

MCL

2016

Growth

100%

Chart



2020

2021

2022

,547934

10584	30.58	88887
London	1000.0	(30.68%)
10584	30.58	88887
Tokyo	1014.0	(30.68%)
10584	30.58	88887
Europe	1014.0	(30.68%)
10584	30.58	88887
London	1000.0	(30.68%)
10584	30.58	88887
Tokyo	1014.0	(30.68%)
10584	30.58	88887
Europe	1014.0	(30.68%)

MC Maitra Commodities Pvt Ltd

EQUITY, DEMAT AND COMMODITY REGISTRATION KIT

--- FOR INDIVIDUAL ---

Client Name :		Client Code :	
Branch Name :		Branch Code :	
RM Name :		Employee Code :	
Trading Mode :	<input type="checkbox"/> Offline	<input type="checkbox"/> Online	

SET OF ACCOUNT OPENING DOCUMENT

MAITRA COMMODITIES PVT. LTD.

SEBI REGN. NO. INZ000074139 CIN : U74999TN2012PTC084067

Member : MULTI COMMODITY EXCHANGE OF INDIA LTD. MCX Member ID No. 55060

Member : NATIONAL STOCK EXCHANGE OF INDIA LTD. NSE Member ID No. 90175

Member : BSE LTD. BSE Member ID No.

Depository Participant : CDSL DP ID : 12089300 SEBI REGN. NO. IN-DP-430-2019

Regd Office : 18, First Street, Venkatratnam Nagar Extension, Adyar, Chennai - 600 020. Phone : 044 - 6555 1292

Corporate Office : No.17/1, First Floor, Visweswarapuram Street, Alwarpet, Chennai - 600 018.

Phone : 044 - 4865 6581 / 4865 6582 E-Mail Id : info@maitracommodities.com Website : www.maitracommodities.com

Compliance Officer & CEO : Nithya Gowri V , Phone : 044 48656581 Email : compliance@maitracommodities.com

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1	KYC (Account Opening Form) application form - Trading & Demat	KYC form - Document captures the basic information about the constituent and an instruction / check list.	1 - 14
2	Terms and Conditions - cum-Registration Form - Demat	Terms And Conditions-cum-Registration Form for receiving SMS Alerts from CDSL [SMS Alerts will be sent by CDSL to Bos for all debits and for all credits as well.]	15 - 16
3	Rights and Obligations - Demat	Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories.	Attached Separately / View / Download at www.maitracommodities.com
4	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the Securities/commodities market.	
5	Rights and Obligations of Members, Authorized Persons and Clients	Document stating the Rights & Obligations of Member, Authorized Person and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).	
6	Do's and Don'ts for the Investors	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	
7	Policies and Procedures	Document detailing significant policies and procedures of the Stock/commodity broker.	
8	Tariff sheet - Trading & Demat	Document detailing the rate/amount of brokerage and other charges levied on the client for trading on the Stock / Commodity exchange(s)	17 - 19
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For any grievance / disputes please contact MAITRA COMMODITIES PVT. LTD. at the above address/ Email/Phone.

Grievance Email : grievance@maitracommodities.com In case not satisfied with the response, please contact the concerned exchanges.

Multi Commodity Exchange of India Ltd. (MCX) Ph : (022) 6731 8888 Fax : (022) 6649 4151 E-mail : grievance@mcxindia.com Website : www.mcxindia.com	National Stock Exchange of India Ltd. (NSE) Ph : (022) 2659 8100 Fax : (022) 2659 8120 E-mail : ignse@nse.co.in Website : www.nseindia.com	BSE Ltd. (BSE) Ph : (022) 2272 1234 Fax : (022) 2272 1003 E-mail : is@bseindia.com Website : www.bseindia.com	Central Depository Services (India) Ltd. (CDSL) Ph : (022) 22723333 E-mail : complaints@cdslindia.com Website : www.cdslindia.com
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You can file your compliants online at <http://scores.gov.in> or alternately send your compliants to Office of Investor Assistance and Education of SEBI at Mumbai or Regional Offices: **For more information visit website - <http://scores.gov.in>**

Check List for KYC Processing

UCC ID _____ Client Name _____

KRA ID _____ CKYCR ID _____

Sl.No.	Particulars	Branch / Franchisee		HO		Remarks
		Yes	No	Yes	No	
	KYC Related					
1	Proof of Identity of the Client PAN (Mandatory)					
2	In Person verification (IPV) ##					
	(Client visited the office ? Or Branch / Franchisee personnel met ? Or Online Client ?)					
3	Name in PAN matched (If NOT \$\$)					
4	Address Proof obtained and matched with KYC					
5	Latest Passport size colour Photograph pasted & signed across by the client					
6	Bank A/c details with proofs collected					
7	Client signed on Segments for Trading					
8	Whether client signed on all the marked places (Total ____ Signatures)					
9	Email ID and Mobile Numbers filled in required pages					
10	Whether all the proofs self attested.					
11	Whether Spouse's name or Mother's name is furnished					
12	Whether all the mandatory columns are filled					

For HO Use only

Sl.No.	KRA AND CKYCR Registration Details	Yes	No	Yes	No	
1	Uploading of KYC and CKYCR	NA	NA			
2	Uploading of Proof	NA	NA			
	Back Office Process					
1	PAN verified in IT site and Banned List	NA	NA			
2	KYC Entered By	NA	NA			
3	KYC & Documents Verified By	NA	NA			
4	Brokerage details Verified	NA	NA			
5	UCC and Return file upload	NA	NA			UCC Code
	KYC EOD Process					
1	Welcome Letter Generation and Welcome call made					
2	Maitra Policies & Procedures and KYC scanned copies mail sent to client					

	Verified By	Approved By	Authorised Signatory
Employee ID			
Signature			
Date Of Activation :			

- If IPV done by Branch/Franchisee, respective team will fill the IPV page of the KYC form.

MAITRA COMMODITIES PVT. LTD.

(Member : MCX, NSE & BSE and DP : CDSL)

Regd Office : 18, First Street, Venkatratinam Nagar Extension, Adyar, Chennai - 600 020. Phone : 044 - 6555 1292

E-Mail Id : info@maitracommodities.com Website : www.maitracommodities.com

CENTRAL KYC 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 institution) KYC Number (Mandatory for KYC update request)Account Type * Normal Simplified (for low risk customers) Small **1. PERSONAL DETAILS** (Please refer instruction A at the end)

	Prefix	First Name	Middle name	last name
<input type="checkbox"/> Name* (same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse name *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother name *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M - Male	<input type="checkbox"/> F - Female	<input type="checkbox"/> T - Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN - Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/>)		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Individual		
	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin		
Occupation Type*	<input type="checkbox"/> S- Service (<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector)	
	<input type="checkbox"/> O- Others (<input type="checkbox"/> Professional	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student)	
	<input type="checkbox"/> B- Business			
	<input type="checkbox"/> X- Not categorised			

PHOTO

Signature / Thumb Impression

 2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end.)

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

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent (If issued by jurisdiction)*

Place / City of Birth* ISO 3166 Country Code of Birth*

 3. PROOF OF IDENTITY (PoI)* (Please refer instruction C at the end)(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

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

 4. PROOF OF ADDRESS(PoA)* 4.1 CURRENT/PERMANENT / OVERSEAS ADDRESS DETAILS (Please refer instruction D at the end)(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type*	<input type="checkbox"/> Residential / Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business	<input type="checkbox"/> Registered Office	<input type="checkbox"/> Unspecified
Proof of Address*	<input type="checkbox"/> Passport	<input type="checkbox"/> Driving Licence	<input type="checkbox"/> UID (Aadhaar)		
	<input type="checkbox"/> Voter Identity card	<input type="checkbox"/> NREGA Job card	<input type="checkbox"/> Others	<input type="text"/>	Please specify
Address	<input type="checkbox"/> Simplified Measures Account - Document Type code	<input type="text"/>			

Line 1*

Line 2

Line 3

District* Pin / Post Code* State / U.T. Code* City / Town / Village* ISO 3166 Country Code*

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS* (Please refer 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 / Village*

District* Pin / Post Code* State / U.T. Code* ISO 3166 Country Code*

4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Line 1*

Line 2

Line 3 City / Town / Village*

District* Pin / Post Code* State / U.T. Code* ISO 3166 Country Code*

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email ID) (Please refer instruction F at the end)

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

Fax - Email ID

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (Please refer instruction F at the end)

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

Name* Prefix First Name Middle name last name

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

PROOF OF IDENTITY (PoI) OF RELATED PERSON* (Please refer instruction H at the end)

A - Passport Number Passport Expiry date --

B - Voter ID card

C - PAN card

D - Driving Licence Driving Licence Expiry Date --

E - UID (Aadhaar)

F - NREGA Job card

Z - Others (any document notified by the central government) Identification Number

S - Simplified Measures Account - Document Type code Identification Number

7. REMARKS (If any)

8. APPLICANT DECLARATION

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

● I hereby consent to receiving information from Centrak KYC Registry through SMS/Email on the above registered number/email address.

Date : -- Place :

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

IPV / KYC VERIFICATION CARRIED OUT BY

Date --

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

(Employee Signature)

INSTITUTION DETAILS

Name : MAITRA COMMODITIES PVT. LTD.

Code : IN1190

[INSTITUTION STAMP]

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

General Instructions :

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

A Clarification / Guidelines on filling 'Personal Details' section

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

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

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

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

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

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

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

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

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

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

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

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

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

F Clarification / Guidelines on filling 'Contact details' section

- 1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
- 2 Do not add '0' in the beginning of Mobile number.

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

- 1 Provide KYC number of related person if available.

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

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

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

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

List of ISO 3166 two- digit Country Code

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

MAITRA COMMODITIES PVT. LTD.

(Member : MCX, NSE & BSE and DP : CDSL)

Regd Office : 18, First Street, Venkatratnam Nagar Extension, Adyar, Chennai - 600 020. Phone : 044 - 6555 1292

E-Mail Id : info@maitracommodities.com Website : www.maitracommodities.com

Annexure A1

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual | Correspondence / Local Address

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 institution) KYC Number (Mandatory for KYC update request)

1. CORRESPONDENCE / LOCAL ADDRESS DETAILS* (Please refer 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 / Village*
 District* Pin / Post Code* State / U.T. Code* ISO 3166 Country Code*

2. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email ID) (Please refer instruction F at the end)

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

3. APPLICANT DECLARATION

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

3

Date : -- Place :

Signature / Thumb Impression of Applicant

MAITRA COMMODITIES PVT. LTD.

(Member : MCX, NSE & BSE and DP : CDSL)

Regd Office : 18, First Street, Venkatratnam Nagar Extension, Adyar, Chennai - 600 020. Phone : 044 - 6555 1292

E-Mail Id : info@maitracommodities.com Website : www.maitracommodities.com

Annexure B1

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual | Related Person

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 institution) KYC Number (Mandatory for KYC update request)

1. DETAILS OF RELATED PERSON (Please refer instruction G at the end)

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

Name* Prefix First Name Middle name last name

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

PROOF OF IDENTITY (PoI) OF RELATED PERSON* (Please refer instruction H at the end)

- A - Passport Number Passport Expiry date
- B - Voter ID card
- C - PAN card
- D - Driving Licence Driving Licence Expiry Date
- E - UID (Aadhaar)
- F - NREGA Job card
- Z - Others (any document notified by the central government) Identification Number
- S - Simplified Measures Account - Document Type code Identification Number

2. APPLICANT DECLARATION

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

4 X

Date : Place :

Signature / Thumb Impression of Applicant

3. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

KYC VERIFICATION CARRIED OUT BY

Date
 Emp. Name
 Emp. Code
 Emp. Designation
 Emp. Branch

(Employee Signature)

INSTITUTION DETAILS

Name : **MAITRA COMMODITIES PVT. LTD.**
 Code : **IN1190**

[INSTITUTION STAMP]

For Individuals only Additional KYC Form for Opening a Demat Account

MAITRA COMMODITIES PVT. LTD.

Depository Participant : CDSL Sebi Regn. No. : IN-DP-430-2019
 Regd Office : 18, First Street, Venkatratnam Nagar Extension, Adyar, Chennai - 600 020.
 Phone : 044 - 6555 1292
 E-Mail Id : dp@maitracommodities.com Website : www.maitracommodities.com

(To be filled by the Depository Participant)

Application No.											Date									
DP Internal Reference No.																				
DP ID	1	2	0	8	9	3	0	0	Client ID	0	0									

(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 the following details :

Holders Details

Sole/ First Holder's Name		PAN																	
		UID																	
Second Holder's Name		PAN																	
		UID																	
Third Holder's Name		PAN																	
		UID																	

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)

Status	Sub - Status	
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual Margin Trading A/c (MANTRA)	<input type="checkbox"/> Individual - Director <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Minor <input type="checkbox"/> Others (specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI - Depository Receipts	<input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> NRI Non-Repatriable Promoter <input type="checkbox"/> Others (specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository receipts <input type="checkbox"/> Others(specify) _____	

Details of Guardian (In case the account holder is a minor)

Guardian's Name		PAN	
Relationship with the Applicant			

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

I / We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end. (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
-------------------------------	--

I / We request you to send Electronic Transaction-cum-Holding statement at the email ID :	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

I / We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

I / We would like to receive the Tariff card & Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories	<input type="checkbox"/> Physical / <input type="checkbox"/> Electronic
---	---

5 X

Signatures

Sole / First Holder

Second Holder

Third Holder

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

I/We wish to receive dividend / interest directly in to my bank account as given below through ECS.
 (If not marked, the default option would be 'Yes')
 [ECS is mandatory for locations notified by SEBI from time to time]

Yes No

SMS Alert Facility Refer to Terms & Conditions given as Annexure - 2.4	Mobile No. +91 _____ [Mandatory, if you are giving Power of Attorney (POA)] (If POA is not granted & you do not wish to avail of this facility, cancel this option)										
Transactions Using Secured Texting Facility (TRUST), Refer to Terms & Conditions Annexure - 2.6	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. <input type="checkbox"/> Yes <input type="checkbox"/> No I/We wish to register the following clearing member Ids under my/our below mentioned BO ID registered for TRUST <table border="1" data-bbox="480 800 1513 961"> <thead> <tr> <th data-bbox="480 800 826 852">Stock Exchange Name/ID</th> <th data-bbox="826 800 1171 852">Clearing Member Name</th> <th data-bbox="1171 800 1513 852">Clearing Member ID (Optional)</th> </tr> </thead> <tbody> <tr> <td data-bbox="480 852 826 905"></td> <td data-bbox="826 852 1171 905"></td> <td data-bbox="1171 852 1513 905"></td> </tr> <tr> <td data-bbox="480 905 826 961"></td> <td data-bbox="826 905 1171 961"></td> <td data-bbox="1171 905 1513 961"></td> </tr> </tbody> </table>		Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)						
Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)									
Easi	To register for easi, please visit CDSL's website : www.cdslindia.com Easi allows a BO to view his ISIN balances, transactions and value of the Portfolio online.										

⑥ X

Signatures

Sole / First Holder

Second Holder

Third Holder

Nomination Form

MAITRA COMMODITIES PVT. LTD.

Depository Participant : CDSL Sebi Regn. No. : IN-DP-430-2019
Regd Office : 18, First Street, Venkatratnam Nagar Extension, Adyar, Chennai - 600 020.
 Phone : 044 - 6555 1292
 E-Mail Id : dp@maitracommodities.com Website : www.maitracommodities.com

Nominee Details

Registration No.	Date
------------------	------

Dear Sir/Madam,

I / We the Sole holder / Joint holders / Guardian (in case of minor) hereby declare that :

I / We **do not wish to nominate any one for this demat account.**

[Strike out what is not applicable.] [Signatures of all account holders should be obtained on this form].

I / We **nominate** the following person/s who is entitled to receive security balances lying in my/our account, particulars whereof are given below, in the event of the death of the Sole holder or the death of all the Joint Holders.

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name :			
*First Name :	_____	_____	_____
Middle Name :	_____	_____	_____
*Last Name	_____	_____	_____
Nomination Details	Nominee 1	Nominee 2	Nominee 3
*Address			
*City			
*State			
*Pin			
*Country			
Telephone No.			
FAX No.			
PAN No.			
UID			
Email ID			
*Relationship with the BO			
Date of birth (Mandatory if Nominee is a minor) dd-mm-yyyy			
Name of the Guardian of Nominee (if nominee is a minor)			
*First Name :	_____	_____	_____
Middle Name :	_____	_____	_____
*Last Name	_____	_____	_____

⑦

Signatures

Sole / First Holder

Second Holder

Third Holder

Nomination Details	Nominee 1	Nominee 2	Nominee 3
*Address of the guardian of nominee			
*City			
*State			
*Pin			
*Country			
Age			
Telephone			
Fax No.			
Email ID			
*Relationship of the Guardian with the Nominee			
*Percentage of allocation of securities			
*Fractional allocation of the securities if any [Please tick the respective nominee, (any one) if tick not marked default will be first nominee]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note : The nominee residual securities: incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.

*** Marked is Mandatory field**

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

Note : One witness shall attest signature(s) / thumb impression(s)

	WITNESS
NAMES OF WITNESS	
ADDRESS OF WITNESS	
SIGNATURE OF WITNESS	

I/We have read the Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories 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	<input checked="" type="checkbox"/> 8 <input type="checkbox"/> X		

(Signatures should be preferably in black ink).

Annexure - 1 Part - II

FOR INDIVIDUALS

To
MAITRA COMMODITIES PVT. LTD.
 (Member : MCX, NSE & BSE)
SEBI Regn. No. INZ000074139
Regd Office : 18, First Street, Venkatratnam Nagar Extension,
 Adyar, Chennai - 600 020.
 Phone : 044 - 6555 1292
 E-Mail Id : info@maitracommodities.com
 Website : www.maitracommodities.com

PHOTOGRAPH

Please affix your recent
 passport size
 photograph and
 sign across it

(9) X

Please fill this form in ENGLISH and in BLOCK LETTERS.

A. OTHER DETAILS

1. Gross Annual Income Details (please specify) :

Income Range per annum : <input type="checkbox"/> Below Rs.1 Lac <input type="checkbox"/> Rs.1-5 Lac <input type="checkbox"/> Rs.5-10 Lac <input type="checkbox"/> Rs.10-25 Lac <input type="checkbox"/> > Rs.25 Lacs (OR)			
Networth as on (date) _____ (Rs. _____) (Net worth should not be older than 1 year)			
2. Occupation (Please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional		
	<input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> House Wife <input type="checkbox"/> Student <input type="checkbox"/> Others (Specify _____)		
Name of Employer/ Establishment			
Designation	Period of Service :		
Address (Office)			
Contact Details (Off.)	Phone:	Fax:	Email:
3. Please Tick, as Applicable	<input type="checkbox"/> Politically Exposed Person (PEP) / <input type="checkbox"/> Related to a Politically Exposed Person (PEP)		
	<input type="checkbox"/> Not a Politically Exposed Person (PEP) / <input type="checkbox"/> Not Related to a Politically Exposed Person (PEP)		

B. BANK ACCOUNT (S) DETAILS

Bank Name	Bank A/C Type	<input type="checkbox"/> Savings / <input type="checkbox"/> Current /
Bank A/C Number*		<input type="checkbox"/> Others-in case Of NRI/NRE/NRO
Bank Branch Address		
MICR	RTGS/NEFT/IFSC Code	

*Payment / Dividend will be issued to the said Bank account by default unless & otherwise specified

Bank Name	Bank A/C Type	<input type="checkbox"/> Savings / <input type="checkbox"/> Current /
Bank A/C Number		<input type="checkbox"/> Others-in case Of NRI/NRE/NRO
Bank Branch Address		
MICR	RTGS/NEFT/IFSC Code	

Note : Provide a copy of cancelled cheque leaf/ pass book / bank statement specifying name of the client, MICR Code or/ and IFSC Code of the bank.

C. DEPOSITORY ACCOUNT(S) DETAILS , if available

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

Note : Provide a copy of either Demat Master or a recent holding statement issued by DP bearing name of the client.

D. TRADING PREFERENCES Please sign in the relevant boxes with which Exchange you wish to trade.
The Exchange not chosen should be struck off by the client.

Sr. No.	Name of the Stock Exchanges #	Date of Consent for Trading on concerned Exchange	Signature of the Client
1.	Multi Commodity Exchange of India Ltd. (MCX) - Futures		(10a) <input checked="" type="checkbox"/>
2.	Multi Commodity Exchange of India Ltd. (MCX) - Options		(10b) <input checked="" type="checkbox"/>
3.	National Stock Exchange of India Ltd. (NSE) - Cash		(10c) <input checked="" type="checkbox"/>
4.	National Stock Exchange of India Ltd. (NSE) - Derivatives		(10d) <input checked="" type="checkbox"/>
5.	BSE Ltd. (BSE) - Cash		(10e) <input checked="" type="checkbox"/>
6.	BSE Ltd. (BSE) - Derivatives		(12f) <input checked="" type="checkbox"/>

At the time of printing the form, the Member must specify the names of the Exchanges where the Member has membership. [In case of allowing a client for trading on any other Exchange at a later date, which is not selected now, a separate consent Letter is required by the Member from client and to be kept as enclosure with this document]

E. Investment /Trading Experience	No Prior Experience <input type="checkbox"/>	_____ years in Stocks/Commodities
	_____ Years in other Investment related field	

F. PAST REGULATORY ACTIONS

Details of any action/proceedings initiated/pending/ taken by FMC / SEBI / Stock exchange / Commodity exchange/ any other authority against the client during the last 3 years :	<input type="checkbox"/> Yes <input type="checkbox"/> No

G. DEALINGS THROUGH OTHER MEMBERS

If client is dealing through the Member, provide the following details (In case dealing with Multiple Members, Provide details of all in a separate sheet containing all the information as mentioned below):

Member's / Authorized Person (AP)'s Name	Exchange & Exchange's Registration No.	Concerned Member's Name With whom the AP is registered	Registered Office Address Phone / Fax / Email /Web Details	Client Code

Details of disputes/dues pending from / to such Member/AP :

--	--	--	--	--

H. INTRODUCER DETAILS (Optional)

Name of the Introducer	
Status of the Introducer	<input type="checkbox"/> Authorized Person / <input type="checkbox"/> Existing Client / <input type="checkbox"/> Others, please specify:
Address of the Introducer	
Phone no. of the Introducer	
Signature of the Introducer	

I. ADDITIONAL DETAILS

Whether you wish to receive communication from Member in electronic form on your Email-id :	
<input type="checkbox"/> Yes	<input type="checkbox"/> No { If Yes then please fill in Appendix-A }
Wish to receive Copy of Standard Documents like Rights & Obligations, Uniform Risk Disclosure Documents, Guidance Note detailing Do's and Don'ts & Policies and procedures.	<input type="checkbox"/> Electronic <input type="checkbox"/> Physical

<input type="checkbox"/> I /WE WISH TO NOMINATE	<input type="checkbox"/> I /WE DO NOT WISH TO NOMINATE
Name of the Nominee	
Relationship with the Nominee	
PAN of Nominee	D.O.B. of Nominee
Address & Phone No. of the Nominee	

IF NOMINEE IS A MINOR, DETAILS OF GUARDIAN	
Name of Guardian	
Address & Phone No. of the Guardian	
Signature of the Guardian	

WITNESSES (Only applicable in case the account holder has made nomination)

Name	:	Name	:
Signature	:	Signature	:
Address	:	Address	:

DECLARATION

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
2. I/We confirm having read/been explained and understood the contents of the tariff sheet and all voluntary / non-mandatory documents.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s), 'Risk Disclosure Document' 'Do's and Don't's' and 'Policies and Procedures' . I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have Also been informed that the standard set of documents has been displayed for Information on Member's designated website, if any.

Place : _____

Date : _____

⑪ X

Signature of Client

FOR OFFICE USE ONLY

UCC Code allotted to the Client :

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Employee			
Employee Code			
Designation of the employee			
Date			
Signature			

I / We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.

For MAITRA COMMODITIES PVT. LTD.**Authorised Signatory**

Date : _____

Seal/Stamp of the Member**INSTRUCTIONS/ CHECK LIST**

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

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income - Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement.	Bank account statement for last 6 months
Any other relevant documents substantiating ownership of assets.	Self declaration with relevant supporting documents.

*In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.

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.
3. Demat master or recent holding statement issued by DP bearing name of the client.
4. For individuals:
 - a. Broker has an option of doing 'in-person' verification through web camera at the branch office of the broker/sub-broker's office.
 - b. In case of non-resident clients, employees at the 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.

**Terms And Conditions-cum-Registration Form for receiving SMS Alerts from CDSL
[SMS Alerts will be sent by CDSL to Bos for all debits and for all credits as well.]**

Definitions:

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

1. "Depository" means Central Depository (India) Limited, a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai - 400 001 and all its branch offices and includes its successors and assigns.
2. 'DP' means Depository Participant of CDSL. The term covers all types of Dps who are allowed to open demat accounts for investors.
3. 'BO' means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

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

Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.
3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.
5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers from the 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 such unauthorized debit to / transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.**
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed with out proper authorization, the BO should immediately inform the DP in writing.

Fees:

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

Disclaimer:

The depository shall make 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 gives no warranty with respect to the quality of the service provided by the service provider. 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 any 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, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of 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 purposes 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 Bos 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)

BO ID	1	2	0	8	9	3	0	0		0	0						
-------	---	---	---	---	---	---	---	---	--	---	---	--	--	--	--	--	--

(Please write your 8 digit DP ID)

(Please write your 8 digit Client ID)

Sole/ First Holder's Name : _____

Second Holder's Name : _____

Third Holder's Name : _____

Mobile Number on which messages are to be sent

+91																	
-----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Please write only the mobile number without prefixing country code or zero)

The mobile number is registered in the name of : _____

Email ID : _____

(Please write only ONE valid email ID on which communication; if any, is to be sent)



Signatures Sole / First Holder _____

Second Holder _____

Third Holder _____

Place : _____

TARIFF SHEET - TRADING

BROKERAGE DETAILS :

Cash Intraday		
Cash Delivery		
Futures	NSE -	MCX -
Option Per Lot	NSE -	MCX -
Other Charges		
Doc Charges + KRA Charges	Rs 300 + GST	
For Physical Document Charges	Rs 20 + Actual Courier Charges	
For Chq Bounce/Chq Cancellation charges	Rs 500	
Interest on Delay Payment	18 % P A	
Payment Gateway	Rs 10	
Short Margin Penalty for Consecutive 3 days	5% on the shortfall from fourth day onwards	
Clearing Member Charges	Per Crore	
Cash	Rs 75	
Futures	Rs 250	
Options	Rs 2000	
Statutory Charges		
Commodity Future		
Transaction Charges	0.0026%	
CTT on Selling Side	0.01%	
SEBI Turnover Charges	0.0001%	
Equity - Cash		
Cash Transaction Charges	0.00325%	
STT on Delivery	0.1%	
STT on Intraday Selling Side	0.025%	
SEBI Turnover Charges	0.0001%	
NSE Futures		
Transaction Charges	0.00190%	
STT on Selling Side	0.01%	
SEBI Turnover Charges	0.0001%	
NSE Option		
Transaction Charges	Rs 2500/- Flat	
STT on selling Side	0.05%	
SEBI Turnover Charges	0.0001%	
Stamp Duty	As per Stamp Act of State's.	

Other charges :

- A. Statutory charges such as Commodity Transaction Tax (CTT), Security Transaction Tax (STT), Exchange Transaction Charges (TO), Stamp duty, SEBI Turnover Fees, GST, Investor Protection fund will be charged to the client at applicable rates prescribed by the appropriate authorities.
- B. Penalties as imposed by the Exchanges and Depositories.
- C. Delayed payment charges , Cheque dis-honour charges & Cheque stop payment charges as applicable.
- D. Demat charges as per DP Tariff card.

(13)

Signature of Client : _____

TARIFF CARD FOR BENEFICIARY OWNER ACCOUNT HOLDERS :

Dear Sir/Madam,

The appended tariff will be applicable for the customer opting Regular/Basic services Demat Account

ANNEXURE - REGULAR / BASIC SERVICES DEMAT ACCOUNT (BSDA)

		<input type="checkbox"/> I wish to open a Regular Demat Account		<input type="checkbox"/> I wish to open Basic Services Demat Account (BSDA)	
Sr No.	Nature of Services	Regular Demat Account		Basic Services Demat Account (BSDA)	
		Fees	Min	Fees	Min
1	Account Opening Charges	NIL		NIL	
2	Debit Transaction Equity/ Mutual Funds(Market)	0.02% of the value of the transaction	Rs.20/- Rs.50/-	0.02% of the value of the transaction	Rs.50/-
3	Debit Transaction Equity/ Mutual Funds(Off Market)	0.03% of the value of the transaction	Rs.50/-	0.03% of the value of the transaction	Rs.50/-
4	Credit Transactions	NIL		NIL	
5	Pledge Services (Creation/Invocation/Closure)	0.025% of the value of the transaction	Rs.50/-	0.025% of the value of the transaction	Rs.50/-
6	Reissuance of Delivery Instruction Booklet(DIB)	Rs.50/-per Booklet + Courier charges as applicable		Rs.50/-per Booklet + Courier charges as applicable	
7	Dematerialisation Charge / ISIN + Dematerialisation Request	Min Rs.100/- upto 10 Certificates, Rs.5 per Certificate for more than 10 Certificates. Rs.20/-per Booklet + Courier charges as applicable		Min Rs.100/- upto 10 Certificates, Rs.5 per Certificate for more than 10 Certificates. Rs.20/-per Booklet + Courier charges as applicable	
8	Rematerialisation Charge / ISIN + Rematerialisation Request	Min Rs.100/- including Courier charges		Min Rs.100/- including Courier charges	
9	Failed Instruction Charge	Rs.50/-per Instruction		Rs.50/-per Instruction	
10	Courier/Postal Charges only (Adhoc Statement)	Charges as applicable		Charges as applicable	
11	Annual Maintenance Charges	Rs.400/- + GST		NIL	

REMARKS : The above charges are subject to Taxes and duties as applicable as per government policies.

Terms & Conditions:

1. Demat customers eligible for the BSDA facility need to register their mobile number for the SMS alert facility for debit transactions
2. The above charges are exclusive of GST levied @ 18% and other taxes/statutory charges levied by government bodies/statutory authorities from time to time, which will be charged as applicable.
3. In case the Demat accounts with BSDA facility does not meet the listed eligibility as per guideline issued by SEBI or any such authority at any point of time, such BSDA accounts will be converted to Regular Demat account without further reference to the respective customers and will be levied standard pricing
4. In case if the Demat accounts with BSDA facility exceed the prescribed limits and move out of the stipulated BSDA criteria, the eligibility of such accounts for BSDA facility will be evaluated on the last day of the Annual billing cycle.
5. The value of the transaction will be in accordance with rates provided by Depositories (NSDL/CDSL)
6. The transaction charges will be collected upfront & debited in Ledger. The charges quoted above are for the services listed. Any services not quoted above will be charged separately.
7. Interest @ 18% p.a. will be charged for non-payment of bills.

8. The operating instructions for the joint accounts must be signed by all the holders.
9. All instructions for transfer must be received at the designated DP servicing branches at least 24 hours before the execution date.
10. The charges for processing of instructions submitted on the execution date (accepted at client's risk) will be 0.25% on the value of transaction, minimum of Rs.50/- per instruction.
11. In case of non-recovery of Debit charges due to inadequate balance in your lined trading account or inadequate advances fees or invalid trading account, the Depository services for your account will be temporarily discontinued. Any request for resuming the services will be charged at Rs. 250/- and services will be resumed in a minimum of three working days from the date of receipt of request with Maitra Commodities Pvt Ltd and post payment of all outstanding dues towards depository charges.
12. In case the Demat accounts are with nil balances/transactions or incase if the customer defaults in payment of AMC, the physical statement shall not be sent to the customer after period of year. However the electronic statement of holding will be sent only to the customers whose email Ids are registered for e-statement.

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature	<input checked="" type="checkbox"/> 14 <input type="checkbox"/> X		

MOBILE NUMBER & EMAIL ID DECLARATION

I hereby declare that the mobile number, E-mail ID belongs to Me or My family (spouse, dependent children and dependent parents).

	Name of the Customer	Mobile Number	Email ID of the customer
Sole / 1st holder			
2nd holder			
3rd holder			

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature	<input checked="" type="checkbox"/> 15 <input type="checkbox"/> X		

VOLUNTARY DOCUMENT

Electronic Contract Note (ECN) - DECLARATION
(VOLUNTARY)

Appendix A

To,

MAITRA COMMODITIES PVT. LTD.

Member : MCX, NSE & BSE

18, First Street, Venkatratnam Nagar Extension,
Adyar, Chennai - 600 020.

Dear Sir,

I/We, _____ a client with
M/s MAITRA COMMODITIES PVT. LTD., Member of MCX, NSE & BSE undertake as follows.

- I/We am/are aware that the Member has to provide contract note in respect of all the trades placed by me unless I/We myself/ourself want the same in the electronic form.
 - I/We am/are aware that the Member has to provide electronic contract note for my/our convenience on my/our request only.
 - Though the Member is required to deliver physical contract note, I/We find that it is inconvenient for me/us to receive physical contract notes. Therefore I/We am/are voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out/ ordered by me/us.
 - I/We have access to a computer and I/We am/are regular internet user, having sufficient knowledge of handling email operations.
 - My/our email ID is * _____ . This has been created by me/us and not by someone else.
 - I/We am/are aware that this declaration form should be in English or any other language known to me.
 - I/We am/are aware that non-receipt of bounced mail notification by the Member shall amount to delivery of the contract note at the above e-mail ID.
 - I/We am/are responsible to update, if any change in My Email ID will be intimated to Maitra Commodities Pvt Ltd
- 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 risks involved in dispensing with 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.)*

Client Name : _____

Unique Client Code : _____ PAN : _____

Address : _____

Signature of the Client:

Date : _____

Place : _____

Verification of the client signature done by

Name of the designated officer of the Member : _____

Signature : _____

VOLUNTARY DOCUMENT

RUNNING ACCOUNT AUTHORISATION

To

MAITRA COMMODITIES PVT. LTD.

Member : MCX, NSE & BSE

18, First Street, Venkatratinam Nagar Extension, Adyar, Chennai - 600 020.

I/We are dealing through you as a client in Commodities/Securities segment in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as under:

1. I/We request you to kindly note that the orders placed / modified / cancelled by me / us should NOT be noted in the order book, as the same is a time consuming affair and may lead to loss due to non-execution of the order in time due to the formalities involved.
2. I/We hereby authorize you to accept verbal instructions for placement / modification / cancellation of orders and I / we expressly agree that once the trade confirmation is sent by you and / or contract note is accepted by me / us that shall be final as far as execution / non-execution / inappropriate execution of any of my / our orders for a particular trading day.
3. I/We request you to maintain running balance in my 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.
4. I/We request you to settle my / our fund account
 - Once in every calendar Quarter or higher period as allowed by SEBI / Exchanges time to time
 - Once in a calendar Monthand also request you to release the funds and securities due to me / us on my / our specific request, either written or oral.
5. I/We confirm you that I will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 7 working days from the date of receipt of funds/commodities/securities or statement of account or statement related to it, as the case may be at your registered office. After that I/We shall have no right to dispute the transaction, funds and/or commodities and/or securities ever and agree that you shall not be liable for any incidental loss/damage caused due to retention of funds and/or commodities and/or securities.
6. I/We confirm you that I/We can revoke the above mentioned authority any time by giving notice in writing to you.
7. I/We confirm you that further an amount of up to Rs. 10,000/- may be retained for settlement of accounts.

Thanking you

Yours faithfully,

①⑦ X

(Signature)

Client Name: _____

Client Code: _____

VOLUNTARY DOCUMENT

SELF DECLARATION FOR COMMODITY WISE CATEGORIZATION

To

The Manager,

MAITRA COMMODITIES PVT. LTD.

18, First Street, Venkatratnam Nagar Extension, Adyar, Chennai - 600 020.

I/We am/are dealing through you as a client in Commodities and Equities. As per the SEBI circular SEBI/HO/CDMRD/DNPMP/CIR/P/2019/08 date January 04, 2019 as well as circulars from MCX Exchange and for your records, I hereby give my consent to categorize me/us Commodity wise by tick marking (✓) in appropriate places as detailed below.

Commodity #	Categories of Participants *					
	Farmers / FPOs	Value Chain Participants (VCPs)	Proprietary Traders	Domestic Financial Institutional Investors	Foreign Participants	Others

* Category of the participants (Please tick the appropriate one commodity wise)

Commodities like Gold, Silver, Crude Oil, Natural Gas, Brass, Copper, Zinc, Nickel, Aluminum, Lead, Black pepper, Cotton, Cardamom, Castor Seed, CPO, etc.,

⑱

(Signature)

Client Name: _____ Client Code: _____

Date : _____

Farmers/FPOs	It includes participants such as farmers, farmers' cooperatives, Farmers Producers Organisations (FPOs) and such entities of like nature.
Value chain participants (VCPs)	It includes participants such as Processors, Commercial users as Dal and Flour Millers, Importers, Exporters, Physical Market Traders, Stockists, Cash & Carry participants, Producers, SMEs/MSMEs & Wholesalers etc., but exclude farmers/FPOs.
Domestic financial institutional investors	It includes participants such as Mutual Funds (MFs), Portfolio Managers, Alternative Investment Funds (AIFs), Banks, Insurance Companies and Pension Funds etc., which are allowed to trade in commodity derivatives
Foreign participants	It includes participants such as Eligible Foreign Entities (EFEs), NRIs etc. which are allowed to trade in commodity derivatives markets.
Others	Participants not falling under above said categories.

POWER OF ATTORNEY (POA)

TO ALL TO WHOM THESE PRESENTS SHALL COME I/WE 1) _____
 , 2) _____, 3) _____ an Individual / a sole
 proprietary concern / a partnership firm / a body corporate / trust, having his / her / its residence / registered office / place of business
 at _____ (hereinafter referred to as "client"),
 bearing **Unique Client Code (UCC)** _____

Whereas I/we hold a Beneficiary account number

1	2	0	8	9	3	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 BO-ID)
 with Central Depository Services (India) Limited, through **M/s. MAITRA COMMODITIES PVT LTD** bearing DP- ID **12089300**

And Whereas I/we am/are investor engaged in buying and selling of securities through **MAITRA COMMODITIES PVT LTD**, a member of
NATIONAL STOCK EXCHANGE OF INDIA LIMITED bearing **SEBI Registration No. INZ000074139**

And Whereas due to exigency and paucity of time, I/we am/are desirous of appointing an agent /attorney to operate the aforesaid beneficiary account on my behalf
 for a limited purpose in the manner hereinafter appearing:

NOW KNOW WE ALL AND THESE PRESENTS WITNESSTH THAT I/WE THE ABOVE NAMED DO HEREBY NOMINATE, CONSTITUTE / AND APPOINT M/S.MAITRA
 COMMODITIES PVT LTD (name of the attorney/Clearing Member) as my/our true and lawful attorney (hereinafter referred to as the attorney) for me/us and on
 my/our behalf and in my/our name to do instruct the aforesaid Depository Participant to debit securities and / or to transfer securities from the aforesaid account
 for the purpose of delivering the same to the clearing house of the recognized stock exchange toward any segment in respect of securities sold by me/us through
 them.

This authority is restricted to the pay-in obligations arising out of the transactions of sale effected by me/us through MAITRA COMMODITIES PVT LTD (name of the
 attorney/Clearing Member) and I/we ratify the instructions given by the aforesaid Clearing Member to the Depository Participant named hereinabove to the
 respective Clearing Accounts of National Stock Exchange of India Limited, BSE Limited and any other Exchange(s), viz.,

Name of the Exchange	CDSL		
	ACCOUNT TYPE	ACCOUNT NUMBER	CM BP ID
National Stock Exchange of India Ltd.	CM A/c	1208930000000016	M52072
National Stock Exchange of India Ltd.	Early Pay-in A/c	1100001100020721	M52072
National Stock Exchange of India Ltd.	Client Collateral A/c	1208930000000054	M52072
National Stock Exchange of India Ltd.	Collateral A/c	1208930000000073	M52072

respectively in the manner specified herein.

To transfer any securities from my / our Beneficiary Client account as stated above to the extent of Early Pay-in / availing Margin limits in Cash segment and
 Derivatives segment of NSE. To Pledge the securities with the Clearing Corporations / Clearing Members of the Exchanges wherever the Broker is a registered
 Member, for the purpose of availing margin limits, to trade in the respective segments, wherever I have consented to trade. Further, if the Clearing Member wish to
 open any other pool A/c. for the purpose of settlement, the same POA can be used to transfer the securities for my selling obligation through the Clearing Member.

Pursuant to my / our instruction, to acquire by subscribing to Initial Public Offer or by purchase or otherwise securities and to sell, transfer and endorse the securities
 or redeem the same either through internet using the Code or Identification number issued by any Mutual Fund from time to time and / or to sign and to execute all
 transfer deeds whether as transferor or transferee and such other instruments application and papers as may be necessary for the purpose of acquiring or
 transferring / redeeming the same and / or for transferring the investments in the Units of Mutual Funds from one scheme to another or between Mutual Funds.

To issue orders and instructions for acquisitions and disposal of units of mutual funds for and on behalf of myself / ourselves and to subscribe to initial public offering
 or follow-on public offerings of securities.

This authority can be exercised even if the account balance serves only part of my / our Pay-in obligations. MAITRA COMMODITIES PVT LTD. will not be liable for
 auction that may arise due to shortage of shares in the account after 3.00 pm on T+1 day.

I/We hereby agree that MAITRA COMMODITIES PVT LTD. would return to the client(s) /BO Holder, the securities that may have been received by it erroneously or
 those securities that it was not entitled to receive from the client(s)/BO Holder.

I / we hereby agree that all acts and deeds done by MAITRA COMMODITIES PVT LTD. under this authorization shall be construed as acts and deeds done by me / us,
 jointly as well as severally and further confirm and ratify all and whatsoever MAITRA COMMODITIES PVT LTD. shall lawfully do or cause to be done by virtue of this
 authorization.

I / We hereby authorize MAITRA COMMODITIES PVT LTD to pay DP charges due to MAITRA COMMODITIES PVT LTD arising out of transactions in the above B.O
 account, under this power of attorney, by debiting my / our trading ledger account with MAITRA COMMODITIES PVT LTD, until my / our trading account is active in
 MAITRA COMMODITIES PVT LTD.

I/we further agree and confirm that the powers and authorities conferred by this Power of Attorney shall be in force until the same is revoked by me/us in writing to
 the Depository Participant any time.

SIGNED AND DELIVERED By the within named Beneficial Owner(s)

	Sole / First Holder	Second Holder	Third Holder		
Name					
Signature	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">20</td><td style="width: 20px; text-align: center;">X</td></tr></table>	20	X		
20	X				

WITNESSES :
 Signature 1 : _____ NAME : _____
 ADDRESS : _____

I/We Accept
 For **MAITRA COMMODITIES PVT LTD.**

Sole / First Holder

Second Holder

Third Holder

Signatures



DIGITAL STATEMENT

To,

MAITRA COMMODITIES PVT LTD.

18, First Street, Venkatratinam Nagar Extension, Adyar, Chennai - 600 020.

Date : _____

Reg : Beneficial Owner (BO) Account No.

DPID	1	2	0	8	9	3	0	0	CLIENT ID	0	0						
------	---	---	---	---	---	---	---	---	-----------	---	---	--	--	--	--	--	--

I / We _____

[Name(s) of the BO(s)] have confirm having opted to receive the statement of accounts pertaining to the above mentioned BO account in electronic mode in lieu of physical copy of the statement of account.

I / We confirm that the dispatch of statement of account to me / us at the following email address shall constitute full and absolute discharge of your obligation under the above agreement to provide me / us with statement of my / our BO account. But I / We reserve my / our right to receive the physical copy of statement of accounts despite receiving the same in electronic mode, if such a demand is made in writing on you.

[E-mail address : _____]

I / We confirm that any change in the aforesaid email address or any other instructions with regard to dispatch / service of my / our statement of account on me / us shall not be binding upon you unless you are intimated in writing by me / us by acknowledged delivery.

Yours faithfully,

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature	(21) X		

OPTION FORM FOR ISSUE OF DIS BOOKLET

To

MAITRA COMMODITIES PVT LTD.

18, First Street, Venkatratinam Nagar Extension, Adyar, Chennai - 600 020.

Dear Sir / Madam,

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

OPTION 1:

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA / executed PMS agreement in favour of / with **MAITRA COMMODITIES PVT LTD.** _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager. However, the Delivery Instruction Slip (DIS) booklet should be issued tome / us immediately on my / our request at any later date.

OR

OPTION 2:

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my / our CDSL account though I/we have issued a Power of Attorney (POA) / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing Member / PMS manager) for executing delivery instructions for setting stock exchange trades [settlement related transactions] effected through such Clearing Member / by PMS manager.

Yours faithfully,

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature	(22) X		

VOLUNTARY DOCUMENT
UPDATION OF MOBILE NO.

I,.....having PAN No.....do hereby declare that my Mobile no. Is..... Further, I authorize **MAITRA COMMODITIES PVT. LTD.** that the same may be used for giving me any information/alert/sms/call.

I further declare the above mentioned statement is true and correct.

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(Signature of Client)

Name :

Client Code :

Address :

Verified by (to be done by **MAITRA COMMODITIES PVT. LTD.**)

Name of Employee..... Signature.....

CLIENT DEFAULTER DECLARATION

Dated : _____

I, _____ having PAN no. _____

do hereby declare that I have not been involved in any terrorist activity and I have not been declared as defaulter or my Name is not appearing in defaulter database as per SEBI/ Various Exchanges/ Regulatory bodies/CIBIL (Credit Information Bureau of India Ltd.) etc.

I further declare that the above mentioned declaration/statement is true and correct.

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(Signature of Client)

Name:

Client Code:

[Note: To be signed by person himself/herself not to be signed by his/her attorney/authorised person etc.]

PMLA POLICY DECLARATION

I / We _____ having the trading code no. _____ with **MAITRA COMMODITIES PVT. LTD.** confirm and declare that I / We had read and understood the contents and the provisions of the PMLA Act, 2002 and it was also explained by **MAITRA COMMODITIES PVT. LTD.** official. I / We further declare that I / We shall adhere to the rules and regulations and requirements mentioned in the PMLA Act, 2002.

Yours faithfully,

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Signature : _____

Name of the Client : _____

CLIENT REGISTRATION FORM - MUTUAL FUND
MUTUAL FUND SERVICE SYSTEM FACILITY (MFSS) / BSE STAR MF CLIENT REGISTRATION FORM

I/We am/are registered as your client _____ with above mentioned UDN No./ Client Code No _____ or the purpose of trading in the Capital Market Segment of National Stock Exchange of India Ltd. (Exchange) / BSE Ltd.

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

For the purpose of availing the MFSS / BSE StAR MF facility, I/we state that Know Your Client details as submitted by me/us for the stock broking may be considered for the purpose of MFSS/BSE StAR MF and I/we further confirm that the details contained in same remain unchanged as on date. I/We are willing to abide by the terms and conditions as mentioned in the circular dated November 24, 2009 (NSE)/December 02, 2009 (BSE) and as may be specified by the Exchange from time to time by Securities and Exchange Board of India (SEBI) and Association of Mutual Funds of India(AMFI).

I/We shall read and understand the contents of the Scheme Information Document and Key Information Memorandum, addenda issued regarding each Mutual Fund Schemes with respect to which I/we choose to subscribe/redeem. I/We further agree to abide by the terms and conditions , rules and regulations of the Mutual Fund Schemes.

I/We therefore request you to register me/us as your client for participating in the MFSS / BSE StAR MF

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

For MFSS (NSE)

For BSE STAR MF

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DETAILS OF TERMS & CONDITIONS FOR THE INVESTOR / CLIENT FOR USING NEW MFSS FACILITY / BSE STAR MF PLATFORM

1. Pre - requisites for becoming Investor / Client for the New MFSS facility / BSE StAR MF platform

- 1.1. The Client who is desirous of investing in units of Mutual Fund Schemes through the New MFSS/the BSE StAR MF
- 1.2. The Client intends to execute his instruction for the subscription/redemption of units of Mutual Fund Schemes through the Participant/the broker who is a Mutual Fund Intermediary (MFI) of the new MFSS/BSE StAR MF platform.
- 1.3. The Client has satisfied itself of the capacity of the Participant/MFI to deal in Mutual Fund units and wishes to execute its instruction through the Participant/MFI and the client shall from time to time continue to satisfy itself of such capability of the participant/MFI before executing trans - acting through the Participant/MFI.
- 1.4. The Client has approached to the Participant/MFI with the application for availing the new MFSS facility/ BSE StAR MF platform.
- 1.5. The Client has submitted relevant KYC (Know Your Client) details to the Participants/MFIs

2. Terms and Conditions

- 2.1. The client shall be bound by circulars/notices issued by NSEIL/BSE from time to time including the circulars issued by NSEIL since 2009 onwards and circulars issued thereafter and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
- 2.2 The client shall notify the Participant/MFI in writing if there is any change in the information in the client registration form provided by the client to the Participant/MFI at the time registering as a client for participating in the new MFSS/ StAR MF platform or any time thereafter.
- 2.3 The client shall submit to the participation/MFI a completed application form in the manner prescribed format for the purpose of placing a order with the Participant/MFI.
- 2.4.The client has read and understood the risks involved in investing in Mutual Fund Schemes
- 2.5. The client shall be wholly responsible for all his investment decisions and instruction.
- 2.6. The client shall ensure continuous compliance with the requirements of NSEIL/BSE, SEBI and AMFI.
- 2.7. The client shall pay to the Participant/MFI fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant/MFI renders to the Client.
- 2.8 The Client will furnish information to the Participant/MFI in writing, if any winding up petition or insolvency petition has been filed or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
- 2.9. In the event of non-performance of the obligation by the Participant/MFI, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL/BSE or NSE Clearing / Indian Clearing Corporation LTD. (ICCL).
- 2.10. In case of any dispute between the Participants/MFIs and the investors arising out of the MFSS facility/BSE StAR MF platform, NSEIL/BSE and / or NSE Clearing /ICCL agrees to extend the necessary support for the speedy redressal of the disputes .

Declaration: I am fully aware that

- I would need to keep clear that balances in my DP accounts for the transaction to be processed.
- I have understood the terms and conditions attached herewith and agreed to the same.
- I have understood MAITRA COMMODITIES PVT. LTD. will place my order on a best effort basis.
- Mutual Fund Investments are subject to market risk, please read the Statement of Additional Information (SAI)/Offer document (OD)/ Scheme.Information Document (SID) carefully before investing.

* MAITRA COMMODITIES PVT. LTD. offers execution based services only

FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) DECLARATION

Client Code : _____ PAN : _____

Place / City of Birth : _____ ISO Country Code of Birth : IN

Is your Country of Tax Residency other than India Yes No (Please tick at appropriate place)

If 'Yes', Please specify the details of all countries where you hold tax residency and its Tax Identification Number & type

S No.	Country of Tax Residency#	Tax Payer Identification Number / Functional Equivalent	Identification Type (TIN or other, please specify)
1			
2			
3			

to include all countries other than India, where investor is Citizen / Resident / Green card Holder / Tax Resident in those respective countries especially of USA

Declaration : I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I am aware that I may liable for it. I hereby authorize you to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to / any of the Regulators, their employees ('the Authorized parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit - India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same.

Further, I authorize you to share the given information to other SEBI Registered Intermediaries/or any other regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your end or by domestic or overseas regulators / tax authorities. I/We authorize you to provide relevant information to the above regulators and to enable withholding any sums from my account or close or suspend my account(s) without any obligation of advising me of the same.

Signature : (28) _____ Name of the Client : _____

Date : _____ Place : _____

ACKNOWLEDGEMENT

To

MAITRA COMMODITIES PVT. LTD.

Member : MCX, NSE & BSE and DP : CDSL

18, First Street, Venkatratnam Nagar Extension, Adyar, Chennai - 600 020.

Dear Sir,

I/We hereby acknowledge the receipt of following documents duly executed by me/us - Physical / Electronic

1. Client Registration Form (KYC),
2. Rights & Obligations (Exchanges & DP),
3. Risk Disclosure Document (RDD),
4. Guidance Note,
5. Policies and Procedures.
6. Tariff Sheet
7. Other documents executed by me/us.

Signature of the Client : (29) _____

Name of the Client : _____ Client Code : _____

Place : _____ Date : _____

Maitra Commodities Pvt Ltd.

Investor Awareness

Safe Trading Measures

1. Avoid Off-exchange trading. They are both risky and illegal.
2. Do not expect unrealistic / guaranteed returns.
3. Do your own homework to trade in them successfully.
4. Read and understand the client agreement before signing it.
5. Trade within your investment and risk taking capacity
6. Knowledge of physical markets of the commodities that you invest in is essential to make informed decision.
7. Trade only with SEBI registered broker / depository participant (DP).
8. Update your KYC records on any change periodically with your brokers. (Change in income, change in address, phone numbers).

Financial Compliance Measures

1. Insist on Contract notes (e-contract notes , physical contract notes) for your executed trades.
2. Keep verified records of all market transactions
3. Insist on periodical statement of ledger accounts.
4. Conduct transactions only through cheque / NEFT / RTGS from registered /designated account.
5. Insist on and verify records of all trades executed through your UCC.
6. Invest only after adequate research / analysis.
7. Pay the broker by cheque (including margins), on brokers name, insist on receipts and keep these carefully and understand that you are entitled to receive funds within 48 hours of Exchange's pay-out.
8. Take a holistic view of your financial goals and invest accordingly.
9. Keep track your portfolio in your demat a/c on a regular basis.

Support :

1. If you recognize an un-authorized trade in your account please reach out to our support desk at 044- 48656581/82
2. For any grievances please reach out to us at grievances@maitracommodities.com
3. Register any complaints with MCX at <https://mcxring.mcxindia.com>
4. Register any complaints with NSE at <https://nseindia.com>
5. Register any complaints with BSE at <https://bseindia.com>
6. Register any complaints with SEBI at <https://scores.gov.in>

BRANCHES

KANNUR

Room No.CW 35/1767, 1st Floor, Ellika Plaza, Rajeev Gandhi Road,
Kannur - 670 001. Mobile : 85473 00333 Phone : 04972 - 761333

COIMBATORE

Shop No.S1/1068, Shanmugam Complex, Near Alagu Pharmacy,
MTP Road, Coimbatore - 641002.

Mobile : 73587 91083 / 86 Phone : 0422 - 4396299 / 4369299

TIRUPATI

19-10-18D, Indira Nagar, AIR Bypass Road,
Tirupati – 517501. Mobile : 9840338962, 88866 91875 / 78

TIRUPUR

11/1, RP Complex, 1st Floor, Puthuthotam Main Street,
Near Kailasa Mills & Cotton Market, Palladam Road,
Tirupur – 641604. Mobile : 93611 88480

ERODE

Door No. 408, 4th Floor, Sakthi Super Market Building,
408, Perundurai Road, Erode – 638011. Mobile : 93611 88477

SALEM

Sachin Plaza, 5-F, Sriram Nagar, Alagapuram, Salem – 636 004.
Mobile : 93611 88466

VIJAYAWADA

No.1/131, Sainth Printing Press Beside, Med Plus Backside, YSR road,
Vijayawada – 520 015. Mobile : 7993973464

NAMAKKAL

No. 42/145, Kurinji Tower, Opposite to Kumaran Maligai,
Salem Road, Namakkal – 637 001. Mobile : 93611 88448



MAITRA COMMODITIES PVT. LTD.