) at National Stock Exchange of India Limited at [ignse@nseindia.com and Phone No. 1800-220-058] and Bombay Stock Exchange Limited at [is@bseindia.com and Phone No. +91-22-2272-1234/33, Fax No. +91-22-2272-3677].



ACCOUNT OPENING FORM FOR INDIVIDUAL

Registered Office: 807, New Delhi House, Barakhamba Road, Connaught Place, New Delhi, 110 011 Correspondence

Office: 30th Floor, Sunshine Tower, Senapati Bapat Marg, Dadar (W), Mumbai - 400 013 Telephone:

+91-22-6130-9999 | Fax: +91-22-6710-7492 | Email: contact@upstox.com, www.upstox.com

DEPOSITORY PARTICIPANT OF CENTRAL DEPOSITORY SERVICES (I) LTD.

SEBI REGN. NO. IN-DP-118-2015

QUICK CHECKLIST

PAN Card (Compulsory for all the Account holders w.e.f. 1/4/06)

(A) Identity Proof (any one of the following)

1. Passport
2. Driving License
3. Voters Card (Copy of Front & Back side compulsory)
4. Identity card/document with applicant's Photo, issued by:
 - Central/State Government and its Departments
 - Public Sector Undertakings
 - Public Financial Institutions
 - Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their members
 - Statutory / Regulatory Authorities
 - Scheduled Commercial Banks
 - Colleges affiliated to Universities
 - Credit cards / Debit cards issued by Banks
5. Unique Identification Number (UID) (Aadhaar)

(B) Address Proof (any one of the following)

(Compulsory for all the A/c holders)

(For Permanent & Correspondence Address)

1. Ration card
2. Bank Passbook/Bank A/c Statement (Not more than 2 months)
3. Voters Card
4. Aadhar Card
5. Passport
6. Driving License (Copy of Front & Back side compulsory)
7. Landline Telephone Bill (Not more than three months old)
8. Electricity Bills (Not more than three months old)
9. Leave & License agreement only for correspondence Address / Agreement for sale notarised
10. Identity card / document with applicant's Photo, issued by:
 - Central/State Government and its Departments
 - Public Sector Undertakings
 - Public Financial Institutions
 - Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their members; Self-declaration by High court & Supreme Court judges, giving the new address in respect of their own accounts.
 - Scheduled Commercial Banks
11. Flat maintenance bill / insurance copy.

(C) Correspondence Address (anyone of the following)

(If Permanent Address differs from Correspondence address then provide)

1. Electricity Bill (Not more than three months old)
2. Landline Telephone Bill (Not more than three months old)
3. Leave & License Agreement notarised
4. Purchase Agreement notarised
5. Office Address - Certificate from the employer

(D) Bank details proof (For all accounts categories)

1. Original cancelled Cheque / Copy of Cheque & any bank documentary proof having Name, A/c. No. MICR Code & IFSC Code on it.

(E) Minor Details (All Mandatory)

1. Birth certificate
2. Proof of address and identity documents of the Guardian as per list A and B above.
3. One passport size photograph of minor, guardian and each of the applicant with their signatures across the photograph. (Guardian will sign across the photograph of Minor)

(F) HUF (All Mandatory) (Stamp must be as per HUF, PAN Card)

1. Birth certificate
2. Proof of address and identity documents of the Guardian as per list A and B above.
3. One passport size photograph of minor, guardian and each of the applicant with their signatures across the photograph. (Guardian will sign across the photograph of Minor)

Note: [HUF accounts cannot be opened with joint holder(s) and nominee cannot be appointed.] [In the account opening form, the Karta should sign under the HUF stamp.]

[In the event of death of karta, the death certificate and succession certificate must be taken]

(G) NRI (All Mandatory)

1. PAN Card
2. Proof of foreign address and Indian address (if any) In case of an NRI A/c. without repatriation, proof of Indian add. has to be given.)
3. Proof of identity
4. Bank a/c details (Indian)
5. Power of Attorney, If any
6. Copy of Passport (Full set)
7. A declaration duly signed by the NRI that he/she has complied with, and will continue to comply with, FEMA regulating and other applicable laws.
8. Valid visa copy mentioning validity.

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

(A) IMPORTANT POINTS

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy 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.

PROOF OF IDENTITY (POI): List of documents admissible as Proof of Identity:

1. PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving license.
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 Bank.

(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. BankAccount Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FM/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. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FII's, Mf's, 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.

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

Please fill type the form in English and BLOCK letters. **Sign all areas marked with 'x'.** Once completed, please mail the completed form along with the necessary proofs to our corporate office in Mumbai.

PLEASE AFFIX A
RECENT PASSPORT
PHOTOGRAPH AND
SIGN ACROSS IT

CLIENT'S SIGNATURE [1]

A. Identity Details (please see guidelines)

FULL NAME (As appearing in supporting identification document):

FATHER / SPOUSE'S NAME:

GENDER	<input type="radio"/> MALE	<input type="radio"/> FEMALE	MARITAL STATUS	<input type="radio"/> SINGLE	<input type="radio"/> MARRIED	DATE OF BIRTH (dd/mm/yyyy)	<input type="text"/>
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NATIONALITY INDIAN OTHER (Please Specify)

STATUS RESIDENT INDIVIDUAL NON RESIDENT FOREIGN NATIONAL (Passport copy mandatory for NRIs & Foreign Nationals)

PAN (Please enclose a duly attested copy) AADHAAR NUMBER (if any)

PROOF OF IDENTITY SUBMITTED FOR PAN EXEMPT CASES (Please Tick ✓)

UID (AADHAAR) PASSPORT VOTER ID DRIVING LICENCE OTHERS _____ (Please see guideline 'D')

B. Address Details (Please see guidelines)

ADDRESS FOR RESIDENCE/CORRESPONDENCE:

CITY/TOWN/VILLAGE:

PIN CODE

STATE:

COUNTRY:

TEL (OFF):

TEL (RES):

MOBILE:

FAX:

EMAIL ADDRESS:

PROOF OF ADDRESS TO BE PROVIDED BY APPLICANT. PLEASE SUBMIT **ANY ONE** OF THE FOLLOWING VALID DOCUMENTS & **CHOOSE** THE DOCUMENT ATTACHED

PASSPORT RATION CARD REGISTERED LEASE/SALE AGREEMENT OF RESIDENCE DRIVING LICENCE VOTER IDENTITY CARD
 *LATEST BANK A/c STATEMENT/PASSBOOK *LATEST TELEPHONE BILL (Only landline) *LATEST ELECTRICITY BILL *LATEST GAS BILL
 OTHERS (Please Specify) _____

*Not more than 3 months old. Validity/Expiry date of proof of address submitted (dd/mm/yyyy)

PERMANENT ADDRESS OF RESIDENT APPLICANT IF DIFFERENT FROM ABOVE B1 OR OVERSEAS ADDRESS (MANDATORY) FOR NON RESIDENT APPLICANT:

CITY/TOWN/VILLAGE:

PIN CODE

STATE:

COUNTRY:

PROOF OF ADDRESS TO BE PROVIDED BY APPLICANT. PLEASE SUBMIT **ANY ONE** OF THE FOLLOWING VALID DOCUMENTS & **CHOOSE** THE DOCUMENT ATTACHED

PASSPORT RATION CARD REGISTERED LEASE/SALE AGREEMENT OF RESIDENCE DRIVING LICENCE VOTER IDENTITY CARD
 *LATEST BANK A/c STATEMENT/PASSBOOK *LATEST TELEPHONE BILL (Only landline) *LATEST ELECTRICITY BILL *LATEST GAS BILL
 OTHERS (Please Specify) _____

*Not more than 3 months old. Validity/Expiry date of proof of address submitted (dd/mm/yyyy)

ANY OTHER INFORMATION:

DECLARATION

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I may be held liable for it.

CLIENT'S SIGNATURE [2] X

PLACE:

DATE (DD/MM/YYYY)

FOR OFFICE USE ONLY

AMC/Intermediary name **OR** code

<p>IPV Done <input type="checkbox"/> on (dd/mm/yyyy) <input type="text"/> <input type="text"/></p> <p><input type="checkbox"/> (Originals verified) True copies of documents received</p> <p><input type="checkbox"/> (Attested) True copies of documents received Main Intermediary</p>	<p>Seal/Stamp of the intermediary should contain Staff Name Designation Name of the Organization Signature Date</p>	<p>Seal/Stamp of the intermediary should contain Staff Name Designation Name of the Organization Signature Date</p>
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ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT

TO BE FILLED BY THE DEPOSITORY PARTICIPANT

APPLICATION NUMBER:	DATE (DD/MM/YYYY)										
DP INTERNAL REFERENCE NUMBER:											
DP ID	1 2 0 8 1 8 0 0	BO ID									

TYPE OF ACCOUNT (PLEASE TICK WHICHEVER IS APPLICABLE)

STATUS	SUB - STATUS	
<input type="radio"/> INDIVIDUAL	<input type="radio"/> INDIVIDUAL RESIDENT	<input type="radio"/> INDIVIDUAL DIRECTOR
	<input type="radio"/> INDIVIDUAL DIRECTOR'S RELATIVE INDIVIDUAL	<input type="radio"/> INDIVIDUAL HUF / AOP
	<input type="radio"/> PROMOTER	<input type="radio"/> MINOR
	<input type="radio"/> INDIVIDUAL MARGIN TRADING A/C (MANTRA)	<input type="radio"/> OTHERS (SPECIFY) _____
<input type="radio"/> NRI	<input type="radio"/> NRI REPATRIABLE	<input type="radio"/> NRI NON - REPATRIABLE
	<input type="radio"/> NRI REPATRIABLE PROMOTER	<input type="radio"/> NRI NON - REPATRIABLE PROMOTER
	<input type="radio"/> NRI DEPOSITORY RECEIPTS	<input type="radio"/> OTHERS (SPECIFY) _____
<input type="radio"/> FOREIGN NATIONAL	<input type="radio"/> FOREIGN NATIONAL	<input type="radio"/> OTHERS (SPECIFY) _____
	<input type="radio"/> FOREIGN NATIONAL DEPOSITORY RECEIPTS	

HOLDER DETAILS (TO BE FILLED BY THE APPLICANT IN BLOCK LETTERS)

I/We Request You To Open A Demat Account In my/ our Name as per following details:

SOLE/FIRST HOLDER'S NAME:

PAN NO. (Compulsory)		UID NO.	
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SECOND HOLDER'S NAME:

PAN NO. (Compulsory)		UID NO.	
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THIRD HOLDER'S NAME:

PAN NO. (Compulsory)		UID NO.	
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NAME*:

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

DETAILS OF GUARDIAN (IN CASE THE ACCOUNT HOLDER IS MINOR)

GUARDIAN'S NAME:		
RELATIONSHIP WITH THE APPLICANT:	PAN NO. (Compulsory)	

I / We instruct the DP to receive each and every credit in my/our account. (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 ID

YES NO _____

I / We would like to share the email ID with the RTA YES NO

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

PHYSICAL ELECTRONIC BOTH PHYSICAL AND ELECTRONIC

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

BANK DETAILS (DIVIDEND BANK DETAILS)

BANK CODE (9 DIGIT MICR CODE) IFSC CODE

ACCOUNT NUMBER:

ACCOUNT TYPE CURRENT SAVINGS NRI / NRE / NRO OTHERS (Please Specify)

BANK NAME: BRANCH NAME:

BANK BRANCH ADDRESS:

CITY: STATE: COUNTRY: PIN CODE:

1. Photocopy of the canceled cheque having the name of the account holder where the cheque book is issued, (or)
2. Photocopy of the Bank Statement having name and address of the BO
3. Photocopy of the Passbook having name and address of the BO, (or)
4. Letter from the Bank.

- In case of options 2, 3 and 4 above, MICR code of the branch should be present / mentioned on the document.

SMS ALERT FACILITY. Refer to Terms & Conditions given as **Annexure - 2.4**

MOBILE NO. +91

[Mandatory, if you are giving Power of Attorney (POA)]

(If POA is not granted & you do not wish to avail of this facility, cancel this option).

TRANSACTIONS USING SECURED TEXTING FACILITY (TRUST). Refer to terms and Conditions **Annexure - 2.6**

I/We wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I have read and understood the Terms and Conditions prescribed by CDSL for the same.

YES NO

I/We wish to register the following clearing member Ids under my / our below mentioned BO ID registered for TRUST

Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

EAS/

To register for Easi please visit our website www.cdsindia.com

Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.

I / We wish to avail the following facility:

Basic Services Demat A/C facility: YES (Please sign the BSDA declaration) NO

Rajiv Gandhi Equity Savings Scheme (RGESS) YES NO

OTHER DETAILS

GROSS ANNUAL INCOME DETAILS (Income Range per annum)			NET WORTH AS ON DATE (NOT OLDER THAN 1 YEAR)	
<input type="radio"/> UP TO RS. 1 LAC	<input type="radio"/> RS. 1 LAC - RS. 5 LAC	<input type="radio"/> RS. 5 LAC - RS. 10 LAC	VALUE IN Rs.	<input type="text"/>
<input type="radio"/> RS. 10 LAC - RS. 25 LAC	<input type="radio"/> MORE THAN RS. 25 LAC		DATE (DD/MM/YYYY)	<input type="text"/>

OCCUPATION:

PRIVATE SECTOR SERVICE PUBLIC SECTOR PROFESSIONAL HOUSEWIFE STUDENT
 GOVERNMENT SERVICE AGRICULTURIST BUSINESS RETIRED OTHER

AFFILIATIONS: POLITICALLY EXPOSED PERSON (PEP) RELATED TO A POLITICALLY EXPOSED PERSON (RPEP)

ANY OTHER INFORMATION:

Re: Confirmation to receive the account opening document and welcome letter through email and digitally signed

With reference to my/our application for opening of a Demat account with you.

I / We wish to receive all documents related to account opening documents, welcome letter and CMR copy (digitally signed) on the registered email id provided. None of these would be physically sent unless requested for the same.

Thanking You,
Yours faithfully,

FIRST/SOLE HOLDER SIGNATURE [3]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
 X		

DP ID BO ID

TO: RKS Securities India Private Limited
 30th Floor, Sunshine Tower,
 Senapati Bapat Marg,
 Dadar (W),
 Mumbai - 400 013

Dear Sir,

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

OPTION 1

I/We require you to issue Delivery Instruction Slip (DIS) booklet to me/us immediately on opening my/our CDSL account though I/We have issued a Power of Attorney (POA) in favor of RKS Securities India Pvt. Ltd. for executing delivery instructions for settling stock exchange trades (Settlement related transactions) effected through such Clearing Member.

OR

OPTION 2

I/We do not require Delivery Instruction Slip (DIS) for time being. Since I/We have issued a POA in favor of RKS Securities India Pvt. Ltd. for executing delivery instructions for settling stock exchange trades (Settlement related transactions) effected through such Clearing Member. However, the Delivery Instruction Slip (DIS) booklet should be issued to me/us immediately on my/our request at any later date.

I/We hereby select:

- OPTION 1
- OPTION 2

FIRST/SOLE HOLDER SIGNATURE [4]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
 X		

DATE (DD/MM/YYYY)

NOMINATION DETAILS

DP ID	1 2 0 8 1 8 0 0	BO ID	
NOMINATION REGISTRATION NO.:		PLACE	
I/We the sole holder/Joint holders/Guardian (in case of minor) hereby declare that:			
<input type="radio"/> I/We do not wish to nominate any one for this demat account.			
<input type="radio"/> I/We nominate the following person who is entitled to receive security balances lying in my/our account, Particulars whereof are given below, in the event of my/our death.			
NOMINATION DETAILS	NOMINEE 1	NOMINEE 2	NOMINEE 3
* FIRST NAME			
MIDDLE NAME			
* LAST NAME			
* ADDRESS			
* CITY			
* STATE			
* PIN CODE			
* COUNTRY			
TELEPHONE NO.			
FAX NO.			
PAN NO.			
UID			
EMAIL ID			
* RELATIONSHIP WITH THE BO			
DATE OF BIRTH (Mandatory if nominee is a minor) dd-mm-yyyy			
NAME OF THE GUARDIAN OF NOMINEE (if nominee is a minor)			
* FIRST NAME			
MIDDLE NAME			
* LAST NAME			
* ADDRESS OF THE GUARDIAN OF NOMINEE			
* CITY			
* STATE			
* COUNTRY			
* PIN			
* AGE			
TELEPHONE			
FAX NO.			
EMAIL ID			
* RELATION OF THE GUARDIAN WITH THE NOMINEE			

* PERCENTAGE OF ALLOCATION OF SECURITIES			
* RESIDUAL SECURITIES [Please select any one nominee, if tick not marked the default will be first nominee]			
<p>* Marked is a mandatory field</p> <p>Note - Residual securities: Incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.</p> <p>This nomination shall supersede any prior nomination made by me/us and also any testamentary document executed by me/us.</p> <p>Note - One witness shall attest signature(s) / thumb impression(s)</p>			
<p>DETAILS OF THE WITNESS</p>			
NAME			
ADDRESS			
SIGNATURE			
<p>I/We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. 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. I/We agree and undertake to intimate the DP any change(s) in the details/ Particulars mentioned by me/us in this form. I/We further agree that any false/misleading information given by me/us or suppression of any material information will render my account liable for termination and suitable action.</p>			

FIRST/SOLE HOLDER NAME	SECOND HOLDER NAME	THIRD HOLDER NAME
FIRST/SOLE HOLDER SIGNATURE [5]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
		

(Please Tear Here)

Acknowledgement Receipt

FOR OFFICE USE ONLY

Application No.:

Date:

We hereby acknowledge the receipt of the Account Opening Application Form / Nominee Details / DIS:

Name of the Sole/First Holder	
Name of the Second Holder	
Name of the Third Holder	

(Signatures should be preferably in blue ink)

(Please Tear Here)

For RKS Securities India Private Limited

FATCA/CRS Annexure - Individuals (including sole-proprietors)

(Applicable for Resident and Non-Resident Customers)

Date _____

Place _____

AOF Reference Number _____

Details under FATCA / CRS

Please fill the information below as requested	FIRST ACCOUNT HOLDER	SECOND ACCOUNT HOLDER	THIRD ACCOUNT HOLDER		
Name of the Account Holder					
Customer ID					
Residence Address for Tax purpose (including city, state, country and pin code)					
Address Type: 1- Residential or Business, 2- Residential, 3-Business, 4-Registered Office					
Mobile/ Telephone Number (incl ISD and STD code)					
Date of Birth (DD-MON-YYYY)					
City of Birth					
Country of Birth					
Nationality (if of more than one country, please mention all the countries separated by a comma)					
Gender (Male, Female, Others)					
PAN					
Father's Name (mandatory if PAN not provided)					
Aadhar Number (optional)					
Spouse's Name (optional)					
Identification Type- Documents submitted as proof of identity of the individual					
Identification Number - for the identification type mentioned above (mandatory if PAN or Aadhaar not provided)					
Are you a tax resident of any country other than India?					
First Account Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Second Account Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Third Account Holder	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below					

ACCOUNT HOLDER DETAILS	NAME OF THE CUSTOMER	COUNTRY(IES) OF TAX RESIDENCY*	TAX IDENTIFICATION NUMBER (TIN)**	IDENTIFICATION TYPE (TIN or other, specify)**
First Holder				
Second Holder				
Third Holder				

* To also include USA, where the individual is a citizen / green card holder of USA

** In case Tax Identification Number is not available, please provide functional equivalent

Certification: I / We have understood the information requirements of this Form (read along with the FATCA/CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We also confirm that I/We have read and understood the FATCA/CRS Terms and Conditions below and hereby accept the same.

FIRST/SOLE HOLDER SIGNATURE [6]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
 X		

DATE (DD/MM/YYYY)

PLACE

FATCA/CRS Terms & Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with RKSV Securities India Pvt Ltd or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA/CRS Instructions

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

It is mandatory to supply a TIN or functional equivalent if the country in which you are a tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form. In case the customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below

FATCA/CRS INDICIN OBSERVED (Ticked)	DOCUMENTATION REQUIRED FOR CURE OF FATCA/CRS INDICIN
U.S. place of birth	<ol style="list-style-type: none"> Self-certification (in attached format) that the account holder is neither a citizen of United States of America not a resident for tax purposes. Non-US passport or any non-US government issues document evidencing nationality or citizenship (refer list below) AND Any one of the following documents: <ol style="list-style-type: none"> Certified Copy of Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or why the customer did not obtain U.S. citizenship at birth
Residence/mailing address in a country other than India	<ol style="list-style-type: none"> Self-certification (in attached format) that the account holder is neither a citizen of United States of America not a resident for tax purposes. Documentary evidence (refer list below)
Telephone number in a country other than India (and no telephone number in India provided)	<ol style="list-style-type: none"> Self-certification (in attached format) that the account holder is neither a citizen of United States of America not a resident for tax purposes. Documentary evidence (refer list below)
Standing instructions to transfer funds to an account maintained in a country other than India	<ol style="list-style-type: none"> Self-certification (in attached format) that the account holder is neither a citizen of United States of America not a resident for tax purposes. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- Certificate of residence issued by an authorized government body*
- Valid identification issued by an authorized government body* (e.g. Passport, National Identity Card, etc.)

* Government or agency thereof or a municipality.

Declaration		Please strike off whichever is not applicable	
I hereby declare that the mobile no./email id mentioned in the Account opening form/ request for change in mobile no./email id is my own		Yes / no	
FIRST/SOLE HOLDER SIGNATURE [7]		SECOND HOLDER SIGNATURE	
 X			

[In case the option 'No' has been selected above, the request letter appended below is required to be submitted]

REQUEST LETTER FOR REGISTRATION OF MOBILE NO./EMAIL OF PERSON BELONGING TO THE CLIENT'S FAMILY

Please note that the mobile no./Email Address /both mentioned in the Account opening form/ request for change in mobile no./Email belongs to Mr/Mrs./Ms. _____ who is my _____ (relationship with the client)

[*Refer to the instructions mentioned below]

FIRST/SOLE HOLDER SIGNATURE [8]		SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
 X			

* [Only the mobile no./email of your spouse, dependent children and dependent parents can be registered in your demat account]

OPENING OF DEMAT ACCOUNT (NRI/FN)

Dear Sir/Madam,

Re: Opening of Demat Account (NRI/FN)

With reference to my/our application for opening of a Demat account with you. I/we hereby confirm that I am/we are Non-Resident Indian/s/Foreign National/s. I/We also confirm that I/We have complied with FEMA (erstwhile FERA) regulations and I/we would continue to comply with FEMA (FERA) regulations.

In case of foreign address, if address with P.O. Box No. has been submitted as Permanent and/or Correspondence address, client need to submit complete residential foreign address, under declaration at the time of opening of the account. Whenever there is a change in the residential address, Client shall inform the DP.

Thanking you,
Yours faithfully,

FIRST/SOLE HOLDER SIGNATURE [9]		SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
 X			

Place:

Date:



RKS Securities India Private Limited

Registered Office: 807, New Delhi House, Barakhamba Road, Connaught Place, New Delhi, 110 011
 Correspondence Office: 30th Floor, Sunshine Tower, Senapati Bapat Marg, Dadar (W), Mumbai - 400 013
 Telephone: +91-22-6130-9999 | Fax: +91-22-6710-7492 | Email: contact@upstox.com, www.upstox.com

SCHEDULE A - TARIFF STRUCTURE (DP ID 12081800)

I/We agree to pay the charges as per following charge structure for our Demat account with RKS Securities Private Limited

BO ID

DATE (DD/MM/YYYY)

CHARGE HEAD	CHARGES
Annual Maintenance Charges	<ul style="list-style-type: none"> Rs. 150/- plus applicable GST rates. For NRI: Rs. 500/- plus applicable GST.
Transaction charges Market / Off Market / Interdepository Transactions	<ul style="list-style-type: none"> Rs. 13/- plus Rs. 5.50/- (CDSL charges) per scrip
Pledge Charges Creation / Closure and Confirmation of both	<ul style="list-style-type: none"> 0.02% of the transaction charges subject to a minimum of Rs. 50/- plus NSDL / CDSL charges at actual.
Pledge Charges for Invocation	<ul style="list-style-type: none"> 0.05% of the transaction charges subject to a minimum of Rs. 50/-
Dematerialization Charges	<ul style="list-style-type: none"> Rs 20.00 per certificate plus charges of Rs. 50/- per request.
Rematerialization Charges	<ul style="list-style-type: none"> For every 100 shares Rs. 25/- part thereof, subject to maximum 5,00,000 or flat fee Rs. 25/- per certificate, whichever is higher.
SLB Charges	<ul style="list-style-type: none"> For Securities Borrowings: Rs. 25/- plus NSDL / CDSL charges at actuals. For Securities Lending: Rs. 25/- plus NSDL / CDSL charges at actuals.
Repurchase / Redemption Charges	<ul style="list-style-type: none"> Flat Rs. 25/- per transaction plus Depository charges at actuals.
Failed / Rejected Transactions	<ul style="list-style-type: none"> Rs. 50/- per transaction.
Demat Rejection Charges	<ul style="list-style-type: none"> Rs. 35/- per rejection for every 500 gms.
Adhoc / Non periodic statement requests	<ul style="list-style-type: none"> Adhoc statement requests: - Rs. 25/- (Rs 500 for foreign address) per request upto 10 pages. Every additional 5 pages or a portion thereof will be charged at Rs. 10/- plus courier / postage charges.
E-Mail Statement	<ul style="list-style-type: none"> Periodic Bills and Transactions statements and other communications will be sent by email only. Terms and Conditions for the same to be mandatorily executed. Requests for physical statements will be charged as mentioned above.
Cheque Bounce charges	<ul style="list-style-type: none"> Charges will be applied based on charges as determined by our bankers.

NOTE: For all purposes the bill date shall be construed as the date of demand and the bills will be considered as the bill cum notice for payment and RKS Securities India Pvt. Ltd. reserves the right to Freeze Depository account for debit transaction in case of non payment of charges after two days from the bill date.

Interest @ 18% p.a will be charged on the outstanding bill amount if not paid within the due date. The above tariff is subject to change. Changes if any be intimated 30 days in advance. GST, Education Cess and Higher Education Cess applicable on all above charges except stamp charges.

FIRST/SOLE HOLDER SIGNATURE [10]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE

POWER OF ATTORNEY (VOLUNTARY)

KNOW ALL MEN BY THESE PRESENTS THAT I/WE Mr. / Mrs. / M/s (first holder) _____

(Second Holder) _____

(Third Holder) _____

an Individual/ a sole proprietary concern/ a partnership firm /a body Corporate/trust, registered/incorporated, under the provisions of the Indian Partnership Act, 1932/the companies Act 1956 or any relevant Act, having his/her/its residence/registered office/place of business at _____

(hereinafter referred to as “ Beneficial Owner “) wish to avail / have availed the broking/ E-broking facilities and other services offered (hereinafter referred to as “ Services”), by RKS Securities India Private Limited (hereinafter referred to as”RKS”) company incorporated under the companies Act 1956 and having its Corporate office at “30th Floor, Sunshine Tower, Senapati Bapat Marg, Dadar(W), Mumbai-400013” and is a Member (Trading Member) of The National Stock Exchange of India Limited (NSE),Bombay Stock Exchange limited (BSE) and Metropolitan Stock Exchange of India Limited (MSEI) Respectively (hereinafter referred to as “the Exchange”) and is also a “Depository Participant” registered with Central Depository Services (India) Ltd (CDSL).

WHEREAS

A. The Client is desirous of investing in Securities and has opened / is in the process of opening an account for the purpose of availing stock broking, depository participant, distribution of mutual fund units, other third party financial products, if any and/or other services including but not limited to trading through internet broking services offered through the RKS web portal.

B. RKS has furnished the particulars of various beneficial owners account and the bank account in the scheduled attached hereto where the funds and the securities will be moved and further the client has agreed that RKS is entitled to modify the said particulars from time to time after informing the client about the same.

C. In the course of availing the services and for meeting the settlement Obligation thereof on the Exchanges, I/We do hereby nominate, Constitute and appoint M/s. RKS Securities India Private Limited (Member Broker), Hereinafter referred to as “RKS” acting through their Directors and/or duly authorised staff for the purpose, as my/our true and lawful attorneys for my depository account with RKS Securities India Private Limited (Depository Participant) DP ID **12081800**

Client ID _____ to execute and perform severally the following acts,deeds, matters and things, provided the attorney complies with all applicable conditions of all or any of their services offered by them in their capacity as stock Brokers.

Now know all men and these presents witnesseth that I/We do hereby nominate, Constitute and appoint M/s. RKS Securities India Private Limited (Member Broker), Hereinafter referred to as “RKS” acting through their Directors and/or duly authorised staff for the purpose, as my/our true and lawful attorneys to do all or any of the acts matters and things and to exercise all or any of the powers hereby specifically conferred upon RKS to do as under :

1. To operate depository account/(s)for the purpose of transferring any collateral to the margin account and honouring delivery obligations for any transaction executed with RKS which is registered as a Depository Participant and a stock broker registered with Securities and Exchange Board of India(SEBI).
2. To Sign instruction on my behalf with respect to debit / credit the depository account/(s) for the credit or benefit of my/ our account with RKS, for the transactions carried by me/us with RKS.
3. To issue instructions relating, executing delivery/receipt instructions, pledge creation instructions, pledge closure instructions, lending and borrowing instructions, to operate the depository account by issue and receipt of instructions for the above mentioned purpose and such other authorization given by me/us severally on behalf of all of us, or all/ any of us jointly, in any electronic form, in any format and at any time either through the portal of RKS or through the internet will be validly constituted attorney to intimate the same to the Depository participant for the purposes of debiting or crediting my account opened with the Depository Participant.
4. To validate on my/our behalf any such instruction so given to the Depository Participant(S), in written/physical or other form as may be required by the concerned depository participant.
5. For these purposes and to this extent, RKS is empowered by me/us, to affix their signatures to any document, form or any other record, being a delivery participant, as required by the concerned depository.
6. To transfer unds from the bank account for recovering any outstanding amount due from me/us arising out of our trading activities on the stock exchange through RKS.
7. I/We also undertake to pay such demat charges/fees and such other charges incurred by RKS under this Power of Attorney and that I/We further authorize RKS to debit my/our account with RKS with the said charges as and when the same becomes due for payment and I/we hereby undertake to pay the same immediately on demand made by RKS.

First/Sole Holder Signature [11]	Second Holder Signature	Third Holder Signature
X		

8. To enter into correspondence with market participant with respect to any transaction in any Investment Products.
9. To forward all such applications placed through the web site to the online -IPO module of the concerned Exchange or owner / issuer of "Investment Product".
10. To receive intimation from the Exchange and any other party regarding the allocation / allotment / rejection / regret of the securities or such other "Investment Product" applications / subscriptions / withdrawal or any other communications.
11. To authorize RKS V to invest on behalf of me/us and to hold the mutual fund/ asset management company(ies) based on the request given by me /us. I confirm not to hold such mutual fund/asset management company / RKS V liable for any transaction processed based on my/our request to correspond with and give notice to the corresponding asset management company / body corporate(s) / issuer / registrar and transfer agent of securities including giving instructions with regard to nomination/change in investment plans/ any other changes that may be necessitated pursuant to the authorization given by me/ us to RKS V in this regard.
12. To transfer funds from the bank account for meeting obligations arising out of my/our subscribing to such other products/facilities/services through RKS V like Mutual Funds, Public Issues (shares as well as debentures), rights, offer of shares in etc.
13. To deposit/ transfer on allotment, the securities,debentures, units of the mutual funds and/or all other investments products applied through RKS V, on allotment, to my/our Beneficial Owner Demat Account opened for the purpose with the RKS V-DP.
14. To do all other acts and things as may be necessary to affect the subscription/purchase/redemption or any other transaction in any investment Product for which services are availed from RKS V.
15. To debit my Trading account towards monies/fees/charges etc. payable to RKS V or to a market participant Service provider or to any of the affiliates/subsidiaries of RKS V by virtue of I/We using /subscribing to any of the facilities/ service provided either by RKS V or through a third party service provider or by any other security or financial instrument on behalf of me/us through RKS V or any market participant. To bind ourselves with respect to any instruction given by first holder or any other holder to RKS V.
16. In case of any erroneous transfer done by attorney, the attorney may return the same to my account as soon it comes to their notice.
17. To send the consolidated summary of client wise scrip wise buy and sell position with average rates by email.
18. To authorize RKS V to transfer the securities to any of the demat accounts of RKS V as mentioned in Annexure B.
19. To do or omit to do all such act and things as TSL may in its discretion consider to be necessary or desirable in order to exercise its power hereunder or comply with any law, order rules, regulations or directions of any government or regulatory or other authorities.
19. We the joint holders of demat account agree ,ratify and confirm to bind ourselves to any instructions given by the client herein above mentioned who shall be the exclusive beneficiary of the transactions carried out pursuant to this Power of Attorney in favour of the Director/(S) and/or the Authorized Signatories, who have in token thereof, subscribed their signature thereto.

That the Power of Attorney herein referred to is revocable at any time without notice subject to such revocation shall not be applicable for any outstanding settlement obligation arising out of the trades carried out prior to receiving request for revocation of POA.

That, I/We hereby declare that all the actions taken by my/our above mentioned attorney (herein RKS V) in this regards shall be deemed to be action done by me/us and if necessary shall be ratified by me/ us on the instruction of the said attorney and that such actions will be binding on me/us.

I/We agree that RKS V is entitled to credit the proceeds of any instruction. This document shall be subject to the jurisdiction of the courts in New Delhi.

In witness whereof I/We have executed this revocable Power of Attorney on the day, date and year herein below mentioned.

First/Sole Holder Signature [12]	Second Holder Signature	Third Holder Signature
X		

ANNEXURE B

PARTICULARS	DP ID	CLIENT ID
CDSL CLIENT BEN A/C		
CDSL MSEI POOL A/C		
CDSL BSE PRINCIPAL A/C	16014800	00283859
CDSL NSE POOL A/C	16014800	00282534
CDSL CLIENT MARGIN A/C	12081800	00011954
CDSL MSEI EARLY PAY-IN A/C		

PARTICULARS	DP ID	CLIENT ID
CDSL NSE EARLY PAY-IN A/C	11000011	00019441
CDSL BSE EARLY PAY-IN A/C	11000010	00022152
NSDL BSE POOL A/C		
NSDL MSEI POOL A/C		
NSDL NSE POOL A/C		
NSDL BEN A/C		

Dated at Mumbai on this _____ day of _____

SIGNED AND DELIVERED by the within names the Beneficial Owner

FIRST/SOLE HOLDER SIGNATURE [13]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
		

Witness 1
NAME:
ADDRESS:
SIGNATURE:

Witness 2
NAME:
ADDRESS:
SIGNATURE:

FOR OFFICE USE ONLY

We Accept

SIGNED AND DELIVERED by the within named the Participant:

by the hand of its authorized representative:

RKSV Securities India Private Limited
30th Floor, Sunshine Tower,
Senapati Bapat Marg,
Dadar (W),
Mumbai - 400 013
For RKSV Securities India Private Limited

Authorised Signatory

ACKNOWLEDGEMENT LETTER

TO: RKS Securities India Private Limited
30th Floor, Sunshine Tower,
Senapati Bapat Marg,
Dadar (W),
Mumbai - 400 013

Dear Sir or Madam,

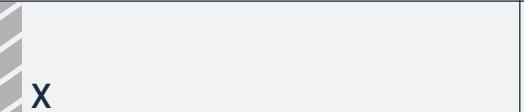
I/We hereby acknowledge receipt of the following documents

1. Rights and Obligations of Stock Brokers, Sub-brokers and Clients (including additional rights & obligations in case of internet / wireless technology based trading).
2. Risk Disclosure Document for Capital Market and Derivatives Segments.
3. Guidance Note - Do's and Don'ts for Trading on the Exchange(s) for Investors.
4. Policies and Procedures Document pursuant to the SEBI circular dated December 03, 2009.
5. The RKS Securities Tariff sheet.
6. General Terms and Conditions governing securities trading and broking services of RKS Securities India Pvt. Ltd.
7. All other mandatory and voluntary client registration documents.
8. I/We hereby acknowledge the receipt of duly executed copy of KYC and all other documents as executed by me/us. Further I confirmed that the documents for KYC submitted by me are true and correct.

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

I state that I have read and understood all above documents and these documents are binding upon me.

Yours faithfully,

FIRST/SOLE HOLDER SIGNATURE [14]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
 X		

DATE (DD/MM/YYYY)

CONSENT LETTER FOR AVALING BSE StAR MF FACILITY

I/We _____ am/are registered as your client with Client Code No. _____ and have executed the Account Opening documents (KYC Form) for the purpose of trading in the Capital Market segment of BSE Limited (BSE).

I/We am/are interested in availing the BSE StAR facility of BSE for the purpose of dealing in the units of Mutual Funds Schemes permitted to be dealt with on the BSE StAR MF of the Exchange.

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

I/We are willing to abide by the terms and conditions as mentioned in the BSE Circular dated December 02, 2009 and as may be specified by the Exchange from time to time in this regard.

I/We shall ensure compliance with the requirements as may be specified from time to time by Securities and Exchange Board of India (SEBI) and 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 BSE Star Mf.

I/We hereby confirm having read and understood the terms & conditions and disclosures provided overleaf.

Your faithfully,

First/Sole Holder Signature [15]	Second Joint Holder Signature	Third Joint Holder Signature
X		

DETAILS OF TERMS & CONDITIONS FOR THE INVESTOR / CLIENT FOR USING NEW BSE StAR MF FACILITY:

Pre-requisites for becoming Investor / Client for the New BSE StAR MF platform

1. The client who is desirous of investing in units of mutual fund schemes through the BSE StAR MF.
2. The client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the Participant/ the broker who is a Mutual fund Intermediary (MFI) of the New BSE StAR MF platform.
3. The client has satisfied itself of the capacity of the Participant/MFI to deal in Mutual Fund units and wishes to execute its instruction through the Participant/MFI and the client shall from time to time continue to satisfy itself of such capability of the Participant/MFI before executing transacting through the Participant/MFI.
4. The client has approached to the Participant/MFI with the application for availing the New BSE StAR MF platform.
5. The client has submitted relevant KYC (Know Your Client) details to the Participants/MFIs.

TERMS & CONDITIONS

1. The client shall be bound by circulars issued by 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.
2. The client shall notify the Participant in writing if there is any change in the services that Participant renders to the client 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 StAR MF or at any time thereafter.
3. 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.
4. The client has read and understood the risks involved in investing in Mutual Fund Schemes.
5. The client shall be wholly responsible for all his investment decisions and instruction.
6. The client shall ensure continuous compliance with the requirements of the BSE, SEBI and AMFI.
7. 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 the participants render.
8. 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.
9. 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 BSE or ICCL. BSE StAR
10. In case of any dispute between the Participants and the investors arising out of the BSE Star Mf facility, BSE and ICCL agrees to extend the necessary support for the speedy redressal of the disputes.

I have read and understood the above and I agree to abide by the same.

First/Sole Holder Signature [16]	Second Joint Holder Signature	Third Joint Holder Signature
X		

TO: RKS Securities India Private Limited
30th Floor, Sunshine Tower,
Senapati Bapat Marg,
Dadar (W),
Mumbai - 400 013

Dear Sir,

Sub: Authorisation to debit trading account for the demat account charges

Ref: DP ID:

1	2	0	8	1	8	0	0
---	---	---	---	---	---	---	---

BO ID

--	--	--	--	--	--	--	--

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

Thanking you,
Yours truly,

FIRST/SOLE HOLDER SIGNATURE [17]	SECOND HOLDER SIGNATURE	THIRD HOLDER SIGNATURE
 X		

**Important Instructions:**

- A) Fields marked with '*' are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

FOR OFFICE USE ONLY

(To be filled by financial institution)

Application Type* New UpdateKYC Number (Mandatory for KYC update request)Account Type* Normal Simplified (for low risk customers) Small**□ 1. PERSONAL DETAILS**

(Please refer instruction A at the end)

Prefix First Name Middle Name Last Name

 Name* (Same as ID proof)

Maiden Name (If any*)

Father / Spouse Name*

Mother Name*

Date of Birth* PLEASE AFFIX A
RECENT PASSPORT
PHOTOGRAPH**CLIENT'S SIGNATURE [18]**Gender* M-Male F- Female T-TransgenderMarital Status* Married Unmarried OthersCitizenship* IN-Indian Others (ISO 3166 Country Code)Residential Status* Resient Individual Non Resident Indian
 Foreign National Person of Indian OriginOccupation Type* S-Service (Private Sector Public Sector Government Sector)
 O-Others (Professional Self Employed Retired Housewife Student)
 B-Business
 X-Not Categorised**□ 2. TICK IF APPLICABLE □ RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA**

(Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if Section 2 is ticked) ISO3166 Country Code of Jurisdiction of Residence* Tax Identification Number or equivalent (If issued by jurisdiction)* Place / City of Birth* ISO 3166 Country Code of Birth* **□ 3. PROOF OF IDENTITY (Pol)***

(Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity[Pol] needs to be submitted)

<input type="checkbox"/> A-Passport Number <input type="text"/>	Expiry Date <input type="text"/>
<input type="checkbox"/> B-Voter ID Card <input type="text"/>	
<input type="checkbox"/> C-PAN Card <input type="text"/>	
<input type="checkbox"/> D-Driving Licence <input type="text"/>	Expiry Date <input type="text"/>
<input type="checkbox"/> E-UID (Aadhaar) <input type="text"/>	
<input type="checkbox"/> F-NREGA Job Card <input type="text"/>	

<input type="checkbox"/> Z-Others (any document notified by the central government)					
Identification Number					
<input type="checkbox"/> S-Simplified Measures Account - Document Type code					
Identification Number					
4. PROOF OF ADDRESS (PoA)*					
<input type="checkbox"/> 4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please refer instruction D at the end)					
(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)					
Address Type*	<input type="checkbox"/> Residential / Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business	<input type="checkbox"/> Registered Office	<input type="checkbox"/> Unspecified
Proof of Address*	<input type="checkbox"/> Driving Licence Voter	<input type="checkbox"/> Passport NREGA	<input type="checkbox"/> UID (Aadhaar)		
	<input type="checkbox"/> Identity Card	<input type="checkbox"/> Job Card	<input type="checkbox"/> Others (Please specify)		
	<input type="checkbox"/> Simplified Measures Account - Document Type code []				
Address					
City / Town / Village*			District*		
Pin / Post Code*	[]	State / U.T Code*	[]	ISO 3166 Country Code*	[]
<input type="checkbox"/> 4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please refer instruction E at the end)					
<input type="checkbox"/> Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')					
Address					
City / Town / Village*			District*		
Pin / Post Code*	[]	State / U.T Code*	[]	ISO 3166 Country Code*	[]
<input type="checkbox"/> 4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA (Applicable if section 2 is ticked) FOR TAX PURPOSES*					
<input type="checkbox"/> Same as Current / Permanent / Overseas Address details			<input type="checkbox"/> Same as Correspondence / Local Address details		
Address					
City / Town / Village*			District*		
Pin / Post Code*	[]	State / U.T Code*	[]	ISO 3166 Country Code*	[]
<input type="checkbox"/> 5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)					
Tel. (Off) [] - []			Tel. (Res) [] - []		
FAX [] - []			Mobile [] - []		
Email ID					
<input type="checkbox"/> 6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (Please refer instruction G at the end)					
<input type="checkbox"/> Addition of Related Person		<input type="checkbox"/> Deletion of Related Person			
KYC Number of Related Person (if available*) []					
Related Person Type*	<input type="checkbox"/> Guardian of Minor	<input type="checkbox"/> Assignee	<input type="checkbox"/> Authorized Representative		
Name*	Prefix	First Name	Middle Name	Last Name	

(If KYC number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY [PoI] OF RELATED PERSON*

(Please see instruction (H) at the end)

<input type="checkbox"/> A-Passport Number	_____	Expiry Date	_____
<input type="checkbox"/> B-Voter ID Card	_____		
<input type="checkbox"/> C-PAN Card	_____		
<input type="checkbox"/> D-Driving Licence	_____	Expiry Date	_____
<input type="checkbox"/> E-UID (Aadhaar)	_____		
<input type="checkbox"/> F-NREGA Job Card	_____		
<input type="checkbox"/> Z-Others (any document notified by the central government)	_____		
Identification Number	_____		
<input type="checkbox"/> S-Simplified Measures Account - Document Type code	_____		
Identification Number	_____		

7. REMARKS (If any)

8. 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/ email address.

CLIENT'S SIGNATURE [19] 	PLACE:
	DATE (DD/MM/YYYY) _____

FOR OFFICE USE ONLY

Documents Received Certified Copies

KYC VERIFICATION CARRIED OUT BY

Emp. Name:	Emp. Code:	Emp. Designation:
Emp. Branch:	Employee Signature	
DATE (DD/MM/YYYY) _____		

INSTITUTION DETAILS

Emp. Name:	Institution Stamp
Emp. Code:	

General Instructions:

1. Fields marked with '*' are mandatory fields.
2. Tick '✓' wherever applicable.
3. Self-Certification of documents is mandatory.
4. Please fill the form in English and in BLOCK Letters.
5. Please fill all dates in DD-MM-YYYY format.
6. Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
7. KYC number of applicant is mandatory for updation of KYC details.
8. For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
9. In case of 'Small Account type' only personal details at section number 1 and 2, photograph, signature and self-certification required.

A Clarification / Guidelines on filling 'Personal Details' section

1. Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
2. Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number

C Clarification / Guidelines on filling 'Proof of Identity [POI]' section

1. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
2. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.
3. In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code	Description
01	Identity card with applicant's photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
02	Letter issued by a gazetted officer, with a duly attested photograph of the person.

D Clarification / Guidelines on filling 'Proof of Address [PoA] - Current / Permanent / Overseas Address details' section

1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
2. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
3. In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal Tax receipt.
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

E Clarification / Guidelines on filling 'Proof of Address [POA] - Correspondence / Local Address details' section

1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
2. In case of multiple correspondence / local addresses, Please fill 'Annexure A1'

F 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 '0' in the beginning of Mobile number.

G Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person if available.

H Clarification / Guidelines on filling 'Related Person details - Proof of Identity [PoI] of Related Person' section

1. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

List of two - digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chhattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 two- digit Country Code

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		

SEGMENT ADDITION / MODIFICATION FORM

TO: RKS Securities India Private Limited, Salasar Business Park, Off 150 Feet Flyover Road, Bhayander West, Thane, Maharashtra 401101

SUB: Request to add/modify segments to my current subscription plan

Dear Sir or Madam,

I presently have an account with RKS Securities India Pvt. Ltd. and I would like to activate/modify the below segments under below mentioned plan.

BROKERAGE CHARGE

Zero brokerage charge on Equity delivery trades.

Brokerage for Equity intraday / Future / Currency would be Rs. 20 per order traded or 0.01% whichever is lower.

Brokerage for Option would be Rs. 20 per order traded.

For NRI's it would be Rs. 200 per order traded or 0.10% of turnover whichever is lower in BSE Cash Delivery and NSE Cash Delivery and Rs. 200 per order traded under F&O segment.

STATUTORY CHARGES

In addition to the above monthly subscription charges, the following statutory charges will also be levied at actuals:

Securities Transaction Tax, Transaction Charges, GST, Stamp Duty, Education and Higher Education Cess, SEBI Turnover Fees, Swachh Bharat Cess and Clearing Member Charges.

Electronic Contract Notes are free. Physical Contract note copies are charged at Rs. 50 per contract note (for ECN clients) + Courier charges as applicable. Depository Participant charges as levied by RKS. Terms and Conditions can be subject to change provided the same is done as for applicable guidelines of SEBI/exchange.

The terms and conditions of the RKS Securities India Pvt. Ltd. plans have been read and understood by me. I wish to avail the plans below provided by RKS Securities India Pvt. Ltd. for my trading account subject to the terms and conditions mentioned above.

I declare that I have read and understood the terms and conditions governing the RKS Securities India Pvt. Ltd.

PLEASE ENABLE THE SEGMENTS MARKED BELOW

NSE CASH

NSE CURRENCY DERIVATIVES

BSE CURRENCY DERIVATIVES

NSE F&O

BSE CASH

AUTHORIZATION FOR ACCOUNT MODIFICATION

TO: RKS Securities India Private Limited, Salasar Business Park, Off 150 Feet Flyover Road, Bhayander West, Thane, Maharashtra 401101

SUB: Authorize account modification using electronic mediums

If I/we were to add/modify/remove any of my detail including brokerage plans with RKS Securities India Pvt. Ltd, I/we authorize you to carry it out based on my request sent through an email to support@rksv.in from my registered email address or intimation through an interface provided by you, whereto I have been allowed secured access.

If you feel the need to do so, then at your own discretion, you may put in place appropriate mechanism to confirm the request before or after its execution by way of a call from a recorded line, or otherwise, personal meeting, SMS or other such other mode as you may deem fit.

Yours faithfully,

CLIENT'S NAME	CLIENT'S CODE
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CLIENT'S SIGNATURE <u>X</u>	DATE (DD/MM/YYYY)
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RKS SECURITIES: NSE CM: INB231394231 | NSE F&O: INF231394231 | NSE CDS: INE231394231 | CDSL: IN-DP-CDSL-00282534 | NSDL: IN-DP-NSDL-11496819 | BSE CM: INB011394237 | BSE F&O: INF 011394237 | CDSL: IN-DP-CDSL-00283831 | NSDL: IN-DP-NSDL-11497282 | REGISTERED ADDRESS: RKS SECURITIES, 807 NEW DELHI HOUSE, NEW DELHI 110001 | CORPORATE OFFICE: 212 TRADE CENTRE, BKC, BANDRA (E), MUMBAI 400051. PHONE: +91-22-6130-9999.

