

PART - A

RESIDENT INDIVIDUAL

	UCC Code:
l.	IDENTITY DETAILS:
1.	Name of the Applicant:
2.	Father's/Spouse Name:
II.	Please tick, if applicable Politically Exposed Person (PEP) Related to (PEP)
II.	OCCUPATION OF HOLDERS (Please tick)
	ivate sector Public sector Govt. Service Business Professional Criculture Retired House-wife Student Other
V.	TRADING PREFERNCE (Exchange & Segments)
	BSE-Cash/Govt. Securities/T-Bills/Mutual Funds Signature of applicant

DECLARATION

I/We wish hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief, and I/We undertake to inform you of any changed therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am/we are aware that I/We may be held liable for it. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet. I/We further confirm having read and understood the contents of Part B of the Account Opening form comprising of Rights and Obligations of the Beneficial Owner and Depository Participant, Rights & Obligations of Stock Brokers, Sub-Brokers and Clients, Trading, Risk Disclosure Document, Policy & Procedures, Guidance Note, Additional Terms & Conditions & Schedule of charges. I/We do hereby agree to be bound by such provisions as outlines in these documents. I/We acknowledge the receipt of copy of above Part B document. I/We have also been informed that the standard set of documents has been displayed for information on website www.wealthmills.in. The rules and regulations of the Depository and Depository Participant, pertaining to an account which are in force now, have been read by me/us and I/We have understood the same and I/We agree to abide by, and to be bounded by the rules are in force from time to time for such account. All communication related to WealthMills trading account can be sent to my registered email id.

Signature of applicant

Corp. Off.: Unit no. 10, Plot no. 6,7,8,9, Arenja Complex, Sector – 08, CBD Belapur, Navi Mumbai – 400614, Maharashtra, India.



Phone no. +91 7093014399, +91 9059844337.



Landline no. +91 22 27576466, +91 22 35046518



	NEW CHANGE REQUEST (Please tick the appropriate)	Acknowledgement no.				
A. IDE	ENTITY DETAILS					
l. Na	ame of the Applicant:					
2. Fa t	ther's/Spouse Name:		PHOTOGRAPH			
B. a. Gender: Male/Female b. Marital status: Single/Married c. Date of birth: D D/M M/Y Y Y Y						
	RECENT COLOUR					
	PHOTOGRAPH AND					
	JIGH ACROSS II					
5. a. l	PAN: b. Aadhaar Number, if any:		<u> </u>			
7. Sp	ecify the Proof of Identity submitted: PAN card Other (Please specify)				
B. AD	DDRESS DETAILS					
1 0						
1. ке	sidence/Correspondence Address:					
	ty/Town/Village:	Pin code:				
Cit	ty/Town/Village:	Pin code:_				
Cit Sta 2. Sp	ty/Town/Village:Country: ecify the proof of address submitted for residence/correspondence/	permanent address: _				
Cit Sta 2. Sp 3. Co	ty/Town/Village:Country: ate:Country: ecify the proof of address submitted for residence/correspondence/ entact Details: Tel. (Off.)Tel. (Res.)	permanent address: _ Mobile no.:				
Cit Sta 2. Sp 3. Co	ty/Town/Village:Country: ate:Country: ecify the proof of address submitted for residence/correspondence/ entact Details: Tel. (Off.) Tel. (Res.) xEmail id:	permanent address: _ Mobile no.:				
Cit Sta 2. Sp 3. Co	ty/Town/Village:Country: ate:Country: ecify the proof of address submitted for residence/correspondence/ entact Details: Tel. (Off.)Tel. (Res.)	permanent address: _ Mobile no.:				
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Cit Sta Sp. 3. Co Fax 4. Pe	cty/Town/Village:	permanent address: _ Mobile no.:				
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Cit Sta Spo Sa Co Fax Co Cit Sta Sta Sta Sta Sta Sta Sta Sta Sta St	ty/Town/Village:	permanent address: Mobile no.: Itory for Non-Resident Pin code:				
City State 2. Spp 3. Co Fax 4. Pe City State C. DE I hereby my/ou immed	ty/Town/Village:Country: tecify the proof of address submitted for residence/correspondence/ tentact Details: Tel. (Off.) Tel. (Res.) tx Email id: trmanent Address (if different from above or overseas address, mandates) ty/Town/Village: ty/Town/Village: tate: Country:	permanent address:Mobile no.: Itory for Non-Resident Pin code: best of therein, rue Signatu				

D.	FOR OFFICE USE ONLY		
E.	In Person Verification (IPV) Details	<u>s:</u>	
	Name of the person who has done		
	Designation:	Employee ID:	
	Name of the Organisation:		
	Date of IPV: DD/MM/YYYY		
		Signature of the person who has done the IPV	Seal/Stamp of the Intermediary
	Originals Verified and Self Atteste	ed Document copies received	

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F. OTHER DETAILS

1. Bank account details:

Bank Name		Branch add	ress Bar	k account no.	Account Type: Saving/Current		• •		C Code
2.	2. Demat account details: (In case the client does not have DP account, this column may be crossed)								
	Dp name	e NS	SDL/CDSL	Beneficiary r	name	D	P ID	В	O ID
						4	7		
3. 4. 5. 6.	H. Mode of receiving Contract Note/Statement of Account: Solution Income Range per Annum: <1Lac								
		rokerage very Based	in% (subject t max. of 2.5%		paisa (subje x. 25paise)	ect to O	ne Side/Both	Side	
	Delive	ry Square up	We	alth M	ills)				

Other Terms and conditions:

1. GST Tax : GST will be charged at 18% on total value of brokerage.

2. SEBI Turnover Charges : SEBI Turnover charges are levied at 0.0001% of turnover.

3. Brokerage Computation basis : Brokerage is computed on per share basis and is rounded off to the

nearest paisa, subject to a minimum brokerage of 1 paisa per share.

- 4. System abuse charges, if any, as levied by Exchange(s) will be recovered from the respective clients.
- 5. The rates provided in this schedule are subject to change with 15 (Fifteen) days prior intimation.
- 6. Any charges payable to Chartered Accountant (CA) for calculation of Tax/TDS and other incidental charges will be debited to the Clients Bank Account. Any courier charges for delivery sent to overseas address will be charged extra as per actual.
- 7. Any penalty levied by Exchanges on the client's positions shall be recovered from the client's account (eg. Penalty for short collection of margins).

The Trading Account Opening charges are Rs. 1000/- (This includes recovery of charges incurred on franking/stamping of documents). Account opening charges cheque in favour of WealthMills Securities Pvt. Ltd.

Signature of applicant

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	I/We wish to make a nomination (As per details given below)				
	I/We do not wish to nomination				
H.	NOMINATION DETAILS				
1.	Name of the nominee:				
2.	Share of each nominee: 3. Relationship with the applicant (If any):				
4.	Address of nominee:				
	Pin code:				
	City Country:				
5.	Contact Details of nominee: Mobile no.: Email id:				
6.	Nominee Identification details: (Please tick any one of following and provide details of same) -				
	PAN Aadhaar Savings Bank Account no. Proof of Identity Demat Account ID				
	Sr. Nos. 7-12 should be filled only if nominee is a minor:				
7. Date of Birth {in case of minor nominee}:					
7.	Date of Birth (in case of minor nominee).				
7. 8.	Name of Guardian {in case of minor nominee}:				
8.					
8.	Name of Guardian {in case of minor nominee}:				
8.	Name of Guardian {in case of minor nominee}: Address of Guardian:				
8. 9.	Name of Guardian {in case of minor nominee}: Address of Guardian: Pin code:				
8. 9. 10.	Name of Guardian {in case of minor nominee}: Address of Guardian: Pin code: City State: Country:				
8. 9. 10.	Name of Guardian {in case of minor nominee}:				
8. 9. 10.	Name of Guardian {in case of minor nominee}:				
8. 9. 10.	Name of Guardian {in case of minor nominee}:				
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3. 10. 11.	Name of Guardian {in case of minor nominee}:				

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Supplementary KYC Information & FATCA-CRS Declaration – Individuals **PAN** Name Gender Male **Female** Residential Type of address given at KYC KRA **Business** Place of Birth **Country of Birth Nationality** Are you a tax resident of any country other than India? Yes No If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID numbers below. Tax Identification **Identification Type** Country **Documents** Date upto which the Number provided (copy of documentary certificate of tax evidence is valid residence or copy of TIN or others)

- To also include USA, where the individual is a citizen/green holder of the USA
- *In case Tax Identification Number is not available, kindly provide its functional equivalent \$
 Reason A The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents.

Reason B – No TIN required. (Select this reason only if the authorities of te respective country of tax residence o not require the TIN be collected)

Reason C – Others; Please state the reason thereof.

Certification

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



Place:	Date: <u>D</u> <u>D/M</u> <u>M/Y Y Y Y</u>
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Customer Declaration (Applicable for all customers):

- Under penalty of perjury, I/We certify that:
 - a. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S") or any other state or political subdivisions thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as US person)
 - b. The applicant is an applicant taxable as a tax resident under the laws of the country outside India. (This clause is applicable only if the account holder is a tax resident outside of India)
- I/We understand that the WealthMills Securities Pvt. Ltd. is relying on this information for the purpose 2. of determining the status of the applicant named below in compliance with FATCA/CRS. WealthMills Securities Pvt. Ltd. is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/We shall seek advice from professional tax advisor for any tax questions.
- I/We agree to submit a new form within 30days if any information or certification on this form becomes incorrect.
- I/We agree that as may be required by domestic regulators/tax authorities, WealthMills Securities Pvt. Ltd. may also be required to report, reportable details to CBDT or close or suspend my account.
- I/We certify that I/We provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.



6. **Aadhaar verification & Authentication:**

I hereby provide my consent to WealthMills Securities Pvt. Ltd. for collecting, storing, using, validating, authenticating and updating my Aadhaar number against my PAN in all investment transactions through WealthMills Securities Pvt. Ltd. as an intermediary regulated by SEBI, IRDAI & PFRDA. This is to comply with Aadhaar Act, 2016 and with PMLA requirements.

WealthMills Securities Pvt. Ltd. has informed me and I hereby give my consent to update my Aadhaar number in the account opened with WealthMills Securities Pvt. Ltd. and share the same with Exchange, KRA, CERSAI and with any other Regulatory Agencies (as per requirement or on demand) and also with Asset Management Companies of mutual funds registered with SEBI and their Registrar and Transfer Agents (RTA) for the purpose of updating the same in my/our existing folios or when I transact in a mutual fund product or as per requirements of law.

Date: <u>D</u> <u>D/M</u> <u>M/Y Y Y Y</u>

Signature of applicant



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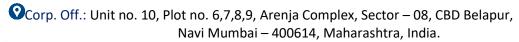




BSE stAR MF

(Letter to be provided by the Investor to the MFI)

То	Date: DD/MM/YYYYY
Sir, Sub: BSE StAR MF	
I/Weam/are registered as your client with Client Code Trading Member and Client Agreement for the purpose of trading Ltd. (Exchange). Further,I/We have also availed of mutual fund pl	g in the Capital Market segment of BSE
I/We am/are interested in availing the liquid overnight functionality BSE for investing my/our monies in the units of Liquid Mutual Function BSE StAR MF platform and hereby authorize you to use the said accordingly.	ds Schemes permitted to be dealt with on
For the purpose of availing this facility, I/we state that Know Your for the stockbroking may be considered for availing the aforesa I/we further confirm that the details contained in same remain up	id functionality of BSE StAR MF and
I/We are willing to abide by the terms and conditions as mention and as may be pecified by the Exchange from time to time in this	
I/We shall read and understand the contents of the Scheme Info Memorandumand addenda issued thereto, if any, regarding each which I/we choose to subscribe/redeem. I/We further agree to all and regulations of the Mutual Fund Schemes.	Mutual Fund Schemes with respect to
Thanking you,	Yours faithfully,
	Signature of applicant











AUTHORISATION FOR MAINTENANCE OF RUNNING ACCOUNT (THIS DOCUMENTARY IS VOLUNTARY)

To **Date:** <u>D</u> <u>D/M M/Y Y Y Y Y</u>

WealthMills Securities (P) Ltd.
Unit no.10, Plot no. 6,7,8,9,
Arenja Complex Sector – 8,
CBD Belpaur, Navi Mumbai – 400614.

Dear Sir/Madam,

Subject: Instructions in respect of my client account bearing number [

with you in relation to

the purchase and same of securities on the Cash Market/Mutual Fund Units on the Bombay Stock Exchange Limited

- 1. I/We confirm that I/We am/are desirous of regularly dealing in Bombay Stock Exchange Limited (as applicable and request you to maintain in a running account for funds & securities on my/our behalf without setting the account on settlement of each transaction on my/our behalf.
- 2. I/We hereby give you the following operational instructions in respect of my/our captioned account maintained with you,
 - i. To maintain my captioned account, with you on a running account basis, i.e., instead of paying to me/us any amounts or securities representing payouts, settlement dues, market profits on the settlement date, to retain, withhold, set-off and/or appropriate for such proposed and in such manner as you may deem fir, including towards settling outstanding obligations on a settlement date. This will facilitate me in my/our transactions with you.
 - ii. You may at your discretion and with or without notice to me/us, set-off any (a) securities or money due to me/us arising from trades executed on a segment of an exchange with the shortfall or additional requirements or margin or securities or money arising from other trades executed on another exchange with the shortfall or additional requirements of margin or securities or money arising from other trades executed whether on the same or any other segment of the same exchange.
- 3. At the time of settlement of accounts/securities once in a month/quarter, I/We authorize you to retain such amount of funds/securities as you may deem requisite to meet F&O margins obligations for a period of up to 5 (Five) trading days following such settlement and in cash market segment(s), for next day's business, you may retain funds/securities/margins to the extent of value of transactions executed on the day of such settlement in the Cash market (s) only.
- 4. Upon settlement of my account, you will furnish to me/us by email a statement of accounts containing extract from the client ledger for funds and an extract from the register of securities displaying all receipts/deliveries of funds and securities
- 5. I/We understand and agree that you will transfer/release the funds/securities lying to my our credit within 1 (one) working day of a request by me/us if the same are lying with you and within 3 (three) working days from the request if the same are lying with the Clearing Member/Clearing Corporation, subject to me/us providing you with a written request for such transfer and subject to on outstanding dues on my/our part in relation to any of my/our obligations under the broking relationship.
- 6. With respect to requirement of the Exchanges to maintain accounts for each exchange/segment separately I/We authorise you to allocate the payments received/made to any of the exchanges/segments. I/We further authorise you to pass such entries to adjust my/our debit/credit balance in my/our trading account of any exchange/segment to any other and vice versa.
- 7. I/We understand and agree that np interest will be payable to me/us on the deposits or amounts or securities lying to my/our credit with you
- 8. This authorization may be revoked by me/us at any time by giving you written intimation.
- 9. I/We request you to settle my/our account on a Monthly Quarterly basis (please tick). (If the applicant does not select the check box, default option is Quarterly)

Signature of applicant



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