www.gurustox.com Ph No:0124-4061723



# TRADING AND DEMAT

ACCOUNT OPENING FORM

Member: NSE / BSE / CDSL

INDIVIDUAL	CORP	CORPORATE	
PROPRIETOI	R FIRM	H.U.F	

Client Code	_Client BO ID
Client Name	_Branch Code
Application No	_Emp Code
Only Trading Only	DP Combined
Remarks	

# **GURUSTOX LIMITED – Regulatory & Membership Information**



Registered Office	Corporate Office
1401, 14th Floor, Chiranjiv Tower, 43 Nehru Place,	II No 1072 Sector 40 Coverson However 122001
New Delhi- 110019	H. No. 1073, Sector 40, Gurgaon, Haryana – 122001
Phone: +91-124-4061723	CIN No U67120DL1993PLC056460
E-mail: info@gurustox.com, hplnse@gmail.com grievance@gurustox.com	Website: www.gurustox.com

# **Director's and Compliance Details**

Name	Rahul Bahukhandi	Tejasav Narayan Bhatotiya	Kamal Luthra
Desiganation	Director	Director	Compliance Officer
Phone	91-9667953516	91-9818133883	91-9667953082
Email	rb@gurustox.com	tejasav@gurstox .com	kamal.luthra@gurustox.com

**Regulatory Details** 

SEBI Registration No.	INZ000255037
SEBI DP Registration No.	IN-DP-805-2025
Depository Participant	CDSL (DP ID: 12102400)

Clearing Member (Equity)	Gurustox Limited
Clearing Member (Derivatives)	Globe Capital Market Limited

**Exchange Memberships** 

Exchange	Segment	Member ID	SEBI Regn. No.
NSE	CM, F&O	08052	INZ000255037
BSE	CM, F&O	6249	INZ000255037

## **Investor Grievance Contact**

Contact Gurustox Limited	Escalation – Exchange/Depository
Address: As above	If not satisfied with our response, you may contact the
E-mail: info@gurustox.com, grievance@gurustox.com	respective Exchange/Depository listed below.
Phone: +91-124-4061723	

## **Exchange / Depository Contact Details**

Exchange / Depository	E-mail ID	Phone No.
NSE	ignse@nse.co.in	022-26589190 / 1800-2660058
BSE	is@bseindia.com	022-22728097
MCX	grievance@mcxindia.com	022-67318888
ICEX	info@icexindia.com	022-30849700
CDSL	complaints@cdslindia.com	022-22723333
NSDL	relations@nsdl.co.in	022-24994200

## **SEBI Contact**

Mode	Details
Website	http://scores.gov.in
Toll-Free Helpline	1800-22-7575 / 1800-266-7575

ACKNOWLEDGEMENT TO GURUSTOX LIMITED FROM CLIENT
Date:
To Gurustox Limited Corporate Office: H.No 1073, Sector 40, Gurgaon-122001
<ul> <li>I/We intend to open a Trading Account with M/s. Gurustox Limited who is Member of NSE, BSE, and CDSL and undertake as follows:</li> <li>I/We have been duly made aware by the Member that the client has a preference to receive the below referred documents either in electronic form or in physical form: <ul> <li>A. Right and Obligations of Stock Brokers, Sub-Brokers and Clients</li> <li>B. Internet and Wireless technology based trading facility provided by Stock Brokers to Client</li> <li>C. Risk and Disclosure document for capital market and derivative segments</li> <li>D. Guidance note-Do's and Dont's for trading on the Exchange(s) for Investors</li> <li>E. Policies &amp; Procedures</li> <li>F. Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI &amp; Depositories</li> <li>G. Other disclosure/ documents as agreed by me/us specifically in voluntary segment.</li> </ul> </li> <li>2. I/We am/are further made aware by my/our Member that for receiving the above said documents in Electronic or Physical Form, I/We have to accord my/our consent.</li> <li>3. Therefore, in reference to the above, I/We hereby voluntarily accord my/our consent to receive the aforesaid documents in:    Electronic Form</li></ul>
Client Name:
(Tear Here)
RECEIPT OF PHYSICAL KIT
Date:
To Gurustox Limited Corporate Office: H No 1073, Sector 40, Gurgaon-122001
<ul> <li>I/We hereby confirm that I/We have received a copy of following documents:</li> <li>A. Right and Obligations of Stock Brokers, Sub-Brokers and Clients</li> <li>B. Internet and Wireless technology based trading facility provided by Stock Brokers to Clients</li> <li>C. Risk and Disclosure document for capital market and derivative segments</li> <li>D. Guidance note-Do's and Dont's for trading on the Exchange(s) for Investors</li> <li>F. Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI &amp; Depositories</li> <li>E. Policies &amp; Procedures</li> <li>F. Other disclosure/ documents as agreed by me/us specifically in voluntary segment.</li> </ul>

Client Name:

**£**12

Client Signature

# **ACCOUNT OPENING KIT**

# **INDEX OF DOCUMENTS**

# MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES

S.No.	Name of the Document	Brief Significance of the Document	Page No.
1.	Account Opening Form	KYC Form - Document captures the basic information about the constituent and an instruction / check list.	1 - 4
		B. Document captures the additional information about the constituent relevant to trading account and an instruction / check list / nomination.	5 - 12
2.	Rights and Obligations	Document stating the Rights & Obligations of stock broker/ broker/trading member, and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	Kindly refer to our Website:
3.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities/ commodities market.	www.gurustox.
4.	Guidance Note	Documents detailing do's and dont's for trading on exchange, for the education of the investors.	
5.	Policies and Procedures	Document describing significant policies and procedure of the stock/commodity broker.	
6.	Tariff Sheet	Document detailing the rate / amount of brokerage and other charges levied on the client for trading on the stock/commodity exchange(s)	13
7.	Disclosure Information for Pro-Trading	Disclosure Information for Proprietary Trading/Business (Pro-Trading)	13
8.	PMLA Declaration	PMLA Declaration	13

# **VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER**

S.No.	Name of the Document	Brief Significance of the Document	Page No.
1.	Running Account Authorisation	Helps the client to enjoy exposures linked to the credit in the trading account	14
2.	Electronic Contract Note (ECN)	Consent for receiving ECN & e-documents	15
3.	Letter of Authority	To enable the trading member to act upon the clauses mentioned in the letter of authority.	16
4.	For Registration and Verification of Mobile Number and E-mail Address	For Registration and Verification of Mobile No. and E-mail Address	16
5.	Most Important Terms and Conditions (MITC)	Most Important Terms and Conditions (MITC) (For Non-custodial Settled Trading Accounts)	17
6.	Declaration, Indemnity cum Undertaking for Name Discrepancy in PAN Card, Bank Proof & Address Proof	Declaration for Trading in Derivative, Indemnity cum Undertaking for Name Discrepancy	17-18
7.	FATCA & CRS Declaration	FATCA & CRS Declaration for Individual & Non-Individual	19-21
8.	Demat Account Opening Form	Demat Account Opening Form - CDSL	22-33

#### INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

#### **IMPORTANT POINTS:**

- Self attested copy of PAN card is mandatory for all clients.
- Copies of all the documents submitted by the applicant should be self-attested and 2. 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 language is required.
- 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
- Sole proprietor must make the application in his individual name & capacity. 6.
- 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
- For foreign entities, CIN is optional; and in the absence of DIN for the directors, their 8. 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.
- For opening an account with Depository Participant or Mutual Fund, for a minor, photocopy 10 of the School Leaving Certificate/Mark Sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- 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: B.
- PAN card with photograph. This is mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D)
  Unique Identification Number (UID) (Aadhaar) Passport/ Voter ID card/ Driving License.
- 2
- Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members and Credit cards/Debit cards issued by Banks.
- Proof of Address (POA): List of documents admissible as Proof of Address: C.
  - (\*Documents having an expiry date should be valid on the date of submission.)
- Passport/ Voters Identity Card/ Ration Card/ Registered Lease or Sale Agreement of 1. Residence/ Driving License/ Flat Maintenance bill/ Insurance Copy.
- Utility bills like Telephone Bill (only landline), Electricity bill or Gas bill Not more than 3
- Bank Account Statement/Passbook Not more than 3 months old.
- Self-declaration by High Court and Supreme Court judges, giving the new address in 4. respect of their own accounts
- Proof of address issued by any of the following: Bank Managers of Scheduled Commercial 5. Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary Public/Elected representatives to the Legislative Assembly/ Parliament/Documents issued by any Government or Statutory Authority.
- 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.
- For FII/sub account Power of Attorney given by FII/sub account to the Custodians (which 7 are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.
- The proof of address in the name of the spouse shall be acceptable subject to the 8 submission of proof of relationship alongwith the same.
- D Exemptions/clarifications to PAN
  - (\*Sufficient documentary evidence in support of such claims to be collected.)
- In case of transactions undertaken on behalf of Central Government and/or State 1. Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
- Investors residing in the state of Sikkim.
- UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India. 3
- 4. SIP of Mutual Funds upto Rs 50, 000/- p.a.

- 5. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.
- List of people authorized to attest the documents:
- 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.
- In case of Non Individuals additional documents to be obtained from non-individuals over & above the POI & POA, as mentioned below :

Types of entity	Documentary Requirements
Corporate	Copy of the balance sheets for the last 2 financial years (to be submitted every year).  Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI Takeover Regulations, duly certified by the Company Secretary/Whole Time Director/MD (to be submitted every year).  Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations.  Photograph, POI, POA, PAN of individual promoters holding control-either directly or indirectly.  Copies of the Memorandum and Articles of Association and Certificate of Incorporation.  Copy of the Board Resolution for investment in securities market.  Authorised signatories list with specimen signatures.
Partnership Firm	Copy of the balance sheets for the last 2 financial years (to be submitted every year). Certificate of registration (for registered partnership firms only). Copy of partnership deed. Authorised signatories list with specimen signatures. Photograph, POI, POA, PAN of Partners.
Trust	Copy of the balance sheets for the last 2 financial years (to be submitted every year). Certificate of registration (for registered trust only). Copy of Trust deed. List of trustees certified by managing trustees/CA. Photograph, POI, POA, PAN of Trustees.
HUF	PAN of HUF. Deed of declaration of HUF/ List of coparceners. Bank pass-book/bank statement in the name of HUF. Photograph, POI, POA, PAN of Karta.
Unincorporated association or a body of individuals	1 1001 Of Existence/Constitution document.
Banks/ Institutional Investors	Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years.     Authorized signatories list with specimen signatures.
Foreign Institutional Investors (FII)	Copy of SEBI registration certificate.     Authorized signatories list with specimen signatures.
Army/ Government Bodies	Self-certification on letterhead.     Authorized signatories list with specimen signatures.
Registered Society	Copy of Registration Certificate under Societies Registration Act. Ist of Managing Committee members. Committee resolution for persons authorised to act as authorised signatories with specimen signatures. True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.

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

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

· Copy of ITR Acknowledgement

· Any other relevant documents substantiating ownership of assets.

· Copy of Annual Accounts

- · Copy of Demat account holding statement.
- · Self declaration with relevant supporting documents.

- In case of salary income Salary Slip, Copy of Form 16
- · Bank account statement for last 6 months
- 2. Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.

· Net Worth Certificate

- Demat master or recent holding statement issued by DP bearing name of the client. 3.
- - Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office.
  - In case of non-resident clients, employees at the stock broker's local office, overseas can do in-person' verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
- 5 For non-individuals:
  - Form need to be initialized by all the authorized signatories.
  - Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.

## CENTRALKYC REGISTRY | Know Your Customer (KYC) Application Form | Individual

#### 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	Application Type* ☐ New	□Update	
(To be filled by financial instit	ution) KYC Number	(Mandatory for	KYC update request)
	Account Type*   Norma	Simplified (for low risk customers)	] Small
1. PERSONALD	ETAILS (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*	D D M M Y Y Y Y		РНОТО
Gender*	∐ M-Male	☐ F- Female ☐ T-Transgender	
Marital Status*	☐ Married	Unmarried Others	
Citizenship*	☐ IN- Indian	Others (ISO 3166 Country Code )	
Residential Status*	<ul><li>☐ Resident Individual</li><li>☐ Foreign National</li></ul>	<ul><li>☐ Non Resident Indian</li><li>☐ Person of Indian Origin</li></ul>	
Occupation Type*	☐ S-Service (☐ Private Sector☐ O-Others (☐ Professional☐ B-Business☐ X- Not Categorised	□ Public Sector □ Government Sector ) □ Self Employed □ Retired □ Housewife	Signature / Thumb
2. TICK IFAPPLI	CABLE RESIDENCE FOR TAX PUR	RPOSES IN JURISDICTION(S) OUTSIDE INDIA	(Please refer instruction <b>B</b> at the end)
ADDITIONALDETAILS	REQUIRED* (Mandatory only if section 2 is	ticked)	
ISO 3166 Country Co	de of Jurisdiction of Residence*		
Tax Identification Num	ber or equivalent (If issued by jurisdiction)*		
Place / City of Birth*		ISO 3166 Country Code of Birth*	
3. PROOF OF IE	DENTITY (Pol)* (Please refer instruction C at	the end)	
(Certified copy of <b>any one</b> of	he following Proof of Identity [Pol] needs to be submitted)		
A- Passport Numb	er	Passport Expiry Date	D D M M Y Y Y
☐ B- Voter ID Card			
C- PAN Card			
☐ D- Driving Licence		Driving Licence Expiry Date	D D M M Y Y Y
☐ E- UID (Aadhaar)	x x x x x x x x x		
☐ F- NREGA Job Ca	ard		
Z- Others (any doo	cument notified by the central government)	Identification Numbe	r
S- Simplified Meas	sures Account - Document Type code	Identification Number	r
☐ I/we hereby declar	e that my PAN has already been seeded (I	inked) with AADHAR.	
4. PROOF OF A	ADDRESS (PoA)*		
4.1 CURRENT / PE	RMANENT / OVERSEAS ADDRESS DETAILS	(Please see instruction D at the end)	
(Certified copy of <b>any one</b> of	he following Proof of Address [PoA] needs to be submitted)		
Address Type*	Residential / Business Reside	ential ☐ Business ☐ Regis	stered Office Unspecified
Proof of Address*	_	g Licence UID (Aadhaar)	
	•	GA Job Card  Others	e s s e ify
A.1.1	Simplified Measures Account - Docume	nt Type code	
Address			
Line 1*			
Line 2		City / Town / V	illage*
District*	Pin / Post Code*		ISO 3166 Country Code*

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction E at the end)								
Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')								
Line 1*								
Line 2								
Line 3			City / Town / Vi					
District*	Pin / Post Code		State / U.T Code*	ISO 3166 Country Code*				
4.3 ADDRESS IN THE JU	URISDICTION DETAILS WHERE APPLICA	NT IS RESIDENT OUTSI	DE INDIA FOR TAX PURPOS	SES* (Applicable if section 2 is ticked)				
Same as Current / Perma	nent / Overseas Address details	Same as Corre	espondence / Local Address d	etails				
Line 1*								
Line 2								
Line 3			City / Town / Vil					
State*		ZIP / Post Co	ode*	ISO 3166 Country Code*				
5. CONTACT DETAILS (All communications will be sent on provided								
Т	Tel. (Res)		Mobile					
FAX	— Email ID							
☐ 6. DETAILS OF RELAT	ED PERSON (In case of additional related p	persons, ple ase fill 'Annexu	re B1') (please refer instruction	<b>G</b> at the end)				
Addition of Related Person	Deletion of Related Person	KYC Number of Re	lated Person (if available*)					
Related Person Type*	☐ Guardian of Minor ☐ A	ssignee [	Authorized Representative					
Nama*	Prefix First Name		Middle Name	Last Name				
Name*	(If KYC number and name are provided, be	ow details of section 6 are of	optional) el. (Off)					
			, (O.1.)					
_	I] OF RELATED PERSON* (Please see instru							
A- Passport Number		P	assport Expiry Date					
☐ B- Voter ID Card								
☐ C- PAN Card								
☐ D- Driving Licence		D	riving Licence Expiry Date					
☐ E- UID (Aadhaar)	x   x   x   x   x   x   x   x							
☐ F- NREGA Job Card								
Z- Others (any documer	nt notified by the central government)		Identification Number					
S- Simplified Measure	s Account - Document Type code		Identification Number					
☐ 7. REMARKS (If any)	Mo	bbile no. / Email-ID) (Please	refer instruction <b>F</b> at the end)					
A ARRI IOANT REGI	LABATION							
8. APPLICANT DECI	LARATION  nished above are true and correct to the best of my know	adea and haliaf and Lundartaka t	a inform you of any changes					
therein, immediately. In case any o	is ned above are true and correct to the best of my know.  If the above information is found to be false or untrue or mis	•	, , ,					
for it.				] 3 [Signature / Thumb Impression]				
	mation from Central KYC Registry through SMS/Email on the	ne above registered number/email a	ddress.	Signature / Thumb Impression of Applicant				
Date: DDD-MM-	Y Y Y Y Y Place :			Signature / mumb impression of Applicant				
9. ATTESTATION / F	OR OFFICE USE ONLY							
Documents Received	Certified Copies IPV Done							
Documents Received	Certified Copies PV Done							
KYC V	ERIFICATION / IPV Done BY		INSTITUTION	DETAILS				
Date DDMI	M Y Y Y Y Place	Name <b>Gu</b>	rustox Limited					
Emp. Name		Code						
Emp. Code								
Emp. Designation								
Emp. Branch								
				n Stamp]				
				**				

CENTRAL KYC REGISTRY   Know Your Customer (KYC)	Application Form   Legal Entity / Other than Individuals				
B) Tick 'wherever applicable.	List of State / U.T. code as per Indian Motor Vehicle Act, 1988 is available at the end. ) List of two character ISO 3166 country codes is available at the end. ) Please read section wise detailed guidelines / instructions at the end. 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 Application Type*	☐ Update				
(To be filled by financial institution) KYC Number	(Mandatory for KYC update request)				
$\hfill \square$ 1. ENTITY DETAILS* (Please refer instruction ${\bf A}$ at the end)					
□ Name*					
Entity Constitution Type* Others (Specify)	(Please refer instruction B at the end)				
Date of Incorporation / Formation* D D M M Y Y Y Y Y Date of Commencement of Business D D M M M Y Y Y Y					
Place of Incorporation / Formation*	Country of Incorporation / Formation* TIN or Equivalent Issuing Country				
PAN* Form 60 fu					
TIN / GST Registration Number	imisteu				
•	-444-				
2. PROOF OF IDENTITY (Pol)* (Please refer instruction B	,				
<ul> <li>☐ Officially valid document(s) in respect of person authorised to</li> <li>☐ Certificate of Incorporation / Formation</li> </ul>	Registration Certificate Regn Certificate No.				
Memorandum and Articles of Association	Partnership Deep Trust Deed				
Resolution of Board / Managing Committee	Power of attorney granted to its manager, officers or employees to transact on its behalf				
Activity Proof - 1 (For Sole Proprietorship Only)	Activity Proof - 2 (For Sole Proprietorship Only)				
3. ADDRESS* (Please see instruction C at the end)					
3.1 Registered Office Address / Place of Business*					
Proof of Address*	formation Registration Certificate Other Document				
Line 1*					
Line 2*	City / Town / Village*				
District	IN / Post Code* State / U.T Code* ISO 3166 Country Code*				
3.2 Local Address in India (If different from Above)*					
Line 1*	City/Taym/Village*				
Line 2*	City / Town / Village*   IN / Post Code*   State / U.T Code*   ISO 3166 Country Code*				
DISTRICT					
4. CONTACT DETAILS (All communications will be sent to	Mobile number/ Email-ID provided" may be used) (Please refer instruction <b>D</b> at the end)				
( )	AX IIID				
Wobiic	mail ID				
Mobile	mail ID				
5. NUMBER OF RELATIVE PERSONS (Please	e refer instruction <b>E</b> at the end)				
☐ 6. REMARKS (If any)					
7. APPLICANT DECLARATION (Please refer Instruction C	G at the end)				
I hereby declare that the details furnished above are true and correct to the be	est of my knowledge and belief and Lundertake to inform you of any				
changes therein, immediately. In case any of the above information is found to be	be false or untrue or misleading or misreprese nting, I am aware that I				
may be held liable for it.  * I/we hereby consent to receiving information from Central KYC Registry through SN	MS/Email on the above registered number/email address.				
Date: DD MM M Y Y Y Y Place:	Signature / Thumb Impression of Authorised Person(s)				
8. ATTESTATION / FOR OFFICE USE ONLY	Documents Received    ✓ Certified Copies   ✓ Equivalent e-document				
KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS				
Identity Verification Done Date	MMYYYYY Name Gurustox Limited				
Emp. Name	Code				
Emp. Code					
Emp. Designation					
Emp. Branch					
	[Institution Stamp]				
[Employee Signature]					

#### CENTRAL KYC REGISTRY | Instructions / Checklist / Guidelines for filling Legal Entity / Other than Individuals KYC Application Form

- A Clarification / Guidelines for filling Entity Details section
  - 1 Entity Contitution Type
    - A Sole Proprietorship
    - B Partnership Firm
    - C-HUF
    - D Private Limited Company
    - E Public Limited Company
    - F Society
    - G Association of Person (AOP) / Body of Individuals (BOI)
- H-Trust
- I Liquidator
- J Limited Liability Partnership
- K Artificial Liability Partnership
- L Public Sector Banks
- M Central/State Government Department or Agency
- N Section 8 Companies (Companies Act, 2013)
- O Artificial Juridical Person
- P International Organisation or Agency / Foreign Embassy or Consular office etc.
- Q Not Categorized
- R Others
- S Foreign Portfolio Investors
- 2. In case of companies and partnerships, PAN of the entity is mandatory. In case of other entities, FORM 60 may be obtained if PAN is not available3
- B. Clarification / Guidelines for filling 'Proof of Identity [Pol]' section
  - 1. Activity Proof 1 and Activity Proof 2 are applicable for accounts in case of proprietorship firm. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
  - 2. Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
  - 3. Certificate copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
  - '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 and Retention of information by intermediaries Providing Digital Locker Facilities) Rules 2016.
  - 5. 'Digital KYC process' has to be carried out as stipulated in the RML Rules, 2005.
  - 6. KYC Requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator form time to time.
- C. Clarification / Guidelines for filling 'Proof of Address' [PoA]' section
  - 1. State / U.T. Code and Pin / Post Code will not be mandatory for Overseas Addresses.
  - 2. Certified copy of document or equivalent e-document to be submitted.
- D. Clarification / Guidelines for 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
- E. Clarification / Guidelines for filling 'Related Person Details' section
  - 1. Personal Details
    - · The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
  - 2. Proof of address [PoA]
    - · PoAto be submitted only if the submitted Pol does not have address or address as per Pol is invalid or not in force.
    - State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
    - · In case of deemed PoAsuch as utility bill, the document need not be uploaded on CKYCR
    - REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.
  - 3. If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.
  - 4. Regulated Entity (RE) shall redact (first 8 digit) or the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- F. Provision for Capturing Signature of multiple authorised person is to be made by RE.

# **Gurustox Limited**



Corporate Office: H.No.- 1073, Sector 40, Gurgaon-122001

Date of Incorporation	•	PHOTOGRAF
Date of commencement Permanent Account Numb Registration No. (e.g. CIN) Status (Please tick any one) Private Limited Co. Trust HUF Defense Establishment	Public Ltd. Co. Body Corporate Partnership Charities NGO's FI FII	Please affix your recent passport size photograph and sign across it
ADDRESS DETAILS ddress for Registere	d Office	
City / Town / Village	Pin Code  Country	
el. (Res.)	Fax	
Specify the Proof of Addres Validity Expiry Date of Pro	s submitted for Correspondence Address:	
State	Pin Code  Country	
•	VI MUUI 633 VUNIIIILEU	

DECLARATION	
I/We hereby declare that the details furnished above are true and correct to the undertake to inform you of any changes therein, immediately. In case any of the at misleading or misrepresenting, I am/We are aware that I/we may be held liable for	bove information if found to be false or untrue
	<u>S</u> o
Date Name & S	Signature of the Director/Authorised Signatory(ies
FOR OFFICE USE ONLY	
In Person Verification (IPV) Details:	
Name of the person who has done the IPV:	
Designation:Employee ID:	
Name of the Organization: <b>Gurustox Limited</b>	
Date of IPV: Signature of the person who has done the	e IPV Cool/Ctomp of the Ctool/ Broker
	Seal/Stamp of the Stock Broker
Originals Verified & Self Attested Document copies received	
Date Place :	Name & Signature of the Authorised Signatory

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

1.	Name	PHOTOGRAPH
3 4.	a. PAN b. DIN/Aadhaar No Residential/ Registered Address	Please affix
5.	City / Town / VillagePin Code	your recent passport size photograph and sign across it
1	Marea	
1. 2. 3	Name	PHOTOGRAPH
4.	Residential/ Registered Address	Please affix
_	City / Town / Village Pin Code State Country	your recent passport size photograph and sign across it
5.	Please tick, if applicable :  Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)	
1. 2. 3	Name	PHOTOGRAPH
4.	Residential/ Registered Address	Please affix your recent passport
_	City / Town / Village Pin Code  State Country	size photograph and sign across it
5.	Please tick, if applicable :  Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)	
1.	Name_	
2.	Relationship with Applicant (i.e. promoters, whole time directors etc.)	PHOTOGRAPH
3 4.	a. PAN b. DIN/Aadhaar No Residential/ Registered Address	Please affix
	City / Town / Village Pin Code State Country	your recent passport size photograph and sign across it
5.	Please tick, if applicable : Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)	Sigil doloss it
1. 2. 3	Name	PHOTOGRAPH
4.	a. PAN b. DIN/Aadhaar No Residential/ Registered Address	Please affix
	City / Town / VillagePin Code StateCountry	your recent passport size photograph and sign across it
5.	Please tick, if applicable : Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)	
<u> </u>	me & Signature of the Authorised Signatory (ies)  Date:	M M Y Y Y Y

TRADING ACCOUNT	REL	ATED DETAILS		(For	Individual 8	& Non-Indi	viduals	<b>(5)</b>	NNEXURE-	3
A. OTHER DETAILS										
<ul><li>Gross Annual Income (please specify)</li></ul>	Detai	ls : Income Range	per annum	•	Rs. 1 Lac 0 Lac to 25 l	<del></del>			Rs. 5 Lac to	10 La Cror
OR				∐I <b>\</b> 3. I	0 Lac 10 25 1	Lac III NS	. 20 Lau	, to 1 Glore	; <u> </u>	Cion
Net Worth : Amount F (Net worth should not						as o	. ,		/or Non-Individ	
■ Occupation ☐ Private Sector ☐ Public Sector ☐ Business ☐ Government Service ☐ Profess							sional			
(please tick any one and give brief details) ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ OthersPl.Sp							.Specif			
<ul><li>Nature of Business</li></ul>		☐ Manufacturi	ng 🗌 Serv	vices [	Consultanc	y 🔲 Oth	ers		PI.Sp	pecify
■ Please tick, if applicab	ole	☐ Politically I	Exposed Per	rson (PEP)	□ R	elated to Po	olitically	Exposed P	erson (RPEF	P)
Any other information										
B. BANK ACCOUNT(S)	DET#	AILS								
Bank Name	В	Branch Address	Bank Acc	count No.	Accour	nt Type	MICR	R Number	IFSC (	Code
					☐ Saving	Current				
					Others.					
					In case of	NRI:				
					□NRE	□NRO				
C. DEPOSITORY ACCO	OUNT(	S) DETAILS								
Depository Participant Na	ame	Depository Name	Ве	eneficiary N	lame	DP II	)	Benef	iciary ID (BO	ID)
		☐ CDSL				121024		П		
TRADING PREFERI	ENCI									
Please sign in the relevan			o trade. Plea	ase strike o	ff the segmer	nt not chose	n by yo	u.		
Exchange	s			1	NSE & BSE					
All Segments Cash					F&O		Cı	urrency		
	J.	<b>L</b> o								
If you do not wish to tra	ade in	any of segments / N	lutual Fund,	please me	ntion here					

D. ADDITIONAL DETAILS							
Whether you wish to receive ph or Electronic Contract Note (E		Physical Contact Note Electronic Contract Note (ECN)					
I/We wish to avail facility provi	ded by the exchange	SMS Alert E-mail Alert Both					
In case of ECN/E-mail alert pl	. specify your Email-Id						
In case of SMS alert, please s	specify your Mobile No.						
Whether you wish to avail of th trading/ wireless technology							
Number of years of Investmer	nt/Trading Experience						
In case of non-individuals, na UID, signature, residential ad of persons authorized to deal of company/firm/others:	dress and photographs						
Any other information							
E. INTRODUCER DETAILS (d	optional)						
Name of the introducer							
Status of the Introducer	☐ Sub Broker ☐ R	Remisier Auth. Person Existing Client Others					
Address and Phone No.							
of the Introducer							
Sign. of the Introducer							
		DECLARATION					
to inform you of any change misrepresenting, I am/we	es therein, immediately. are aware that I/we may	e are true and correct to the best of my/our knowledge and belief and I/we undertake. In case any of the above information is found to be false or untrue or misleading or ay be held liable for it.  Herstood the contents of the document on policy and procedures of the stock broke					
and the tariff sheet.	·						
Document'. I/We do hereby	3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosu Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed the standard set of documents has been displayed for Information on stock broker's designated website, if any.						
I/We declare that Gurustox pro-account trading.	Limited the broker, have	ve put me/us on notice that it is engaged in not only client based trading but also in					
<u>£</u> 15							
Client Signature							
Place		Date D D M M Y Y Y Y					

Document verified with Originals  the client aware of 'Polis and Obligations' docu	Client Interviewed By		n-Person Verification Done by
with Originals the client aware of 'Poli			
	•		
so undertake that any			
ory			
			Seal / Stamp of the Stock Broke
DECLARAT	ON OF FAMILY MEMBER	S	
(To be tak	en from all family member	rs)	Date :
Gurgaon-122001			- Julio
	having trading	Account beari	ing client code
u that my under mentio	ned family members are als	so maintaining tra	ading accounts with you.
e of Members	Tra	ding Code	Relation with Account Holder
e above family member sider my / our design	s for all communication in rated Email Id:		a
	DECLARATI (To be take Gurgaon-122001 s  ou that my under mention e of Members  ider my / our designate above family member sider my / our designate above family my /	DECLARATION OF FAMILY MEMBER (To be taken from all family member  Gurgaon-122001  s  having trading ou that my under mentioned family members are alse of Members  Tradiction our designated Mobile No.:  e above family members for all communication in resider my / our designated Email Id:	DECLARATION OF FAMILY MEMBERS (To be taken from all family members)  Gurgaon-122001  S having trading Account bear but that my under mentioned family members are also maintaining trace of Members  Trading Code  ider my / our designated Mobile No.:  a above family members for all communication in respect of any of

Client Signature

	mination Detai		DATE	UCC/DP ID	/12102400 CLIE	ENT ID
			ion. [As per detail	's given below] / nominate the following person(s) w	the shall receive all the accete	hold in my/our account in the
	nt of my/our dea		lion and do nereby	Thominate the following person(s) w	TIO STIAII TECEIVE AII LITE ASSELS	s rield in my/our account in the
Noi	mination can be	made ı	up to three	Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
non	ninees in the acc			Details of 15t Nominee	Details of 2nd Nominee	Details of Srd Nominee
1	Name of the no	minee(	s) Mr./Ms.)			
	Share of	E	qually	%		%
2	Each Nominee		qually, please	Any odd lot after divisi	on shall be transferred to the first no	minee mentioned in the form
_			percentage]	7 thy odd fot ditor divisi		milited including in the form.
3	Relationship with t		cant (if any)			
4	4 Address of Nominee					
	City / Place					
	State & Country					
	PIN					
5	Mobile/Telephone	No of n	nominee(s)#			
6	Email id of nomi	inee(s)#	!			
7	Nominee Identi	fication	n Details#			
	[Please tick any					
	and provide de		•			
	☐ Photograph & ☐ PAN ☐	Signati Aadha	ure nar			
	☐ Saving Bank A/c No.					
	☐ Proof of Ide	entity	<b>)</b>			
Ç,			ed only if nomin	ools) is a minor		
	Date of Birth		<u> </u>	ee(s) is a illillor.		
8	{in case of minor nominee(s)}					
9	Name of Guardian (Mr./Ms.) {in case of minor nominee(s) }		nee(s) }			
10	Address of Gua	rdian(s	5)			
	City / Place					
	State & Country					
	PIN					
11	Mobile / Telephone	e no. of	Guardian#			
12	Email ID of Guardia	an#				
13	Relationship of Gu	ardian w	vith nominee			
14	Nominee Identi					
	[Please tick any					
	and provide de  ☐ Photograph &		-			
	□ PAN □	Aadha	ıar			
	<ul><li>☐ Saving Ban</li><li>☐ Proof of Ide</li></ul>		No.			
	☐ Demat Acco		)			
No.	te: This nomination	n shall	supersede any pr	ior nomination made by the account shall provide acknowledgement of the	holder(s), if any.	ount holder(s)
		, 23po	r armorpant	Name(s) of holder(s)		Signature(s) of holder*
Sole	e/First Holder (Mr./I	Ms.)				<b>£</b> 17
Sec	ond Holder (Mr./Ms	5.)				£
	d Holder (Mr./Ms.)	,				
* Si	gnature of witnes	s, alono	g with name and	address are required, if the account	holder affixes thumb impress	ion, instead of signature
# 0	intional Fields (In	itormat	ion required at S	erial nos 5 6 7 11 12 & 14 is no	nt mandatory)	

# **Declaration form for opting out of nomination DATE Gurustox Limited** CIN No. - U67120DL1993PLC056460 Regd. & Corporate Office: 1401, 14th Floor Chiranjiv Tower, 43 Nehru Place, New Delhi- 110019 H.NO.-1073, Sector 40, Gurgaon 122001 Tel.: + 91-1244061723 ,9667953516 ,9 8 1 8 1 3 3 8 8 3 Email: hplnse@Gmail.com, In case of any grievances please write to info@Gurustox.com SEBI Regn. No.:INZ000255037 Exchange Registration Nos NSE: 08052,BSE:6249 Clearing No- M50644 SEBI DP Registration No: IN-DP-805-2025, CDSL Depository Participant ID: 12102400 1 2 1 0 UCC/DP ID 0 2 4 0 **Client ID (only for Demat account)** Sole/First Holder Name **Second Holder Name Third Holder Name** I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in nonappointment 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. Name(s) of holder(s) Signature(s) of holder\* Sole/First Holder (Mr./Ms.)

Second Holder (Mr./Ms.)

Third Holder (Mr./Ms.)

( )

<sup>\*</sup> Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature

	TARIFF SHEET	
	(BROKERAGE CHARGI	ES)
	CASH SEGMENT	
Brokerage Slab	Slab in %	Minimum per Share
Delivery Based		
Square off		
	F & O SEGMENT	
Brokerage Slab	Slab in %	Minimum per Lot
Futures		
Options		
charged separately Late payment penalt In case an interne be charged separ Charges/ service star	g Charges, Stamp duty, GST, SEBI Fee, STT, CTT, and all legal in addition to the brokerage.  y @18% p.a. calculated on daily overdue balance shall be charget trading terminal is provided, connectivity charges @rately.  Indianally are subject to revision at sole discretion of Gurustox Lirve are for the services listed. Any service not quoted above will	rged till actual realisation.  PRs/- per month or% of turnover shall nited.  I be charged separately.
		<u> </u>
	DISCLOSURE REGARDING PROPRIE	
As required under Circul	RE REGARDING PROPRIETARY TRADING  ar No. SEBI / MRD / SE / Cir-42 / 2003 dated 19.11.2003 is addition to client-based business, I/We am/are also doing	ssued by the Securities and Exchange Board of India; I/We proprietary trading.
I/we acknowledge t	he above information.	For Gurustox Limited
<u></u> 9 Client Signatu	ure	Authorised Signatory
	PMLA DECLARATION	N
		_with Gurustox Limited confirm and declare that I/We have was also explained by Gurustox Limited authorised official ents mentioned in the PMLA Act, 2002.
<b>₡</b> л 10		

Client Signature

	RUNNING ACCOUNT AUTHORISATION
То	Date :
	rustox Limited rporate Office: H.No 1073, Sector 40, Gurgaon-122001
	Sub: Running Account Authorisation
I/W	e am/are dealing through you as a client in Capital Market and/or Future & Option segment and/or Currency segment and/or Commodity
	gment and/or Interest Rate Future segment in order to facilitate ease of operations and upfront requirement of margin for trade. I/We thorise you as under:
1.	I/We request you to maintain running balance in my/our account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing Corporation unless I/We instruct you otherwise.
2.	I/We request you to settle my/our fund account at least
	Once in every calendar quarter or
	Once in a calendar month.
3.	In case I/We have an outstanding obligation on the settlement date, you may retain the requisite funds towards such obligations and may also retain the funds expected to be required to need future margin /settlement obligations computed in the manner as prescribed by SEBI/Exchange from time to time.
4.	I/We further authorise you to retain such minimum value of funds at the time of settlement of a/c's as may be allowed by the exchange(s)/SEBI from time to time.
5.	I shall bring any dispute arising from the statement of account or settlement so made to your notice to 30 working days from the date of receipt of funds or statement, as the case may be else it will be final.
The	e running account authorisation provided by me/us shall continue and remain valid until it is revoked by me/us anytime in writing.
Th	anking you
You	urs faithfully,
L	<u>1</u> 11
	Client Signature

ELECTRONIC CONTRACT NO	TE (ECN) DECLARATION (for NSE, BSE, CDSL)
To,	Date :
Gurustox Limited	
Corporate Office: H.No 1073, Sector 40, Gurgaon-122001	
Dear Sir,	
I/Wea	client with member M/s.
of	
I/We am/are aware that the member has to provide physical provide physical physical provides a second provide physical provides and provides physical p	sical contract note in respect of all the trades placed by me/us unless
I/We myself want the same in the electronic form.	
I/We am/are aware that the member has to provide elec-	tronic contract note for my/our convenience on my/our request only.
	ntract note, I/We find that it is inconvenient for me/us to receive physical contract for delivery of electronic contract note pertaining to all the trades carried out
<ul> <li>I/We have access to a computer and am/are a regular in</li> </ul>	nternet user having sufficient knowledge of handling the Email operation.
My/our Email-Id is*	
This has been created by me/us and not by someon	ne else.
I/We am/are aware that this declaration form should be in	n English language or in any other Indian language known to me/us.
<ul> <li>I/We am/are aware that non-receipt of bounced mail above e-mail-id.</li> </ul>	notification by the member shall amount to delivery of the contract note at the
I/We am/are aware that this authorisation can be revoked.	at any point of time by giving a notice in writing.
The above declaration and the guidelines on ECN given	in the Annexure have been read and understood by me/us.
I/We am/are aware of the risk involved in dispensing with	h the physical contract note and do hereby take full responsibility for the same.
*(The email-id must be written in own handwriting of the client	t)
Client Name :	
Unique Client Code :	
A 11	
<b>£</b> 12	
Client Signature	
Date :Place:	
Verification of the client signature done by,	
Name of the decimated officer of the March -	
Name of the designated officer of the Member	

Signature\_\_\_\_

	LETTER OF AUTHORITY		
To,	Date :		
Gurustox Limited	Date		
Corporate Office: H.No 1073, Sector 40, Gurgaon-122001			
•	Letter of Authority - NSE / BSE		
<ul> <li>I/We am/are dealing in shares/securities with you at N authorise you as under:</li> <li>Delivery of order/ trade confirmation/ cancellation:</li> <li>I/We hereby authorise you not to provide me / us of the confirmation of the confirmatio</li></ul>	NSE/BSEin various segments and in order to facilitate ease of operations. I/We order confirmation / modification / cancellation slips and trade confirmation slips to quired details from contract notes and confirmation issued by you.		
<ol> <li>Telephonic Conversation:</li> <li>I/We request you to consider my/our telephonic i</li> </ol>	instructions for order placing/order modification/order cancellation as a writter hone unless instructed otherwise in writing. I/We am/are getting required details from		
<ol> <li>Fines &amp; Penalties:         All fines/penalties and charges levied upon you du account.</li> </ol>	ue to my/our acts / deeds or transactions may be recovered by you from my/our		
depository services from my/our trading account. I/ adequate advance fee for the said reason.	withPlease debit the charges relevant with We also agree to maintain the adequate balance in my/our trading account / pay		
	give any of the above authorisation and that the above authorisations are voluntary sation at any point of time during the operation of my/our trading account with you by		
Thanking you. <u>An 13</u>	_		
Yours faithfully, Client Signature			
FOR REGISTRATION AND VERIF	ICATION OF MOBILE NUMBER AND E-MAIL ADDRESS		
To,	Date :		
The Compliance Officer	Member Id's :		
Gurustox Limited	08052 (NSE), 6249 (BSE)		
Corporate Office: H.No 1073, Sector 40, Gurgaon-1220			
hereby provide and confirm my/our mobile number and/trades	alerts to the constituents (clients) of its member for executed on its platform. I/We or email address as stated below for the purpose of receipt of SMS/e-mail alerts.		
<ul> <li>I/We want to receive transaction alerts through SMS</li> <li>I/We want to receive transaction alerts only through</li> <li>I/We want to receive transaction alerts only through</li> <li>I/We do not want to receive any transaction alerts fr</li> </ul>	SMS from Exchanges. email from Exchanges. rom Exchanges, specify reason		
The alerts should be sent on :			
Mobile number (enter 10 digit mobile no.)			
E-mail-ld:			
I/We agree to the terms and conditions specified by the	e Exchange in its circular no. SEBI/4/2012/C/13 dated 02/02/2012 as modified f SMS/E-mail alerts on the above mobile number and/or email address can be		
<u></u> 14 Client Signature			

Declaration for	r Trading in Derivative
To,	Date :
Gurustox Limited	
Corporate Office: H.No 1073, Sector 40, Gurgaon-122001	
Dear Sir,	
Subject : Declaratio	on for Trading in Derivative
in trading in Equity/Currency/Commodity derivative (Future and Operegard, I also agreed to update financial information on annual Risk disclosure with respect to trading by individual traders in Equity i. 9 out of 10 individual traders in equity Futures and Options Seg ii. On an average, loss makers registered net trading loss close to iii. Over and above the net trading losses incurred, loss makers ex iv. Those making net trading profits, incurred between 15% to 50% <b>SOURCE:</b> SEBI study dated January 25, 2023 on, Analysis of P	Futures & Options Segment ment, incurred net losses. Rs. 50,000./- pended and additional 28% of net trading losses as transaction costs.
Client Name :	Client Code :
<b>/</b> ⊒15_ Client Signature	

# Most Important Terms and Conditions (MITC) (For Non-Custodial Settled Trading Accounts)

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

		16
Date:	<u>Place:</u>	Signature of First Holder

# DECLARATION, INDEMNITY CUM UNDERTAKING FOR NAME DISCREPANCY IN PAN CARD, BANK PROOF & ADDRESS PROOF

To,	Date :
	ustox Limited porate Officer H.No 1073, Sector 40, Gurgaon-122001
•	
I/ V \	/es/o., w/o., d/o, refer to my/our Trading
Ac	countwith Gurustox Limited do hereby affirm, declare and undertake that:
1.	My/our name as it appears on my/our PAN Card is
2.	My/our name as it appears on the Income Tax website is
3.	Additional ID Proof
4.	My/our name as it appears on the Address proof is
5.	My/our name as it appears on the Bank Proof is
ô.	Above mentioned names on Trading account, Tax website, Address proof, PAN Card Noand Bank
	account bearing noare mine alone.
7.	I/We hereby request GURUSTOX to maintain my/our name in Demat and Trading account as per the name appearing on the website
	/ PAN card.
8.	That I/We promise and undertake to get my/our PAN card altered in accordance with my/our name as appearing on the Income Tax
	within 45 days from the date of signing this undertaking. GURUSTOX may, at its sold discretion, terminate my/our trading and demat
	account in the event of me/us not getting my/our name altered within 45 days of signing this undertaking.
9.	I/We further undertake to open a bank account in accordance with the name as appearing on the Income Tax website within a week from
	the date of signing this undertaking.
10.	I/We further undertake that in case my/our name has been changed after approal from government authorities and notified in the gazette, I/We shall get the name change effected in PAN, Bank account etc. and furnish immediately to GURUSTOX.
11.	I/We further declare that I/We am/are responsible and I/We shall indemnify and keep indemnified GURUSTOX, its directors,
	officers, employees, agents from and against any and all losses, claims, liabilities, obligations, damages, deficiencies, judgements,
	action proceedings arising out or in relation to corporate benefits, IPO refund, Foreign Exchange Management Act (FEMA)
	transfer, dematerialization of securities, rematerialization of securities, dividends, interest etc. that may arise out of or as a cons equence and
	this declaration and/or acting on this basis.
Tha	at the contents of this declaration, Indemnity-cum-Undertaking have been explained to me/us in vernacular language and I/We have
und	lerstood before signing it. That this declaration, Indemnity-cum-Undertaking given by me/us to GURUSTOX is by my/our absolute free
will	and not under any coercion, undue influence, pressure etc., with a stable mind and in sound health.
L	1 <b>7</b>
	Client Signature

8	
GuruStov	

# **FATCA & CRS Declaration - Individual**

GuruStox					
PAN					
Place of Birth	Country of Birth				
Nationality					
Annual Income Upto Rs. I Lac Rs. 10 Lac to 25 Lac	Rs. I Lac to 5 Lac	Rs. 5 Lac to 10 Lac			
Net Worth <b>Amount Rs</b> (Net worth should not be older than I year)	Net Wor	th as on DDMMMYYYY			
Occupational Business Private  Detail Agriculturist House		ernment Service Public Sector  Dealer Others Pl. Specify			
Politically Exposed Person (PEP)	Related to Politically Exposed Pe	rson (RPEP)			
Are you a tax resident of any country oth If yes please indicate all the countries in whi		the associated Tax ID number below.			
Sr. Country	Tax Identification Number	Identification Type (TIN or Other, please specify)			
I.		71 1 177			
2.					
3.					
	DECLARATION				
I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me in this Form is true, correct and complete. I hereby agree and confirm to inform <b>Gurustox Limited</b> of any modification to this information immediately. I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).					
Date: D D M M Y Y Y Y P					
For Investor convenience, Gurustox Limited. collects this mandatory information for updating across all Group Companies of Gurustox Limited. whether you are already an investor or would become an investor in future.					
Please submit the form duly filled and signed for all the holders separately and submit at your nearest Gurustox Limited branch or you can dispatch the hard copy to-					
Gurustox Limited Corporate Office: H.No 1073, Sector 40, Gurgaon-122001					

FATCA & CRS Declaration - Non Individual					
PAI	PAN				
Na	me				
Plea	se tick the applicable tax resident declaration	ı <b>-</b>			
	s "Entity" a tax resident of any country other t yes, please provide country/ies in which th	_	Yes No resident for tax purposes and the asso	ciated Tax ID number below.)	
Sr. No.	Country		Tax Identification Number	Identification Type (TIN or Other", please specify)	
1.					
2.					
3.					
In ca	<u>'</u>	able, please pro	ovide Company Identification Number or	Global Entity Identification Number or GIIN, etc.  Person, mention entity's exemption code here	
PΛΙ	RT <b>A</b> (to be filled by Financial Institutions or Direct R	oborting NEEs)			
I. We are a, Financial institution (Refer I of Part C) or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate)  GIIN  Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's name below Name of sponsoring entity  Name of sponsoring entity					
	GIIN not available (please tick as applicable)	Applie Not re	od for Not obtained – quired to apply for - please specify 2 digits	Non-participating FI s sub-category (Refer   A of Part C)	
PAI	RT <b>B</b> (please fill any one as appropriate "to be filled b	y NFEs other tha	n Direct Reporting NFEs")		
1.	Is the Entity a publicly traded company (that whose shares are regularly traded on an establis securities market) (Refer 2a of Part C)	is, a company shed	Yes		
2.	2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)		Yes (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)  Name of listed company  Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company  Name of stock exchange		
3.	3. Is the Entity an active NFE (Refer 2c of Part C)		Yes Nature of Business Please specify the sub-category of Active NFE (Mention code – refer 2c of Part C		
4.	4. Is the Entity a passive NFE (Refer 3(ii) of Part C)		Yes Nature of Business_		
Ų	UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)				
Cat	egory (Please tick applicable category):  Unincorporated association / body of individuals		Partnership Firm Charitable Trust Religious Trust	Limited Liability Partnership Company Private Trust	
	Others (please specify		) tries of tax residency / permanent residency / c	itizenship and ALL Tax Identification Numbers for EACH	

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

Details	UBO1	UBO2	UBO3		
Name of UBO					
UBO Code (Refer 3(iv) (A) of Part C)					
Country of Tax residency*					
PAN #					
Address					
	Zip	Zip	Zip		
	State:_	State:	State:		
	Country:	Country:	Country:		
Address Type	☐ Residence ☐ Business ☐ Registered office	☐ Residence ☐ Business ☐ Registered office	☐ Residence ☐ Business ☐ Registered office		
Tax ID <sup>%</sup>					
Tax ID Type					
City of Birth					
Country of birth					
Occupation Type	☐ Service ☐ Business ☐ Others	☐ Service ☐ Business ☐ Others ☐	☐ Service ☐ Business ☐ Others		
Nationality					
Father's Name					
Gender	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others		
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY		
Percentage of Holding (%) <sup>\$</sup>					
" If UBO is KYC compliant, KYC proof to Protector of Trust to be specified where "In case Tax Identification Number is not	* To include US, where controlling person is a US citizen or green card holder  "If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.  "In case Tax Identification Number is not available, kindly provide functional equivalent  S Attach valid documentary proof like Shareholding Pattern duly self attested by Authorized Signatory / Company Secretary.				
	DECL				
I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. L Thereby agree and confirm to inform Gurustox Ltd. for any modification to this information promptly.  I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).					
Name	,				
Designation					
		Date: D D	MMYYYY		
Sign here : 19		Place :			
For Investor convenience, Gurustox Limited collects this mandatory information for updating across all Group Companies of Gurustox Limited. whether you are already an investor or would become an investor in future. Please submit the form duly filled and signed for all the holders separately and submit at your nearest Gurustox Limited branch or you can dispatch the hard copy to-					
Gurustox Limited Corporate Office: H.No 1073, Sector 40, Gurgaon-122001					
For Detail Term & Conditions Please Visit www.gurustox.com					

CHECK LIST OF THE DOCUMENTS FOR O	DPENING OF DEMAT / TRADING ACCOUNT   Check List For HUF
☐ Photocopy of PAN card (Self attested)	☐ Photocopy of PAN card of HUF and Karta
☐ Photocopy of Address proof (Self Attested)	☐ Photocopy of Bank Statement for last 6 months.
☐ Cancelled cheque (if A/c name not mentioned on cheque then provide bank statement also)	Cancelled cheque (if A/c name not mentioned on cheque then provide bank statement also)
Photocopy of Bank Statement for last 6 months / Income Tax Return (Last Two Years)	Photocopy of Bank Statement for last 6 months / Income Tax Return (Last Two Years
☐ Demat Client Master / Demat Holding Statement or Demat A/c Opening form.	<ul> <li>Demat Client Master / Latest Demat Holding Statement or Demat A/c Opening form</li> </ul>
☐ Margin Cheque (Account Payee favoring "Gurustox Limited USCNBA)	☐ Margin Cheque (Account Payee favoring "Gurustox Limited USCNBA).
☐ 1 Photograph duly pasted & sign across on page no. 1	Photograph duly pasted & sign across (1-photo on page no. 5
	☐ Photocopy of Address proof of Karta
	Fill the List of Co-parceners / Member on the page no.7 of KYC form
	OR CORPORATE  Contact Name:  Contact No.
M/s Copy of PAN (Permanent Account Number) of the Non-Individual	Contact Name:Contact No.: Copy of Board Resolution or declaration (on the letterhead) naming
<ul> <li>Copy of Address Proof (Form-18 with Payment Receipt, Bank Statement for last 6 months)</li> <li>Copy of the balance sheets for the last 2 financial years (to be submitted every year).</li> <li>Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year).</li> <li>Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations.</li> <li>Photograph, POI, POA, PAN of individual promoters holding control either directly or indirectly.</li> <li>Copies of the Memorandum and Articles of Association and certificate of incorporation.</li> <li>Copy of the Board Resolution for investment in Securities market.</li> </ul>	the persons authorized to deal in derivatives on behalf of company/firm/others and their specimen signatures.  Copy of the Board Resolution for Opening of Demat Account Cancelled Cheque (Alongwith the Bank statement for last six month if name of client is not mentioned) Income Tax Return (for last 2 year) Demat Client Master / Latest Demat Holding Statement /Demat Account Opening Form 1 each photo of Authorised Signatory/ signatories on duly pasted, stamped & signed across. 1 each photo of Authorised Signatory/ signatories on Demat Account. 1 each photo of Authorised Signatory/ signatories on CKYC form. Power of Attorney (POA) for Demat A/c
Note: All the Document & KYC form must be stamp & s	ign by the Authorised Signatory as the Board Resolution
ADDITION IN MOA:- To buy, sell or/and deal in all kind of shares, stocks, securities, equity units, commodity derivateive and other instruments of all types. To deal in foreign exchange, and currencies and to convert currence.	derivative, currency derivative, Future & Options, bonds, debentures, cies subject to approval of appropriate.
NRI Trading Account Demat Account Additional Documents required in case of NRI:  Document ensuring status of entity In case of Indian passport Valid passport, Place of birth as India, Valid Visa-Work/Student/employment/resident permit etc. In case of Foreign passport: Valid passport and any of the following Place of Birth as India in foreign passport Copy of PIO/ OCI Card as applicable in case of PIO/OCI Copy of Passport (all pages). In case of place of birth is not India, proof of applicant being person of Indian Origin is required. Indian Address and Foreign Address Proof. PIS Permission Letter from the respective designated bank. Bank verification letter indicating type of A/c as NRI/NRO/NRE.  OAMS Gard Address  Driving License / Foreign passport / Utility Bills / Bank Statement (not more than 2 months old) Notarized copy of rent agreement / leave & license agreement / Sale deed. Photograph of Investor. Proof of respective bank account & depository accounts. FEMA / FERA undertaking. (As per the attached with the KYC)	<ul> <li>An NRI can deal with only one bank at any point of time. PIS (Portfolio Investment Scheme) approval can be issued by only one bank.</li> <li>Intra day trading is not allowed for NRIs. NRIs can trade only in delivery-based transactions.</li> <li>BTST (Buy Today Sell Tomorrow) is not allowed to NRIs.</li> <li>NRI will be allowed to invest only up to 5 % of the paid up capital of the company. NRIs are NOT allowed to buy certain scrips under this regulation. Report of the same is available on the RBI website. http://www.rbi.org.in/scripts/BS_FiiUSer.aspx</li> <li>NRIs need to have 100% funds at the time of buying. No exposure is given to NRIs. Same way, they need to have 100% stock available to them while selling. No short selling allowed.</li> <li>Contract notes of NRIs are daily reported to respective Bank and bank in turn report them to RBI. Reporting is taken care by Member.</li> <li>A NRI is required to make bill-to-bill payments. No adjustments of purchase against sale consideration can be done. Purchase and Sales will be dealt separately for payments / receipts.</li> <li>IPOs/Mutual funds can be applied through NON PIS i.e. Through NRE/NRO Savings account.</li> <li>FNO transactions can be routed through NRO NON PIS i.e. through NRO Savings account For FNO transactions separate code is allotted by NSE and the same has to be punched at the time of placing FNO order for NRI clients along with the client code.</li> </ul>

It may kindly be noted that NRI A/c's are controlled both by SEBI and RBI. Non compliance on the above defined parameters is a very serious offence and is taken very seriously as the same is taken a violations in FEMA



(if applicable Nationality

Indian

# **Gurustox Limited**

CDSL DP ID: 12102400 • SEBI REGN. No. IN-DP-805-2025
Corporate Office: H.No.- 1073, Sector 40, Gurgaon-122001
Ph : 0124-4061723 • F-mail: info@Gurustox.com



Ph.: 0124-4061723 • E-mail: info@Gurustox.com ISO 27001 Certified ADDITIONAL KYC FORM FOR OPENING A DEMAT ACCOUNT FOR INDIVIDUALS & NON-INDIVIDUALS (To be filled by the Depository Participant) Application No. Date DP Internal Reference No. DP ID 1 2 2 0 O Client ID (To be filled by the applicant in BLOCK LETTERS in English) I/We request you to open a demat account in my/our name as per following details: **HOLDERS DETAILS** Sole/First Holder's PAN Name Date of Birth UID Second Holder's PAN Name Date of Birth UID D M Third Holder's PAN Name M Date of Birth UID PAN Name\* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above. TYPE OF ACCOUNT (Please tick whichever is applicable) Individual Resident **Individual Director** Individual Director's Relative ∃ Individual Individual HUF/AOP Individual Promoter Minor Individual Margin Trading A/c (Mantra) Others (Specify)  $\ \ \ \mathsf{NRI}$ NRI Repatriable NRI Non-Repatriable NRI Repatriable Promoter NRI Non-Repatriable Promoter NRI - Depository Receipts Others (Specify) Foreign National-Depository Receipts Others (Specify) Foreign National Foreign National Sub-Status Status (To be filled by the DP) Banks Trust Mutual Fund ☐ OCB ☐ FII **Body Corporate** CM □FI Clearing House Other (Specify) SEBI Registration No. D D M **SEBI** Registration Date (if applicable) SEBI Registration No. D D M RBI Approval Date (if applicable) ROC Registration No.

Others (specify)

**ROC** Registration Date

DETAILS OF GUARDIAN (in case the account holder is minor)															
Guardian's Name								PAN	1						
Relationship with the ap	plicant							•			•				
I/We instruct the DP to r (if not marked, the defa				my/our ad	ccount							[Auto	matic C	redi	
I/We would like to instruct	the DP to	accept all the	e pledge	instructions	s in my/our	account	withou	ut any					<u> </u>		
other further instruction from				- '				· · · · · · · · · · · · · · · · · · ·				Yes	<u> </u>	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 and on Website.															
the default option would b									narked	l,		Yes		No	)
I/We would like to share	e the email	ID with the	RTA									Yes		No	)
I/We would like to recei			fault opti	ion would	be in Phys	ical)		Physic	al [	_ E	lectro	onic[			ysical ronic
Rajiv Gandhi Equity Sa	ving Schem	ne (RGESS)				•						Yes		No	)
CAS Mode (Consolidate	ed Account	Statement)		No (€	CAS not re	quired)		☐ PH	l (Phy	/sical	CAS	require	ed)		
Mental Disability Flag			•									Yes		No	)
			BANK D	ETAILS (I	Dividend E	Bank De	tails)								
Bank Code (9 digit MICR Code)															
IFS Code (11 Character)										ſ				Τ	
Account Number				1											
Account Type	Savin	ng 🗌 Cu	rrent	Cash C	redit	NRE		NRO	Ot	hers	(spec	ify)			
Bank Name															
Branch Name															
Bank Branch Address															
City	[	State			Col	untry				PI	N			T	
(i) Photocopy of the c (ii) Photocopy of the B (iii) Photocopy of the P ➤ In case of option	Bank Staten Passbook h	neque havin ment having aving name	name a and adr	nd addres ess of the	account h s of the B0 BO, (or)	older wh O.				oks is	s issu			-	
				OTHE	R DETA	ILS									
Gross Annual Income (please specify) :	Details		ne Range annum		oto Rs. 1 L s. 10 Lac to		_	Rs. 1 La Rs. 25 la			ore		. 5 Lac ore that		
Net Worth (Net worth should not be older than 1 year) Amount Rs															
Please tick, if any of authorized signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors is either															
☐ Politically Exposed	☐ Politically Exposed Person (PEP) ☐ Related to Politically Exposed Person (RPEP) (PI. provide details as per Annexure 2.2A)														
Is the entity involved/providing any of the following services :															
Any Other Information	Any Other Information														

IN CASE OF NRIs/FOREIGN NATIONALS								
RBI Approval Reference Nur	nber							
RBI Approval Date		D D M	MYYY	Y				
		CLEARING MEI	MBER DETAILS (To	be filled	by CMs only)			
Name of Stock Exchange								
Name of CC / CH								
Clearing Member ID					Trading Member ID			
SMS Alert Facility Refer to Terms & Conditions given as Annexure 2.4	[Mand	MOBILE No.: + 9 1						
Transactions Using Secured Texting Facility	I have	I 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.  I wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST						
(TRUST) Refer to Terms and Conditions	S.No.		ange Name/ID		aring Member Name	Clearing	Member ID tional)	
Annexure 2.6	1.							
	2.							
	3.							
	4.							
	5.							
Easi			ease visit our websit v his ISIN balances		lindia.com. ns and value of the portfolio	online.	☐ Yes ☐ No	
The mobile number mentioned here belongs to name of relative								
Self Spouse Dependent parent Dependent children PAN of relative								
The email ID mentioned here belongs to name of relative								
Self Spouse Dependent parent Dependent children PAN of relative								
/We confirm that I/We have received and read the copy of Rights & 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								

I/We confirm that I/We have received and read the copy of Rights & 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.

	First / Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures	<b>£</b> 1 20		Lo

(Signature should be preferably in blue ink)

# Combined Registration Form for availing SMS Alert and/or TRUST facility and for registering Clearing Members on whose behalf the securities can be transferred from the account of BO on the basis of SMS under TRUST Facility

To,															Date	<u>:</u>		
Gurustox Corporate			1072 Cod	otor 10 (	Jurano	. 1220	<b>n</b> 4											
Corporati	e Office:	П.INU	1073, 360	JUI 40, (	Juiyao	1-12200	J I											
condition	h to avai ons as s MART - <sup>:</sup> RUST - <sup>:</sup>	I the for pecific SMS al	ed by C lert facilit ction usir	DSL. y ng Secu	red T	extinç	g facility	/.		·	·	nobile nu	ımber as	s provided	below s	ubject to	the tern	ns and
BO ID		2	1	0	2	4	1	1	0	•								
		(Ple	ease wri	te your	8 dig	it DP	ID)	·				Į.	(Plea	se write yo	our 8 dig	jit Client	ID)	
Sole/Fir	rst Hold	er's N	ame : _															
Second	l Holder	's Nar	me :_															
Third H																		
	1					nemb	er / ID:			•			ed BO II	O registere			/- /-	
<b>Sr. No.</b>	. S1	ock E	xchange	Name	e/ID				Cle	earing N	lember	Name		Cle	aring M	lember	ID (Opti	onal)
2.																		
3.																		
4.																		
5.																		
	No. on les are to			+	9		1											
						•		(Ple	eas	e write	only the	mobile	number	without p	efixing of	country	code or	zero)
												for TRU	ST is dif	ferent than	the regi	istered n	nobile nu	ımber for
SMS ale	•					•		SM	Sa	lert also	o.)							
The Mob E-mail Id			•			,	,											
E maii ia											ilid ema	il ld on v	hich co	mmunicatio	n; if any	, is to be	e sent)	
I/We con									such	n inform	ation pe	ertaining	to acc	ount / tra	nsaction	s in my	our acc	count as is
	d mobile	numb	er under	· TRUS														nrough oui s based or
	ents the	ereto n	nade by	the de														em and any vied by the
<u> </u>	1						<u>L</u>	<u> </u>						<u> L</u> o				
Si	gnature	of Sole	e/First H	older				Sig	nat	ure of S	econd H	Holder			Signati	ure of TI	hird Hold	der

# Terms And Conditions for availing Transaction Using Secured Texting (TRUST) service offered by CDSL

#### Definitions:

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

- "Depository" means Central Depository Services (India) Limited (CDSL)
- ii. TRUST means "Transactions Using Secured Texting" service offered by the Depository.
- iii. "Service Provider" means a cellular service provider(s) with whom the Depository has entered / shall enter into an arrangement for providing the TRUST service to the BO.
- iv. "Service" means the service of providing facility to receive/give instructions through SMS on best effort basis as per the following terms and conditions. The types of transaction that would normally qualify for this type of service would be informed by CDSL from time to time.
- v. "Third Party" means the operators with whom the Service Provider is having / will have an arrangement for providing SMS to the BO.
- 2. The service will be provided to the BO at his / her request and at the discretion of the depository provided the BO has registered for this facility with their mobile numbers through their DP or by any other mode as informed by CDSL from time to time. Acceptance of application shall be subject to the verification of the information provided by the BO to the Depository.
- 3. The messages will be sent on best efforts basis by way of an SMS on the mobile no which has been provided by the BOs. However Depositow shall not be responsible if messages are not received or sent for any reason whatsoever, including but not limited to the failure ofthe service provideror network.
- 4. The BO is responsible for promptly informing its DP in the prescribed manner any change in mobile number, or loss of handset on which the BO wants to send/receive messages generated under TRUST. In case the new number is not registered for TRUST in the depository system, the messages generated under TRUST will continue to be sent to the last registered mobile number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of messages sent on such mobile number.
- 5. The BO agrees that SMS received by the Depository from the registered mobile number of the BO on the basis of which instructions are executed in the depository system shall be conclusive evidence of such instructions having been issued by the BO. The DP / CDSL will not be held liable for acting on SMS so received.
- 6. The BO shall be responsible for submitting response to the 'Responsive SMS' within the specified time period. Transactions for which no positive or negative confirmation is received from the BO, will not be executed except for transaction for de-registration. Further, CDSL shall not be responsible for BOs not submitting the response to the said SMS within the time limit prescribed by CDSL.
- 7. The BO agrees that the signing of the TRUST registration form by all joint holders shall mean that the instructions executed on the basis of SMS received from the registered mobile for TRUST shall be deemed to have been executed by all joint holders.
- 8. The BO agrees to ensure that the mobile number for TRUST facility and SMS alert (SMART) facility is the same. The BO agrees that if he is not registered for SMART, the DP shall register him for SMART and TRUST. If the mobile number provided for TRUST is different from the mobile number recorded for SMART, the new mobile number would be updated for SMART as well as TRUST.

- 9. BOs are advised to check the status of their obligation from time to time and also advise the respective CMs to do so. In case of any issues, the BO/CM should approach their DPs to ensure that the obligation is fulfilled through any other mode of delivery of transactions as may be informed / made available by CDSL from time to time including submission of Delivery Instruction Slips to the DP.
- 10. The BO acknowledges that CDSL will send the message for confirmation of a transaction to the BO only if the Clearing Member (registered by the BO for TRUST) enters the said transaction in CDSL system for execution through TRUST within prescribed time limit.
- 11. The BO further acknowledges that the BO/CM shall not have any right to any claim against either the DP or Depository for losses, if any, incurred due to non receipt of response on the responsive SMS or receipt of such response after the prescribed time period. in the event of any dispute relating to the date and time of receipt of such response, CDSL's records shall be conclusive evidence and the Parties agree that CDSL's decision on the same shall be final and binding on both Parties.
- 12. The BO may request for de-registration from TRUST at any time by giving a notice in writing to its DP or by any other mode as specified by Depository in its operating instructions. The same shall be effected after entry of such request by the DP in CDSL system it the request is received through the DP.
- 13. Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.
- 14. The BO expressly authorises Depository to disclose to the Service Provider or any other third party, such BO information as may be required by them to provide the services to the BO. Depository however, shall not be responsible and be held liable for any divulgence or leakage of confidential BO information by such Service Providers or any other third party.
- 15. The BO takes the responsibility for the correctness of the information supplied by him to Depository through the use of the said Facility or through any other means such as electronic mail or written communication.
- 16. The BO is solely responsible for ensuring that the mobile number is not misused and is kept safely and securely. The Depository will process requests originated from the registered Mobile as if submitted by the BO and Depository is not responsible for any claim made by the BO informing that the same was not originated by him.

#### 17. Indemnity:

In consideration of providing the service, the BO agrees that the depository shall not be liable to indemnify the BO towards any damages. claims. demands, proceedings. loss, cost. charges and expenses whatsoever as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

#### 18. Disclaimer:

Depository shall be absolved of any liability in case :-

- There is loss of any information during processing or transmission or any unauthorized access by any other person or breach of confidentiality.
- b. There is any lapse or failure on the part of the service providers or any third party affecting the said Facility and that Depository makes no warranty as to the quality of the service provided by any such sen/ice provider.
- There is breach of confidentiality or security of the messages whether personal or otherwise transmitted through the Facility.





# **Gurustox Limited**



CDSL DP ID: 12102400 • SEBI REGN, No. IN-DP-805-2025

**Corporate Office:** H.No.- 1073, Sector 40, Gurgaon-122001 Ph. : 0124-4061723

E-mail: info@Gurustox.com



Terms & Conditions-Cum-Registration / Modification Form for receiving SMS Alerts from CDSL

#### **Definitions:**

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

## Fees, Charges and deposits

- "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. Tower, Dalal Street, Fort, Mumbai-400001 and all its branch offices and includes its successors and assigns.
- 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
- '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.
- '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:**

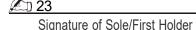
- 1. The service will be provided to the BO at his/her request and at the discretion of the depository. The service will be available to those account holders who have provided their mobile numbers to the depository through their DP. The service may be discontinued for a specific period/indefinite period 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.
- 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.
- 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:**

- The depository shall send the alerts to the mobile phone number provided by the BO while registering for 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.
- 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.
- The BO also acknowledges that the readability, accuracy and timeliness of providing the services depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any nondelivery, delayed delivery or distortion of the alert in any way whatsoever.
- 4. The BO further acknowledge that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/or in accuracy. In case of 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 errors 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 an account to avail SMS alerts facility.
- 5. The BO authorized 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 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.





L

- 6. 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.
- 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.
- 8. 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.

#### Fees:

Depository reserves the right to change such fees from time to time as it deems fit for providing this service to the BO.

#### **Disclaimer:**

The depository shall made reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository will not be liable for any unauthorized use or access to the information and/or SMS alert

sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by an third person.

## **Liability and Indemnity:**

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, changes and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out or interference with or misuse, improper or fraudulent use of the service by the BO.

#### **Amendments:**

The depository may amend the terms and conditions at any time with or without giving any prior notice to the BOs. Any such amendments shall be binding on the BOs who are already registered as user of this service.

#### **Governing Law and Jurisdiction:**

Providing the Service as outlined above shall be governed by the laws of India and will be subject to the exclusive jurisdiction of the courts in Mumbai.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. I/We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purpose of generating SMS Alerts by service provider, to be sent to the said mobile number.

I/We have read and understood the terms and conditions mentioned above and agree to abide by them and any amendments thereto made by the depository from time to time. I/we further undertake to pay fee/charges as may be levied by the depository from time to time.

I/We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the B05 would be required to take up the matter with their DP.

I/We am/are aware that mere acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service.

I/We provide the following information for the purpose of registration/modification (Please cancel out what is not applicable).

DP ID	1	2	1	0	2	4	0	0	BO ID								
Sole/Firs	t Holo	ler's N	Name	:													
Second I	Holde	r's Na	me	:													
Third Ho	lder's	Name	e :														
Mobile No	o. on w	hich m	nessaç	ges are	e to be	sent	+	9	1								
The Mobile E-mail Id:_			•						only ONE va					: if any	ı. is to t	oe sent)	
<b>£</b> 024						΄.	£	ם	·			£	D	,,	,	, , , , , , , , , , , , , , , , , , , ,	
	nature			IN	I CAS	E OF .	JOINT	HOL	ature of Seconomical Seconomics of Seconomic	ond Holder DINT HOL	DERS M	UST SIG	N.		of Third	Holder	
Place :				)ate: .													

				(	PTION	FORN	I FOR I	SSUE OF DI	S BOOK	(LET								
DP ID 1	2	1	0	2	4	0	0	Client ID										
First Holder N	ame																	
Second Holde	r Name																	
Third Holder I	Name																	
Ō,												Г	)ata	:				
urustox Limite		72 Coata	vr 40 Cu	raaan 100	004								Jaic					
<b>orporate Office:</b> ear Sir / Madar		73, Secio	)/ 40, Gu	rgaon-122	100 I													
We hereby stat					[Selec	t one o	of the op	tions given b	pelow]									
OPTION 1 :																		
Ve request you ttorney (POA)	1	4-4 DV	10		:	= 1	:41		•				•				/	
torney (POA) torney / Clearin	g Membe	er / PMS	no agre	ger) for e	executin	g delive	ery instru	uctions for set	tting stoo	ck exch	ange tı	ades	[settl	emer	t rela	ted tra	_(IIIa	tio
fected through s	uch Clea	ring Mer	mber / b	ý PMS N	/lanager	•	-	OR	J		J		•					
OPTION 2 :																		
We do not requi			Instruct	ion Slip	(DIS) fo	r the ti	me bein	g, since I / V										
greement in fa r executing deli <sup>,</sup>	vour oi verv insti	/ WILN _ TICTIONS	for sett	ina stoc	k excha	nge tra	des [set	tlement relate	(II ed transa	ame of	allorn	ey / C ed thr	nuah	ig ivie such	noen Clea	ring M	o ma emh	na er
r chooding don	vory iriou	uotionis	101 3011	ing stoo	I CAUITA	nge ua	uco joci	dellicit relate	ou transc		CHOOL	Ju uni	ougn	Juon	Oica	illig ivi	CITID	
MS manager. H	owever,	the Deli	ivery Ins	struction	Slip (D	IS) boo	klet sho	uld be issued	to me /	us imn	nediate	ly on	my/	our re	eques	t at an	ıy lat	ter
MS manager. H	owever,	the Deli	ivery Ins	struction	Slip (D	IS) boo	klet sho	uld be issued	to me /	us imn	nediate	ly on	my /	our re	eques	t at an	ıy lat	ter
MS manager. H	owever,		ivery Ins	struction		IS) boo	klet sho	uld be issued  Second Join	to me /		nediate	ly on	my /	our re	eques	t at an	ıy lat	ter
MS manager. H	owever,		ivery Ins	struction		IS) boo	klet sho	uld be issued	to me /		nediate	ly on	my /	our re	eques		ıy lat	ter
MS manager. H ours faithfully. Name		Fir	ivery Ins	struction		IS) boo	klet sho	uld be issued	to me /		nediate		my /	our re	eques		ıy lat	ter
MS manager. H ours faithfully.			ivery Ins	struction		IS) boo	klet sho	uld be issued	to me /		nediate	ly on	my /	our re	eques		iy lat	ter
MS manager. Hours faithfully.  Name  Signatures		Fir	rst / So	struction	er	S) boo	klet sho	uld be issued	to me /	r	nediate	<u></u>	my /	our re	eques		iy lat	ter
MS manager. Hours faithfully.  Name  Signatures	DE	Fir	rst / So	struction	er	S) boo	klet sho	uld be issued	to me /	r	nediate	S)	my /	our re	eques		iy lat	ter
MS manager. Hours faithfully.  Name  Signatures  To,  urustox Limite	D:	Fir D 25 CLARA	est / Sol	Id Hold	er /AILING	S) boo	klet sho	uld be issued	to me /	r	nediate	S)	my /	our re	eques		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  o,  urustox Limite orporate Office:	D:	Fir D 25 CLARA	est / Sol	Id Hold	er /AILING	S) boo	klet sho	uld be issued	to me /	r	nediate	S)	my /	our re	eques		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  O, urustox Limite orporate Office: ear Sir / Madam,	<b>De</b>	Fire 25 CLARA 273, Section 273,	TION	Id Hold	er /AILING	OF E	klet sho	uld be issued Second Join SERVICE DE	to me /	COUN	T (BS)	≦⊃ DA) F	my /	our re	eques		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  o,  urustox Limite orporate Office: ear Sir / Madam,  I/We wish to	D: ed H.No 10 o avail th	Fire 25 25 273, Section BSDA	TION or 40, G	FOR AVurgaon-12	er  /AILING 2001 ew acco	OF E	klet sho	uld be issued	to me / t Holder  MAT AC	COUN	T (BS)	DA) F	my / Thin FACIL Date form.	our re	int H		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  To,  urustox Limite orporate Office: ear Sir / Madam,  I/We wish to	D: ed H.No 10 o avail th	Fire 25 25 273, Section BSDA	TION or 40, G	FOR AVurgaon-12	er  /AILING 2001 ew acco	OF E	klet sho	second Join	MAT AC	COUN	T (BS)	DA) F	my / Thin FACIL Date form.	our re	int H		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  O, urustox Limite orporate Office: ear Sir / Madam, I/We wish to I/We do no	Dead H.No 10 o avail th	Fire 25 25 CLARA 273, Section BSDA avail the	TION or 40, G	FOR AV urgaon-12 for the n facility for	2001 ew accoor the ne	OF E	which we unt for w	BERVICE DE	MAT AC	COUN	T (BS)	DA) F	my / Thin FACIL Date form. ening	our re	int H		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  O, urustox Limite orporate Office: ear Sir / Madam, I/We wish to I/We do not the property of	DE ed H.No 10 o avail the t wish to 2	Fire 25 25 CLARA 273, Section BSDA avail the	TION or 40, G	FOR AV urgaon-12 for the n facility for	2001 ew accoor the ne	OF E	which we unt for w	BERVICE DE	MAT AC	COUN	T (BS)	DA) F	my / Thin FACIL Date form. ening	our re	int H		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  O, urustox Limite orporate Office: ear Sir / Madam, I/We wish to I/We do no	DE ed H.No 10 o avail the twish to 2	Fire 25 25 CLARA 273, Section BSDA avail the	TION or 40, G	FOR AV urgaon-12 for the n facility for	2001 ew accoor the ne	OF E	which we unt for w	BERVICE DE	MAT AC	COUN	T (BS)	DA) F	my / Thin FACIL Date form. ening	our re	int H		y lat	ter
MS manager. Hours faithfully.  Name  Signatures  O, urustox Limite orporate Office: ear Sir / Madam,   //We wish to   //We do no   DP ID 1	DE ed H.No 10 o avail the twish to 2	Fire 25 25 CLARA 273, Section BSDA avail the	TION or 40, G	FOR AV urgaon-12 for the n facility for	2001 ew accoor the ne	OF E	which we unt for w	BERVICE DE	MAT AC	COUN	T (BS)	DA) F	my / Thin FACIL Date form. ening	our re	int H		y lat	ter

guidelines from time to time.

I/We also undertake to ocmply with the guidelines issued by any such authority of BSDA facility from time to time.

I/We also agree that in case our demat account opened under BSDA facility does not meet the eligibility for BSDA facility as per guidelines issued by SEBI or any such authority at any point of time, my/our BSDA account will be converted to regular demat account without further reference to me/us and will be levied charges as applicable to regular account as informed by the DP.

I/We, the first / sole holder also hereby declare that I/We do not have / propose to have any other demat account across depositories as a first / sole holder.

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Signatures	<b>£</b> 0 26		Lo

DEMAT DEBIT AND PLEDGE INSTRUCTION									
I/We authoriz open account below. I/We shall be above and fur	e you to in future liable fo orther agre	having Demat Active purpose of transfer of securit follow these instructions across of the Astronomy Broker i.e agent & or all the loses, damages and active that you shall not be liable for pledge/de-pledge of securities un	ies towards deliveries exchanges & across se r DP. I/We direct and a ons which my arises a any claim what so eve	/ settlement obligations are egments in which I/We has authorize you to carry out a consequence of your ad r, or for any consequentia	nd pledo ve alrea dealings thering t l, incide	ging / re-pledging ady opened accous s on my/our beha to and carrying ou ntal, special or ex	unts with you or I/We may If as per instructions given ut my/our directions given		
Purpose 1	the clie	or of securities held in the benefic ent towards Stock Exchange ent obligations arising out of trade Stock Exchange through the sa	related deliveries / es executed by clients	<b>L</b> 27 1st Holder	£	2nd Holder	✓ 3rd Holder		
Purpose 2	(TM) / c margin trades	g / re-pledging of securities in favor clearing member (CM) for the requirements of the clients in executed by the clients on the S	purpose of meeting connection with the Stock Exchange.		<b>L</b> D	2nd Holder	✓ 3rd Holder		
Purpose 3		Fund transactions being executed on transactions being executed on transactions.	on Stock Exchange	29 1st Holder	Lo	2nd Holder	✓ 3rd Holder		
Purpose 4	Tender platfor	ing shares in open offers throuς ms	gh Stock Exchange	€30 1st Holder	£	2nd Holder	✓ 3rd Holder		
Exchan	ge	Depository	Acco	ount No.	lo. Account Type				
NSE		CDSL	121024	0000000169	POOL				
NSE		NSDL	IN30209	9210157339		NDSL POOL			
NSE		CDSL	120206	0002865584		CDSL PC	OOL (TM-FO)		
NSE		CDSL	121024	0000000095	CI		ECURITIES MARGIN E ACCOUNT		
NSE		CDSL	121024	0000000057	CI		NPAID SECURITIES EE ACCOUNT		
NSE		CDSL	110000	1100016337		CDSL EA	RLY PAY-IN		
Mana		First / Sole Holder	Se	econd Joint Holder		Third J	loint Holder		
Name Address									
Signatures 231			Lo			L			

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

Place:

# Declartion Request to update Mode of Operations for Demat Account

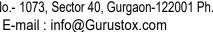
<del>-</del>		Date:
To,		
Gurutsox Limited	400004	
Corporate Office: H.NO.1073,Sector 40, Gurgaon -	122001	
Dear Sir/ Madam,		
Sub : Request to update Mode of Operations for	Demat Account	
We would like to update mode of operation in the	e Demat account number	held with GurustoxLtd., as below:
Mode of Operation: Joint	tly Anyone of the holder or survivor(s)	
Communication Preferences: First Hold		
securities including Inter-Depository Transfer	, pledge / hypothecation / margin pledge / marg	rvivor(s), only specified op erations such as transfer of gin re-pledge (creation, closure and invocation and nd / or specific number of securities will be permitted.
<b>€</b> 32		
Signature of Sole/First Holder	Signature of Second Holder	Signature of Third Holder



# **Gurustox Limited**

CDSL DP ID: 12102400 • SEBI REGN. No. IN-DP-805-2025

Corporate Office: H.No.- 1073, Sector 40, Gurgaon-122001 Ph.: 0124-4061723





#### **SCHEDULE-A**

## SCHEDULE OF CHARGES FOR DEMAT ACCOUNT INDIVIDUAL / CORPC

NATURE OF SERVICES	CHARGES (Please tick whicheve	er applicable)				
	☐ Regular Scheme	☐ Gurustox Relax	☐ Life Time			
Account Maintenance Cycle	Four Quarter (1 Year)	Twenty Quarter (5 Year)	Life Time			
Maintenance Charges (Non-Corporate Account)	₹399/- for first Quarter remaining three Quarters FREE	₹999/- for first Quarter remaining nineteen Quarters FREE	₹1999/-			
Maintenance Charges (Corporate Account)	₹1250/- for first Quarter remaining Quarters FREE					
	TRANSACTION CHAR	GES				
Delivery Market Transaction	₹20/- per instruction or 0.02% of tr	ansaction value, whichever is higher, s of ₹100/-	subject to maximum			
Delivery Off Market Transaction	₹25/- per instruction or 0.03% of tr	ansaction value, whichever is higher, s of ₹100/-	subject to maximum			
Pledge Creation/Closure/Invocation	₹50/- per instruction or 0	0.02% of transaction value, whichever	is higher			
Demat Charges	thereof or a flat fee ₹10/- per certi	ter first hundred ₹10/- for every hundre ificate whichever is higher plus courier 25 certificate and part thereof				
Remat Charges	₹100/- for up to first hundred and after first hundred ₹30/- for every hundred securities o thereof or a flat fee ₹30/- per certificate whichever is higher					
Mutual Funds (Destat / Redemption)	) ₹50/- per instruction plus courier charges					
Instruction Booklet	₹25/- plus courier charges					
BSDA CHARGES	Up to Rs 4 lakhs: No charges, More than Rs 4 lakhs but up to INR 10 lakhs: INR 100 annually, More than Rs 10 lakhs: Not eligible for BSDA, regular AMC applies.					

#### Note:

- The Depository Participant shall reserve the right to revise the charges by giving not less than 30 days notice in writing to the client.
- Client will have to pay the additional charges if not covered in above charges and imposed time to time by the Depository.
- Modification in client detail, 20/- per instance. Maintenance charges will be charged in advance at the time of opening the account.
- Rejection charges 20/- per rejection plus courier charges. Slip Rejection/Fail charges 10/- per rejection.
- Off-Market Instruction not received prior to 24 hours of execution will be received at client's risk.
- Periodic statement free on Email and Rs 50 towards courier charges if sent physically.
- Non-periodic statement shall be charged @ 5/- per page and postage/courier charge @ Rs 40 or actual charges whichever is higher.
- In case of non-payment of bill/dues within 15 days of due date, interest shall be charged @ 5.0% per month on the outstanding dues.
- Rs 100 will be charged to client in case of New Delivery Instruction Booklet is requested without requisition slip.
- All charges are exclusive of GST. Taxes and other Government levies will be charges extra as applicable from time to time.
- It is hereby informed that with the issuance of CAS from Depositories, Gurustox Limited have discontinued dispatching mandatory annual physical statement.
- Further, it should also be noted that the dispatch of annual CAS statements shall be discontinued if the account continuous to remain zero balance even After one year and/or if no Annual Maintenance Charges(AMC) is received by the DP.

<b>2</b> 33		
Signature of Sole/First Holder	Signature of Second Holder	Signature of Third Holde



# **Grow With us**

CIN No. - U67120DL1993PLC056460

SEBI Registration No.: INZ000255037, SEBI REGN. No. IN-DP-805-2025

Clearing No-M50644

**Exchange Memberships:** 

NSE - CM, F&O, (Member ID: 08052)

BSE - CM, F&O (Member ID: 6249)

Depository Participant: CDSL (DP ID: 12102400)

Regd.Office: 1401,14th Floor Chiranjiv Tower 43, Nehru Place, New Delhi- 110019

Corporate Office: H.NO.1073, Sector 40, Gurgaon, Harayna-122002

Website:www.gurustox.com, Email: hplnse@Gmail.com Tel.: + 91-1244061723, 9667953516, 9818133883

In case of any grievances please write to info@gurustox.com, grievance@gurustox.com