

## ACCOUNT OPENING KIT

**Name of Stock Broker / Trading Member :**  
**RAINBOW SECURITIES PRIVATE LIMITED**

**SEBI Regn. Nos. and Date :** INZ000190631 Dt.06.08.2018  
CDSL-IN-DP-689-2013, DP ID : 12077000

**Registered & Correspondence Office address :**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani, Kolkata - 700 001  
Telefax : (033) 2213-5183 / 5184 / 4943, E-mail : support@rainbowindia.co.in  
Website : www.rainbowindia.co.in, CIN : U67120WB1994PTC065293

**Name of Clearing Member (For NSE-F&O, NSE-CD, BSE-F&O and BSE-CD Segments) :** **GLOBE CAPITAL MARKET LIMITED**

**SEBI Regn. No. and Date :** INZ000177137 dt.14.05.2018

**Registered & Correspondence Office address :**  
609, Ansal Bhawan, 16, Kasturba Gandhi Marg, Connaught Place  
New Delhi - 110 001, Phone : 3041-2345, Fax : (011) 2372-0883  
E.mail : mail@globecapital.com, Website : www.globecapital.com

**Compliance Officer Name, Phone No. & email ID :**  
Mr Ganesh Kumar Jhawar, 97480-47437, info@rainbowindia.co.in

**CEO Name, Phone No. & email ID :**  
Mr Rajendra Bhutra, (033) 2213-5183, rbhutra@rainbowindia.co.in

For any grievance/dispute, please contact **RAINBOW SECURITIES PRIVATE LIMITED** at the above address or email id : investorgrievanceredressel@rainbowindia.co.in and Phone No. : (033) 2213-5183. In case not satisfied with the response, please contact the concerned exchange(s) at ignse@nse.co.in and Phone No. (022) 2659-8190 for NSE, at isc.mumbai@bseindia.com, Phone No. (022) 2272-8517 for BSE and at complaints@cdslindia.com and Phone No. 18002-25533 for CDSL.

Disclosure of Proprietary trading pursuant to SEBI Circular No.: SEBI/MRD/SE/ Cir-42/2003 dated 19th Nov., 2003, NSE Circular No.: NSE/INVG/PRE/2003/16 dated 25th Nov., 2003, BSE Notice No. 20031125-7 dated 25 November, 2003 :

We, **RAINBOW SECURITIES PRIVATE LIMITED**, are also engaged in Proprietary trading apart from Client based business.

## BASIC INFORMATION SHEET

### **Require details for investment of Individuals**

1. Name \_\_\_\_\_
2. E-mail ID \_\_\_\_\_
3. Mobile No. \_\_\_\_\_
4. PAN \_\_\_\_\_
5. Date of Birth \_\_\_\_\_
6. Place of Birth \_\_\_\_\_
7. Father's Name \_\_\_\_\_
8. Address1 \_\_\_\_\_
9. Address2 \_\_\_\_\_
10. Address3 \_\_\_\_\_
11. Occupation \_\_\_\_\_
12. Annual Income \_\_\_\_\_
13. Nominee Name \_\_\_\_\_
14. Relation with Nominee \_\_\_\_\_
15. Mother's Name \_\_\_\_\_
16. Marital Status \_\_\_\_\_
17. Qualification \_\_\_\_\_
18. PAN Card Photo Copy
19. Aadhar Card (Mask) Photo Copy
20. Aadhar Card Normal Photo Copy
21. Last Year ITR Acknowledgement Copy
22. Last 3 Months' Bank Statement
23. Last Two Years ITR ACKNOWLEDGEMENT
24. Last Two Years Balance Sheet
25. Cancelled Cheque
26. Nominee Pan Card Copy
27. Nominee Aadhar Card Copy
28. Demat Account Opening Cheque Rs.1988/- in Favor of Rainbow Securities Private Limited )

### **Require details for investment of Non Individual**

1. Name \_\_\_\_\_
2. E-mail ID \_\_\_\_\_
3. Mobile No. \_\_\_\_\_
4. PAN \_\_\_\_\_
5. Land Line No. \_\_\_\_\_
6. All Director Place of Birth \_\_\_\_\_

## **CHECKLIST FOR TRADING & DEMAT INDIVIDUAL ACCOUNT WITH KRA**

All documents should be self attested by client.

1. CKYC Application Form (To Be Signed).
2. Pan Card Of Client (with self attested)
3. Address Proof Aadhaar (with self attested)
4. Mother name required for CKYC updation.
5. Client place of Birth Mandatory for MF updation
6. 1 Copies Photo With Sign Below Paste On Kyc Form.
7. Pan Card & Address Proof Of Nominee (Self Attested)
8. Cancelled Cheque.
9. Bank A/C Statement Of Latest Quarter.
10. ITR Acknowledgement & Balance Sheet Of last Two Year {Reqd In F&O & COS}.
11. E-Mail Verification (please sent your email id on [kyc@rainbowindia.co.in/9331781912](mailto:kyc@rainbowindia.co.in)).
12. Cheque of Rupees RS 1988/-Life Time AMC towards AMC.KRA& STATUTORY CHARGES In Favour Of Rainbow Securities Pvt Ltd.
13. Masked Aadhar Mandatory.

### **NOTES :**

- IF NOMINEE ISA MINOR THEN GUARDIAN DETAILS REQUIRED
- DEMAT A/C NOT REQD. IN COS.

## **CHECKLIST FOR TRADING & DEMAT HUF ACCOUNT WITH KRA**

All documents should be self-attested by client with huf stamp.

1. Kra application form to be signed. (OF BOTH ENTITY)
2. Pan Card of HUF (Both side Photo copy & sign both side with stamp).
3. Address Proof of HUF (BANK STATEMENT NOT MORE THAN 3 MONTHS OLD)
4. 3 copies photo of Karta & 1 Copies photo of all major Co-Parceners with across sign, paste on KYC form as well as KRA form.
5. Pan Card of Karta all Major Co-Parceners (SELF ATTESTED)
6. Address Proof of Karta & all major Co-Parceners (self attested)
7. Cancelled cheque of HUF.
8. Bank a/c statement of latest quarter of HUF.
9. ITR acknowledgement & Balance Sheet & Profit & Loss account of HUF of last two years.
10. E-mail verification (**please sent your email id on [kyc@rainbowindia.co.in](mailto:kyc@rainbowindia.co.in)**)
11. HUF undertaking & Family declaration (**format given mail / hard copy**)
12. **HUF deed**
13. Cheque of **RS 1988/-Life Time AMC** towards AMC, KRA & STATUTORY CHARGES in favor of **Rainbow Securities Pvt Ltd.**
14. Karta & All Co-Parceners Aadhaar card copy Required with self-attested.

**NOTE :** FOR QUERY CONTACT at (033) 2213 5183, 93317-81912

## CHECKLIST FOR ACCOUNT OPENING IN TRADING & DEMAT FOR CORPORATES AND BASIC INFORMATION ACCOUNT WITH KRA

All documents should be self attested by client with company's rubber stamp.

1. Name\_\_\_\_\_
2. E-mail ID\_\_\_\_\_
3. Mobile No.\_\_\_\_\_
4. COMPANY PAN\_\_\_\_\_ (Attach Pan Card Copy)
5. Land Line No.\_\_\_\_\_
6. All Director Place of Birth\_\_\_\_\_
7. All Director Mobile No. and Email ID\_\_\_\_\_
8. Kra application form to be signed\_\_\_\_\_
9. GST Certificate of the Company
10. Address Proof of Company
11. Company Last Three Month Bank Statement. (Not Older Then Three Month)
12. PAN Card of Directors (Self Attested)
13. Address Proof of Directors (Self Attested) **Normal Adhaar Card and Mask Aadhar Mandatory** of all director.
14. 2 Copies of Photo of each Directors with across sign paste on KYC , KRA Form & Annexures
15. Cancel Cheque of Company.
16. Form 32 / DIR-12& Form 18 / INC-22 with ROC Receipt (**Current Directors**)
17. ITR acknowledgement & Audited Balance sheet & Profit & Loss account of last two years.
18. Certificate of Incorporation and MOA & AOA of Company.
19. Latest Share Holding Pattern on Letter Head of company. (Format enclosed)
20. Ultimate Beneficiary Details – Pan Card , Mask Aadhar , Normal Aadhar, % Shares Held )
21. Current Net worth Certificate by a Chartered Accountant.
22. Board Resolution & Authorised Signatories format on Letter Head of company. (Format enclosed)
23. Email Verification (**please sent your email id on [kyc@rainbowindia.co.in/9331781912](mailto:kyc@rainbowindia.co.in)**).
24. Cheque of Rupees **RS 3758/- Life Time AMC** & ( **RS 500/- CDSL charges yearly basis** ) towards AMC, KRA& STATUTORY CHARGES In favour Of **Rainbow Securities Pvt. Ltd.**

**Note :** If anyone holds more than 25% of share in the company then furnish kyc details for individuals & in case of non-individuals, their share holding pattern. FOR QUERY CONTACT AJAY KUMAR MISHRA OR MANOJ at (033) 2213-5183, 70034-89640, 93317-81912.

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

### **A. IMPORTANT POINTS :**

1. Self attested copy of PAN card is mandatory for all clients, including Promoters/Partners/Karta/Trustees and whole time directors and persons authorized to deal in securities on behalf of company/firm/others.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/ PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/ judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

### **B. Proof of Identity (POI) :**

1. PAN card with photograph is mandatory for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Original Verified Documents (OVD) are acceptable: Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving License / Letter issued by NPR / NREGA job card
3. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
4. Mention identification / reference number if 'Z - Others (any document notified by the central government)' is ticked.
5. Others - Identity card with applicant's photograph issued by any of the following: Central / State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

### **C. Proof of Address (POA) : - List of documents admissible as Proof of Address :**

(\*Documents having an expiry date should be valid on the date of submission.)

1. Passport/Voters Identity Card/ Ration Card/ Registered Lease or Sale Agreement of Residence/ Driving License/ Flat Maintenance bill/ Insurance Copy.
2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook -- Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

### **D. Exemptions/clarifications to PAN**

(\*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.

5. In case of institutional clients, namely, FIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

**E. List of people authorized to attest the documents :**

1. Authorized officials of Asset Management Companies (AMCs).
2. Authorized officials of Registrar & Transfer Agent (RTA) acting on behalf of the AMC.
3. KYC compliant mutual fund distributors affiliated to Association of Mutual Funds (AMFI) and have undergone the process of 'Know Your Distributor (KYD)'.
4. Notary Public, Gazette Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy / Consulate General in the country where the client resides are permitted to attest the documents.

**F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, as mentioned below :**

**Corporate**

- Copy of the balance sheets for the last 2 financial years (to be submitted every year).
- Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year).
- Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations.
- Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly.
- Copies of the Memorandum and Articles of Association and certificate of incorporation.
- Copy of the Board Resolution for investment in securities market.
- Authorised signatories list with specimen signatures.

**Partnership Firm**

- Copy of the balance sheets for the last 2 financial years (to be submitted every year).
- Certificate of registration (for registered partnership firms only).
- Copy of partnership deed.
- Authorised signatories list with specimen signatures.
- Photograph, POI, POA, PAN of Partners.

**Trust**

- Copy of the balance sheets for the last 2 financial years (to be submitted every year).
- Certificate of registration (for registered trust only).
- Copy of Trust deed.
- List of trustees certified by managing trustees/CA.
- Photograph, POI, POA, PAN of Trustees.

**HUF**

- PAN of HUF.
- Deed of declaration of HUF/ List of coparceners.
- Bank pass-book/bank statement in the name of HUF.
- Photograph, POI, POA, PAN of Karta.

**LLP**

- Copy of PAN card of the LLP
- Address Proof of Registered & Correspondence Address of LLP
- Certified True copy of LLP Agreement & Certificate of Incorporation
- Declaration
- Photograph of Partners/Director
- PAN card and Address Proof of Partners/ Director (**Aadhar Card Mandatory all partners**)
- List of Partners
- Latest statement of Bank account or copy of pass book
- Copy of cancelled Cheque
- Audited Balance Sheet and Profit and Loss account and ITR for the last 2 years
- CKYC of All Partners.

**Unincorporated association or a body of individuals**

- Proof of Existence/Constitution document.
- Resolution of the managing body & Power of Attorney granted to transact business on its behalf.
- Authorized signatories list with specimen signatures.

**Banks / Institutional Investors**

- Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years.
- Authorized signatories list with specimen signatures.

**Foreign Institutional Investors (FII)**

- Copy of SEBI registration certificate.
- Authorized signatories list with specimen signatures.

**Army / Government Bodies**

- Self-certification on letterhead.
- Authorized signatories list with specimen signatures.

**Registered Society**

- Copy of Registration Certificate under Societies Registration Act.
- List of Managing Committee members.
- Committee resolution for persons authorised to act as authorised signatories with specimen signatures.
- True copy of Society Rules and Bye Laws certified by the Chairman/Secretary.

# RAINBOW SECURITIES PRIVATE LIMITED

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

**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.
- B) Tick '✓' wherever applicable.
- C) Please fill the form in English and in BLOCK letters.
- D) Please fill the date in DD-MM-YYYY format.
- E) For particular section update, please tick (✓) in the box section number and strike off the sections not required to be updated.

- F) Please read section wise detailed guidelines / instructions at the end.
- G) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.
- H) List of two character ISO 3166 country codes may be obtained from our office.
- I) KYC number of applicant is mandatory for update application.
- J) The 'OTP based E-KYC' check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode.



**For office use only**

Application Type\*  New  Update

(To be filled by financial institution) KYC Number \_\_\_\_\_ (Mandatory for KYC update request)

Account Type\*  Normal  Minor  Aadhaar OTP based E-KYC (in non-face to face mode)

**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)				
Maiden Name				
Father / Spouse Name				
Mother Name				
Date of Birth*	DD	MM	YYYY	
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T- Transgender	
PAN*			<input type="checkbox"/> Form 60 furnished	

**2. PROOF OF IDENTITY AND ADDRESS\*** (Please refer instruction B at the end)

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

- A- Passport Number \_\_\_\_\_
- B- Voter ID Card \_\_\_\_\_
- C- Driving Licence \_\_\_\_\_
- D- NREGA Job Card \_\_\_\_\_
- E- National Population Register Letter \_\_\_\_\_
- F- Proof of Possession of Aadhaar \_\_\_\_\_

II  E-KYC Authentication \_\_\_\_\_

III  Offline verification of Aadhaar \_\_\_\_\_



**Address**

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

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

**3. CURRENT ADDRESS DETAILS** (Please refer instruction B at the end)

Same as above mentioned address (In such cases address details as below need not be provided)

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

- A- Passport Number \_\_\_\_\_
- B- Voter ID Card \_\_\_\_\_
- C- Driving Licence \_\_\_\_\_
- D- NREGA Job Card \_\_\_\_\_
- E- National Population Register Letter \_\_\_\_\_
- F- Proof of Possession of Aadhaar \_\_\_\_\_

II  E-KYC Authentication \_\_\_\_\_

III  Offline verification of Aadhaar \_\_\_\_\_

IV  Deemed Proof of Address - Document Type code \_\_\_\_\_

V  Self Declaration

**Address**

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

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

4. CONTACT DETAILS (All communications will be sent to Mobile number/ Email-ID provided) (Please refer instruction C at the end)

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

5. REMARKS (If any)

6. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately, in case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

[Signature / Thumb Impression]  
 Signature / Thumb Impression of Applicant

Date: -- Place:

7. ATTESTATION / FOR OFFICE USE ONLY

Documents Received  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  Digital KYC Process  
 Equivalent e-document  Video Based KYC

IPV and KYC VERIFICATION CARRIED OUT BY

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

[Employee Signature]

INSTITUTION DETAILS

Name **RAINBOW SECURITIES PRIVATE LIMITED**  
 Code **IN0522**

[Institution Stamp]

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

**A Clarification / Guidelines on filling ‘Personal Details’ section**

- 1 Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 One the following is mandatory : Mother’s name, Spouse’s name, Father’s name.

**B Clarification / Guidelines on filling ‘Current Address details’ section**

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

Document Code	Description
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	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
04	Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.

- 7 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- 8 “Equivalent e-document” means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 9 ‘Digital KYC process’ has to be carried out as stipulated in the PML Rules, 2005.
- 10 REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.

**C Clarification / Guidelines on filling ‘Contact details’ section**

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

**D Clarification / Guidelines on filling ‘Related Person details’ section**

- 1 Provide KYC number of related person, if available.

**E Clarification on Minor**

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

**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.
- B) Tick '✓' wherever applicable.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please fill the form in English and in BLOCK letters.
- E) KYC number of applicant is mandatory for update application.
- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.
- G) List of two character ISO 3166 country codes is available at the end.
- H) Please read section wise detailed guidelines / instructions at the end.
- I) 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. ENTITY DETAILS\*** (Please refer instruction A at the end)

Name\*    \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Entity Constitution Type\*     Others (Specify) \_\_\_\_\_ (Please refer instruction B at the end)

Date of Incorporation / Formation\*    DD - MM - YYYY      Date of Commencement of Business    DD - MM - YYYY

Place of Incorporation / Formation\*    \_\_\_\_\_    Country of Incorporation / Formation\*    \_\_\_\_\_    TIN or Equivalent Issuing Country    \_\_\_\_\_

PAN \*    \_\_\_\_\_     Form 60 furnished

TIN / GST Registration Number    \_\_\_\_\_

**2. PROOF OF IDENTITY (PoI)\*** (Please refer instruction B at the end)

Officially valid document(s) in respect of person authorised to transact

Certificate of Incorporation / Formation    \_\_\_\_\_     Registration Certificate    Regn Certificate No. \_\_\_\_\_

Memorandum and Articles of Association     Partnership Deed     Trust Deed

Resolution of Board / Managing Committee     Power of attorney granted to its manager, officers or employees to transact on its behalf

Activity Proof - 1 (For Sole Proprietorship Only)     Activity Proof - 2 (For Sole Proprietorship Only)

**3. ADDRESS\*** (Please see instruction C at the end)

**3.1 Registered Office Address / Place of Business\***

Proof of Address\*     Certificate of Incorporation / Formation     Registration Certificate     Other Document    \_\_\_\_\_

Line 1\*    \_\_\_\_\_  
 Line 2    \_\_\_\_\_  
 Line 3    \_\_\_\_\_    City / Town / Village\*    \_\_\_\_\_

District\*    \_\_\_\_\_    PIN / Post Code\*    \_\_\_\_\_    State / U.T Code\*    \_\_\_\_\_    ISO 3166 Country Code\*    \_\_\_\_\_

**3.2 Local Address in India (If different from Above)\***

Line 1\*    \_\_\_\_\_  
 Line 2    \_\_\_\_\_  
 Line 3    \_\_\_\_\_    City / Town / Village\*    \_\_\_\_\_

District\*    \_\_\_\_\_    PIN / Post Code\*    \_\_\_\_\_    State / U.T Code\*    \_\_\_\_\_    ISO 3166 Country Code\*    \_\_\_\_\_

**4. CONTACT DETAILS** (All communications will be sent to Mobile number/ Email-ID provided\* may be used) (Please refer instruction D at the end)

Tel. (Of)    \_\_\_\_\_    FAX    \_\_\_\_\_

Mobile    \_\_\_\_\_    Email ID    \_\_\_\_\_

Mobile    \_\_\_\_\_    Email ID    \_\_\_\_\_

**5. NUMBER OF RELATED PERSONS**    \_\_\_\_\_ (Please refer instruction E at the end)



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

**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.
- B) Tick '✓' wherever applicable.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please fill the form in English and in BLOCK letters.
- E) KYC number of applicant is mandatory for update application.
- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.
- G) List of two character ISO 3166 country codes is available at the end.
- H) Please read section wise detailed guidelines / instructions at the end.
- I) 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     Delete  
 (To be filled by financial institution) KYC Number        (Mandatory for KYC update and delete request)

**1. DETAILS OF RELATED PERSON\*** (Please refer instruction E at the end)

- Addition of Related Person       Deletion of Related Person       Update Related Person Details

KYC Number of Related Person (if available\*)     if KYC number is available, only 'Related Person Type' & 'Name' is mandatory

- Related Person Type\***     Director     Promoter     Karta     Trustee     Partner     Court Appointment Official     Proprietor  
 Beneficiary     Authorised Signatory     Beneficial Owner     Power of Attorney Holder     Other (Please specify)

DIN (Director Identification Number)     (Mandatory if Related Person Type is Director)

**1.1 PERSONAL DETAILS** (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<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	
Nationality*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )		
PAN*	<input type="text"/>	<input type="checkbox"/> Form 60 furnished		

**1.2 PROOF OF IDENTITY AND ADDRESS\*** (Please refer instruction E at the end)

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

- A- Passport Number
- B- Voter ID Card
- C- Driving Licence
- D-NREGA Job Card
- E- National Population Register Letter
- F- Proof of Possession of Aadhaar
- II  E-KYC Authentication
- III  Offline verification of Aadhaar

PHOTO\*

**Address**

Line 1\*   
 Line 2   
 Line 3       City / Town / Village\*   
 District\*       Pin / Post Code\*       State / U.T Code\*       ISO 3166 Country Code\*

**1.3. CURRENT ADDRESS DETAILS** (Please refer instruction E and the end)

Same as above mentioned address (In such cases address details as below need not be provided)

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

- A- Passport Number
- B- Voter ID Card
- C- Driving Licence
- D-NREGA Job Card
- E- National Population Register Letter
- F- Proof of Possession of Aadhaar
- II  E-KYC Authentication
- II  Offline verification of Aadhaar

IV  Deemed PoA

V  Self Declaration

**Address**

Line 1*																
Line 2																
Line 3													City / Town / Village*			
District*					Pin / Post Code*					State / U.T Code*			ISO 3166 Country Code*			

**1. 4 CONTACT DETAILS** (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

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

**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.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date :  -  -  Place:

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

- Documents Received  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  
 Digital KYC process  Equivalent e-document

**IPV and KYC VERIFICATION CARRIED OUT BY**

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

**INSTITUTION DETAILS**

Name	<b>RAINBOW SECURITIES PRIVATE LIMITED</b>
Code	<b>IN0522</b>

[Employee Signature]

[Institution Stamp]

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

**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.
- B) Tick '✓' wherever applicable.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please fill the form in English and in BLOCK letters.
- E) KYC number of applicant is mandatory for update application.
- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 may be obtained from our office.
- G) List of two character ISO 3166 country codes is available at the end.
- H) Please read section wise detailed guidelines / instructions at the end.
- I) 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     Delete  
 (To be filled by financial institution) KYC Number        (Mandatory for KYC update and delete request)

**1. DETAILS OF RELATED PERSON\*** (Please refer instruction E at the end)

- Addition of Related Person       Deletion of Related Person       Update Related Person Details

KYC Number of Related Person (if available\*)     *If KYC number is available, only 'Related Person Type' & 'Name' is mandatory*

- Related Person Type\***     Director     Promoter     Karta     Trustee     Partner     Court Appointment Official     Proprietor  
 Beneficiary     Authorised Signatory     Beneficial Owner     Power of Attorney Holder     Other (Please specify)

DIN (Director Identification Number)     (Mandatory if Related Person Type is Director)

**1.1 PERSONAL DETAILS** (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<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	
Nationality*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )		
PAN*	<input type="text"/>	<input type="checkbox"/> Form 60 furnished		

**1.2 PROOF OF IDENTITY AND ADDRESS\*** (Please refer instruction E at the end)

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

- A- Passport Number
- B- Voter ID Card
- C- Driving Licence
- D-NREGA Job Card
- E- National Population Register Letter
- F- Proof of Possession of Aadhaar
- II  E-KYC Authentication
- III  Offline verification of Aadhaar

PHOTO\*

**Address**

Line 1\*   
 Line 2   
 Line 3       City / Town / Village\*   
 District\*       Pin / Post Code\*       State / U.T Code\*       ISO 3166 Country Code\*

**1.3. CURRENT ADDRESS DETAILS** (Please refer instruction E and the end)

Same as above mentioned address (In such cases address details as below need not be provided)

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

- A- Passport Number
- B- Voter ID Card
- C- Driving Licence
- D-NREGA Job Card
- E- National Population Register Letter
- F- Proof of Possession of Aadhaar
- II  E-KYC Authentication
- II  Offline verification of Aadhaar

- IV  Deemed PoA
- V  Self Declaration

**Address**

Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Pin / Post Code\*  State / U.T Code\*  ISO 3166 Country Code\*

**1. 4 CONTACT DETAILS** (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

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

**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.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : -- Place:

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

- Documents Received  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  
 Digital KYC process  Equivalent e-document

**IPV and KYC VERIFICATION CARRIED OUT BY**

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

Employee Signature

**INSTITUTION DETAILS**

Name **RAINBOW SECURITIES PRIVATE LIMITED**  
Code **IN0522**

Institution Stamp

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

### **A Clarification / Guidelines for filing Entity Details section**

#### 1 Entity Constitution Type

- |                             |                                      |   |
|-----------------------------|--------------------------------------|---|
| A - Sole Proprietorship     | G - Association of Persons (AOP) /   | L - Public Sector Banks                           |
| B - Partnership Firm        | Body of Individuals (BOI)            | M - Central/State Government Department or Agency |
| C - HUF                     | H - Trust                            | N - Section 8 Companies (Companies Act, 2013)     |
| D - Private Limited Company | I - Liquidator                       | O - Artificial Jurisdictional Person              |
| E - Public Limited Company  | J - Limited Liability Partnership    | P - International Organisation or Agency /        |
| F - Society                 | K - Artificial Liability Partnership | Foreign Embassy or Consular Office etc.           |
|                             |                                      | Q - Not Categorized                               |
|                             |                                      | R - Others  |
|                             |                                      | S - Foreign Portfolio Investors                   |

- 2 In case of companies and partnerships, PAN of the entity is mandatory. In case of other entities, FORM 60 may be obtained if PAN is not available.

### **B Clarification / Guidelines for filling 'Proof of Identity [PoI]' section**

- 1 Activity Proof - 1 and Activity Proof - 2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
- 2 Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
- 3 Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
- 4 'Equivalent e-document means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 5 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
- 6 KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.

### **C Clarification / Guidelines for filling 'Proof of Address [PoA]' section**

- 1 State / U.T. Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 2 Certified copy of document or equivalent e-document to be submitted.

### **D Clarification / Guidelines for filling 'Contact Details' section**

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

### **E Clarification / Guidelines for filling 'Related Person Details' section**

- 1 Personal Details
  - The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Proof of Address [PoA]
  - 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.
  - State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
  - In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR.
  - REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.
- 3 If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.
- 4 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.

### **F Provision for capturing signature of multiple authorised persons is to be made by the RE.**

<p><b>Know Your Client (KYC)</b></p> <p><b>Application Form (For Individuals Only)</b></p> <p><small>Please fill the form in ENGLISH and in BLOCK letters</small></p> <p><small>Fields marked * are mandatory</small></p> <p><small>Fields marked † are pertaining to CKYC and mandatory only if processing CKYC also</small></p>	<p>Application Number: <input style="width: 150px;" type="text"/></p> <p>KYC No. : <input style="width: 150px;" type="text"/> (Mandatory for KYC update request)</p> <p>Application Type*: <input type="checkbox"/> New KYC <input type="checkbox"/> Modification KYC</p>
<p><b>KYC Mode*:</b> Please Tick (✓)</p> <p> <input type="checkbox"/> Normal    <input type="checkbox"/> EKYC OTP    <input type="checkbox"/> EKYC Biometric    <input type="checkbox"/> Online KYC    <input type="checkbox"/> Offline EKYC    <input type="checkbox"/> Digilocker </p>	
<p><b>1. Identity Details (please refer guidelines overleaf)</b></p>	
<p>PAN* _____ Please enclose a duly attested copy of your PAN Card <input type="checkbox"/> Form 60 furnished</p> <p>Name* (same as ID proof) _____</p> <p>Maiden Name* (if any) _____</p> <p>Fathers/Spouse's Name* _____</p> <p>Date of Birth* _____</p> <p>Gender* <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender</p> <p>Marital Status* <input type="checkbox"/> Single <input type="checkbox"/> Married</p> <p>Nationality* <input type="checkbox"/> Indian <input type="checkbox"/> Other _____</p> <p>Residential Status* <input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian</p> <p><small>Please Tick (✓)</small> <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin*</p> <div style="border: 1px solid black; width: 150px; height: 100px; margin-left: auto; margin-right: auto; text-align: center; padding: 5px;"> <p>Recent passport size Applicant Photo</p> </div> <p style="text-align: right; font-size: small;">Cross Signature across photograph</p> <p style="font-size: x-small;">(Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC. Select NRI or Foreign National based on Nationality of the individual)</p> <p><b>Proof of Identity (POI) submitted for PAN exempted cases (Please tick)</b></p> <p><input type="checkbox"/> A — Aadhaar Card      XXXX XXXX _____ (Expiry Date) _____</p> <p><input type="checkbox"/> B — Passport Number      _____ (Expiry Date) _____</p> <p><input type="checkbox"/> C — Voter ID Card      _____ (Expiry Date) _____</p> <p><input type="checkbox"/> D — Driving License      _____</p> <p><input type="checkbox"/> E — NREGA Job Card      _____</p> <p><input type="checkbox"/> F — NPR      _____</p> <p><input type="checkbox"/> Z — Others      _____ (any document notified by Central Government)</p> <p>Identification Number _____</p>	
<p><b>2. Address Details* (please refer guidelines overleaf)</b></p>	
<p><b>A. Correspondence/ Local Address*</b></p> <p>Line 1* _____</p> <p>Line 2 _____</p> <p>Line 3 _____</p> <p>City/Town/Village* _____ District* _____ Pin Code* _____</p> <p>State* _____ Country* _____</p> <p>Address Type* <input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified</p>	
	<p><b>Applicant Signature</b></p>

**B. Permanent residence address of applicant, if different from above A / Overseas Address\* (Mandatory for NRI Applicant)**

Line 1\* \_\_\_\_\_  
 Line 2 \_\_\_\_\_  
 Line3 \_\_\_\_\_  
 City/  
 Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_  
 State\* \_\_\_\_\_ Country\* \_\_\_\_\_

Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified

**Proof of Address\*** (attested copy of any 1 PUA for correspondence and permanent address each to be submitted)

A — Aadhaar Card      XXXX XXXX \_\_\_\_\_  
 B — Passport Number      \_\_\_\_\_ (Expiry Date) \_\_\_\_\_  
 C — Voter ID Card      \_\_\_\_\_  
 D — Driving License      \_\_\_\_\_ (Expiry Date) \_\_\_\_\_  
 E — NREGA Job Card      \_\_\_\_\_  
 F — NPR Letter      \_\_\_\_\_  
 Z—Others      \_\_\_\_\_ (any document notified by Central Government)  
 Identification Number \_\_\_\_\_

**3. Contact Details (in CAPITAL)**

Email ID\* \_\_\_\_\_  
 Mobile No. \* \_\_\_\_\_  
 Tel (Off) \_\_\_\_\_ Tel (Res) \_\_\_\_\_

**4. Applicant Declaration**

<p>I/We hereby declare that the KYC details furnished by me 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.</p> <p>I/We hereby consent to receiving information from KRA and / or CKYC Registry through SMS/Email on the above registered number/Email address.</p> <p>I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/DigLocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.</p> <p>DATE: _____ (DDMM-YYYY)          PLACE: _____</p>	<p><b>Applicant Signature</b></p>
---	-----------------------------------

**5. For Office Use Only**

<p><b>Person Verification (IPV) &amp; KYC Verification carried out by*</b></p> <p>IPV Date _____          Emp. Name _____          Emp. Code _____          Emp. Designation _____</p>	<p><b>Intermediary Details*</b></p> <p><input type="checkbox"/> Self certified document copies received (OVD)  <input type="checkbox"/> True Copies of documents received (Attested)          AMC / Intermediary Name :  <div style="border: 1px solid black; padding: 2px; text-align: center;"><b>RAINBOW SECURITIES PRIVATE LIMITED</b></div></p>
<p>Employee Signature and Stamp</p>	<p>Institution Name and Stamp</p>

**Know Your Client (KYC)****Application Form (For Non- Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters  
 Fields marked \* are mandatory  
 Fields marked † are pertaining to CKYC and mandatory only if processing CKYC also



Application Number: \_\_\_\_\_

KYC No. : \_\_\_\_\_ (Mandatory for KYC update request)

Application Type\*:  New KYC  Modification KYC**1. Entity Details (please refer guidelines)**

PAN\* \_\_\_\_\_

Please enclose a duly attested copy of your PAN Card

 Form 60 furnished

TIN / GST Regn. No. \_\_\_\_\_

Name\* (same as ID proof) \_\_\_\_\_

Entity Constitution Type \_\_\_\_\_ Others (Specify) \_\_\_\_\_ (Please refer Instruction G at the end)

Date of Incorporation\* \_\_\_\_\_ Place of Incorporation\* \_\_\_\_\_

Date of Commencement\* \_\_\_\_\_ Registration Number\* \_\_\_\_\_

Entity Type\*

Please Tick (✓)

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> Private Ltd. Co.            | <input type="checkbox"/> Public Ltd. Co. | <input type="checkbox"/> Body Corporate  | <input type="checkbox"/> Partnership           |
| <input type="checkbox"/> Trust/Charity/NGO           | <input type="checkbox"/> HUF             | <input type="checkbox"/> FPI Category I  | <input type="checkbox"/> FPI Category II       |
| <input type="checkbox"/> AOP                         | <input type="checkbox"/> Bank            | <input type="checkbox"/> Government Body | <input type="checkbox"/> Defence Establishment |
| <input type="checkbox"/> Body of Individuals         |  | <input type="checkbox"/> Society         | <input type="checkbox"/> LLP                   |
| <input type="checkbox"/> Non-Government Organization |  |  |  |
| <input type="checkbox"/> Others _____                |  |  |  |

**2. Proof of Identity† (please refer the guidelines)**

- Officially Valid Document(s) in respect of person authorized to transact
- Certificate of Incorporation/Formation \_\_\_\_\_  Registration Certificate \_\_\_\_\_
- Memorandum of Articles and Association  Partnership Deed  Trust Deed
- Board Resolution  Power of attorney granted to its manager, office, employees to transact on its behalf
- Activity Proof –1\* (For Sole Proprietorship Only)  Activity Proof –2\* (For Sole Proprietorship Only)

**3. Address Details\* (please refer the guidelines)****A. Registered Address\***

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

City/Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_

State\* \_\_\_\_\_ Country\* \_\_\_\_\_

**B. Correspondence/Local Address in India (if different from above)\***

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

City/Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_

State\* \_\_\_\_\_ Country\* \_\_\_\_\_

Applicant Signature

**Proof of Address\*** (attested copy of any one POA to be submitted—\*Not more than 3 months old)

- Certificate of Incorporation/Formation       Registration Certificate       Other document \_\_\_\_\_  
 Latest Telephone Bill\* (Landline only)       Latest Electricity Bill\*       Latest Bank Account Statement\*  
 Registered Lease/ Sale Agreement of Office Premises      Validity/Expiry Date of POA (Expiry Date) \_\_\_\_\_  
 Any other proof of address document (as listed overleaf) \_\_\_\_\_

**4. Contact Details**

Email ID \_\_\_\_\_ Mobile No. \_\_\_\_\_  
 Email ID \_\_\_\_\_ Mobile No. \_\_\_\_\_  
 Tel (off) \_\_\_\_\_ Fax \_\_\_\_\_

**5. Annexures Submitted**Number of Related Persons - **6. Remarks / Additional Information****7. Applicant Declaration**

I hereby declare that the details furnished above are true and correct to the best of my/our 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/We are aware that I/We may be held liable for it.

I/We hereby consent to receiving information from KRA and/or CKYC Registry through SMS/Email on the above registered number/Email address

DATE: \_\_\_\_\_ (DDMM-YYYY)

PLACE: \_\_\_\_\_

Applicant Signature

**8. For Office Use Only**

In-Person Verification (IPV) &amp; KYC Verification carried out by\*

Intermediary Details\*

KYC Date \_\_\_\_\_

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

 Self certified document copies received (Originals Verified) True Copies of documents received (Attested)

AMC / Intermediary Name OR Code:

**RAINBOW SECURITIES PRIVATE LIMITED**

Employee Signature and Stamp

Employee Signature and Stamp

**Know Your Client (KYC)****Annexure (For Non- Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked ~ are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: KYC No. :  (Mandatory for KYC update request)Application Type\*:  New KYC  Modification KYC**1. Identity Details of Related Person (please refer guidelines overleaf)**PAN\*  Please enclose a duly attested copy of your PAN Card  Form 60 furnishedName\* (same as ID proof) Maiden Name\* (if any) Fathers/Spouse's Name\* Date of Birth\* Gender\*  Male  Female  TransgenderNationality\*  Indian  Other **Related Person Type\*** Director  Promoter  Karta  Trustee  Partner  Court Appointed Official Proprietor Beneficiary  Authorized Signatory  Beneficial Owner  Power of Attorney Holder Others  (please specify) DIN:  (mandatory if the related person is Director)

Applicant Photo

**Proof of Identity (POI) submitted for PAN exempted cases (Please tick)** A — Aadhaar Card  XXXX XXXX  B — Passport Number  (Expiry Date)  C — Voter ID Card  D — Driving License  (Expiry Date)  E — NREGA Job Card  F — NPR  Z — Others  (any document notified by Central Government)Identification Number **2. Address Details\* (please refer guidelines overleaf)****A. Correspondence/ Local Address\***Line 1\* Line 2 Line 3 City/Town/Village\*  District\*  Pin Code\* State\*  Country\* Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified

Applicant Signature

**B. Permanent residence address of applicant, if different from above A / Overseas Address\* (Mandatory for NRI Applicant)**

Line 1\* \_\_\_\_\_  
 Line 2 \_\_\_\_\_  
 Line3 \_\_\_\_\_

City/Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_  
 State\* \_\_\_\_\_ Country\* \_\_\_\_\_

Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified

**Proof of Address\*** (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

A — Aadhaar Card      XXXX XXXX \_\_\_\_\_  
 B — Passport Number      \_\_\_\_\_ (Expiry Date) \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 C — Voter ID Card      \_\_\_\_\_  
 D — Driving License      \_\_\_\_\_ (Expiry Date) \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 E — NREGA Job Card      \_\_\_\_\_  
 F — NPR Letter      \_\_\_\_\_  
 Z—Others      \_\_\_\_\_ (any document notified by Central Government)

Identification Number \_\_\_\_\_

**3. Contact Details**

Email ID \_\_\_\_\_  
 Mobile No. \_\_\_\_\_  
 Tel (off) \_\_\_\_\_ Tel (Res) \_\_\_\_\_

**4. Applicant Declaration**

<p>I hereby declare that the details furnished above are true and correct to the best of my/our 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/We are aware that I/We may be held liable for it.</p> <p>I/We hereby consent to receiving information from KRA and/or CKYC Registry through SMS/Email on the above registered number/Email address</p> <p>DATE: ____ - ____ - ____ (DDMM-YYYY)          PLACE: _____</p>	<p>Applicant Signature</p>
---	----------------------------

**5. For Office Use Only**

In-Person Verification (IPV) & KYC Verification carried out by*	Intermediary Details*
KYC Date      ____ - ____ - ____ Emp. Name      _____ Emp. Code      _____ Emp. Designation      _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) <div style="border: 1px solid black; padding: 5px; text-align: center; margin: 10px 0;"><b>RAINBOW SECURITIES PRIVATE LIMITED</b></div>
Employee Signature and Stamp	Institution Name and Stamp

**Know Your Client (KYC)****Annexure (For Non- Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked ~ are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: \_\_\_\_\_

KYC No. : \_\_\_\_\_ (Mandatory for KYC update request)

Application Type\*:  New KYC  Modification KYC**1. Identity Details of Related Person (please refer guidelines overleaf)**PAN\* \_\_\_\_\_ Please enclose a duly attested copy of your PAN Card  Form 60 furnished

Name\* (same as ID proof) \_\_\_\_\_

Maiden Name\* (if any) \_\_\_\_\_

Fathers/Spouse's Name\* \_\_\_\_\_

Date of Birth\* \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender\*  Male  Female  TransgenderNationality\*  Indian  Other \_\_\_\_\_**Related Person Type\*** Director  Promoter  Karta  Trustee  Partner  Court Appointed Official Proprietor Beneficiary  Authorized Signatory  Beneficial Owner  Power of Attorney Holder Others \_\_\_\_\_ (please specify) DIN: \_\_\_\_\_ (mandatory if the related person is Director)

Applicant Photo

**Proof of Identity (POI) submitted for PAN exempted cases (Please tick)** A — Aadhaar Card XXXX XXXX \_\_\_\_/\_\_\_\_/\_\_\_\_ B — Passport Number \_\_\_\_\_ (Expiry Date) \_\_\_\_/\_\_\_\_/\_\_\_\_ C — Voter ID Card \_\_\_\_\_ D — Driving License \_\_\_\_\_ (Expiry Date) \_\_\_\_/\_\_\_\_/\_\_\_\_ E — NREGA Job Card \_\_\_\_\_ F — NPR \_\_\_\_\_ Z — Others \_\_\_\_\_ (any document notified by Central Government)

Identification Number \_\_\_\_\_

**2. Address Details\* (please refer guidelines overleaf)****A. Correspondence/ Local Address\***

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

City/Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_

State\* \_\_\_\_\_ Country\* \_\_\_\_\_

Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified

Applicant Signature

**B. Permanent residence address of applicant, if different from above A / Overseas Address\* (Mandatory for NRI Applicant)**

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

City/Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_

State\* \_\_\_\_\_ Country\* \_\_\_\_\_

Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified

**Proof of Address\*** (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

A — Aadhaar Card      XXXX XXXX \_\_\_\_\_

B — Passport Number      \_\_\_\_\_ (Expiry Date) \_\_\_\_\_

C — Voter ID Card      \_\_\_\_\_

D — Driving License      \_\_\_\_\_ (Expiry Date) \_\_\_\_\_

E — NREGA Job Card      \_\_\_\_\_

F — NPR Letter      \_\_\_\_\_

Z—Others      \_\_\_\_\_ (any document notified by Central Government)

Identification Number \_\_\_\_\_

**3. Contact Details**

Email ID \_\_\_\_\_

Mobile No. \_\_\_\_\_

Tel (off) \_\_\_\_\_ Tel (Res) \_\_\_\_\_

**4. Applicant Declaration**

<p>I hereby declare that the details furnished above are true and correct to the best of my/our 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/We are aware that I/We may be held liable for it.</p> <p>I/We hereby consent to receiving information from KRA and/or CKYC Registry through SMS/Email on the above registered number/Email address</p> <p>DATE: _____ (DDMM-YYYY)</p> <p>PLACE: _____</p>	<p>Applicant Signature</p>
--	----------------------------

**5. For Office Use Only**

In-Person Verification (IPV) & KYC Verification carried out by*	Intermediary Details*
<p>KYC Date _____</p> <p>Emp. Name _____</p> <p>Emp. Code _____</p> <p>Emp. Designation _____</p>	<p><input type="checkbox"/> Self certified document copies received (OVD)</p> <p><input type="checkbox"/> True Copies of documents received (Attested)</p> <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;"> <p>RAINBOW SECURITIES PRIVATE LIMITED</p> </div>
<p>Employee Signature and Stamp</p>	<p>Institution Name and Stamp</p>

**ADDITIONAL KYC FORM FOR OPENING A TRADING & DEMAT ACCOUNT  
FOR  INDIVIDUAL /  NON-INDIVIDUAL**



**Rainbow Securities Private Limited**

Regd. Office : "Centre Point", 3rd Floor, Room No. 305

21, Hemant Basu Sarani, Kolkata – 700 001

Telefax : (033) 2213-5183 / 5184 / 4943, E.mail : dp@rainbowindia.co.in

Website : www.rainbowindia.co.in, CIN : U67120WB1994PTC065293

**DP ID : 12077000 ❖ SEBI Regn. No. IN-DP-689-2013**

Trading & Demat A/c  Only Trading A/c  Only Demat A/c

(For Office use only)

Application No.		Date	D	D	M	M	Y	Y	Y	Y							
DP Internal Reference No.		UCC															
DP ID	1	2	0	7	7	0	0	0	Client ID								

(To be filled by the applicant in **BLOCK LETTERS** in English)

I / We request you to open a Demat Account in my / our name as per the following details: -

<b>Holders Details</b>															
<b>Sole/ First Holder's Name</b>						<b>PAN</b>									
<b>Search Name</b>															
<b>Date of Birth</b>						<b>UID</b>									
<b>Second Holder's Name</b>						<b>PAN</b>									
<b>Date of Birth</b>						<b>UID</b>									
<b>Third Holder's Name</b>						<b>PAN</b>									
<b>Date of Birth</b>						<b>UID</b>									
<b>Name*</b>															
* 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.															
<b>Type of Account (Please tick whichever is applicable)</b>															
<b>Status</b>			<b>Sub-Status</b>												
<input type="checkbox"/> Individual			<input type="checkbox"/> Individual Resident			<input type="checkbox"/> Individual-Director									
			<input type="checkbox"/> Individual Director's Relative			<input type="checkbox"/> Individual HUF / AOP									
			<input type="checkbox"/> Individual Promoter			<input type="checkbox"/> Minor									
			<input type="checkbox"/> Individual Margin Trading A/C (MANTRA)			<input type="checkbox"/> Others (Specify)_____									
<input type="checkbox"/> NRI			<input type="checkbox"/> NRI Repatriable			<input type="checkbox"/> NRI Non - Repatriable									
			<input type="checkbox"/> NRI Repatriable Promoter			<input type="checkbox"/> NRI Non - Repatriable Promoter									
			<input type="checkbox"/> NRI - Depository Receipts			<input type="checkbox"/> Others (Specify)_____									
<input type="checkbox"/> Foreign National			<input type="checkbox"/> Foreign National			<input type="checkbox"/> Foreign National - Depository Receipts			<input type="checkbox"/> Others (Specify)_____						
<b>Status</b>						<b>Sub-Status</b>									
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI						To be filled by the DP									
<input type="checkbox"/> LLP <input type="checkbox"/> HUF <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify)_____															
SEBI Regn. No. (If Applicable)				SEBI Regn. Date				D	D	M	M	Y	Y	Y	Y
RBI Regn. No. (If Applicable)				RBI Approval Date				D	D	M	M	Y	Y	Y	Y
Nationality				<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify)_____											

**MANDATORY**

<b>Details of Guardian (in case the account holder is minor)</b>			
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 Annual Report	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)		
Mode of receiving the standard document - Rights and Obligations of Beneficial Owner and Depository Participant ( <i>Tick any one</i> )	<input type="checkbox"/> Physical Form <input type="checkbox"/> Electronic Form		
<b>Clearing Member Details (To be filled by CMs only)</b>			
Name of Stock Exchange			
Name of CC / CH			
Clearing Member Id		Trading member ID	
I / We wish to receive dividend / interest directly in to my bank account 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 ]	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Bank Details [Dividend Bank Details]</b>			
	Primary Bank Details		Secondary Bank Details
Bank Code (9 digit MICR Code)			
IFS Code (11 character)			
Account Number			
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify)_____		<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (specify)_____
Bank Name			
Branch Name			
Bank Branch Address			
City & PIN Code			
State & Country			
(i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or) (ii) Photocopy of the Bank Statement having name and address of the BO (iii) Photocopy of the Passbook having name and address of the BO, (or) (iv) Letter from the Bank. ➤ In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.			

OTHER DETAILS - Gross Annual Income Details										
Income Range per annum		<input type="checkbox"/> Upto ₹ 1 Lac <input type="checkbox"/> ₹ 1 Lac to ₹ 5 Lac <input type="checkbox"/> ₹ 5 Lac to ₹ 10 Lac <input type="checkbox"/> ₹ 10 Lac to ₹ 25 Lac <input type="checkbox"/> ₹ 25 Lac to ₹ 1 Crore <input type="checkbox"/> More than ₹ 1 Crore								
Net-worth as on (Date)		D	D	M	M	Y	Y	Y	Y	₹
(Net worth should not be older than 1 year)										
Occupation		<input type="checkbox"/> Private / Public Sector <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others _____								
Educational Qualifications										
Please tick, if applicable (For Individuals only)		<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to Politically Exposed Person (RPEP)								
Please tick If any of the authorized signatories / Promoters / Partners / Karta / Trustees /										
Whole Time Directors is either Politically Exposed Person (PEP) or Related to Politically									<input type="checkbox"/>	
Exposed Person (RPEP). Please provide details as per Annexure 2.2 A.										
Any other information										
SMS Alert Facility		MOBILE NO. +91_____								
Refer to Terms & Conditions given as Annexure - 2.4		[(Mandatory , if you are giving Power of Attorney ( POA)] (if POA is not granted & you do not wish to avail of this facility, cancel this option).								
Transactions Using Secured Texting Facility (TRUST). Refer to Terms and Conditions Annexure – 2.6										
I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility.									<input type="checkbox"/> Yes <input type="checkbox"/> No	
I have read and understood the Terms and Conditions prescribed by CDSL for the same.										
I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST.										
Stock Exchange Name/ID										
Clearing Member Name										
Clearing Member ID (Optional)										
<i>Easi</i>		To register for <i>easi</i> , please visit our website <a href="http://www.cdslindia.com">www.cdslindia.com</a> . <i>Easi</i> allows a BO to view his ISIN balances, transactions and value of the portfolio online.								
DEPOSITORY ACCOUNT(S) DETAILS										
	First Demat A/c Details				Second Demat A/c Details					
Depository Participant Name										
Depository Name		<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL				<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL				
Beneficiary Name										
DP ID										
Beneficiary ID (BO ID)										

**TRADING PREFERENCES** - Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you.

Exchange	Segment	Signature
NSE & BSE	- All Segments	<input type="checkbox"/>
	- Cash	<input type="checkbox"/>
	- F&O	<input type="checkbox"/>
	- Currency	<input type="checkbox"/>

If you do not wish to trade in any of segments / Mutual Fund, please mention here \_\_\_\_\_

**PAST ACTIONS**

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

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

Whether dealing with any other Stock Broker / Authorised Person (in case dealing with multiple Stock Broker / Authorised Person, provide details of all)

Name of Stock Broker			
Name of AP, if any		AP Regn. No.	
Client Code		Exchange	

Details of disputes/dues pending from/to such Stock Broker / Authorised Person


<b>ADDITIONAL DETAILS</b>	
Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify)	
_____, Specify your Email id, if applicable :	
Whether you wish to receive the standard documents - Rights and Obligations, Risk Disclosure Document (RDD) and Guidance note - physically or electronically, (please specify) : _____	
<b>Please note that these documents are also available in certain vernacular languages on demand.</b>	
Whether you wish to avail of the facility of internet trading / wireless technology (please specify)	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
Number of years of Investment / Trading Experience	
In case of non-individuals, name, designation, PAN, UID, signature, residential address and photographs of persons authorized to deal in securities on behalf of company/firm/others	As per Annexure
Any other information	
<b>INTRODUCER DETAILS (optional)</b>	
Name of the Introducer	
	(Surname) (Name) (Middle Name)
Status of the Introducer	<input type="checkbox"/> Sub-broker <input type="checkbox"/> Remisier <input type="checkbox"/> Authorized Person <input type="checkbox"/> Existing Client
	<input type="checkbox"/> Others, please specify
Address and Phone No. of the Introducer	
Signature of the Introducer	



<b>10 Address of Guardian(s)</b>			
City / Place			
State & Country			
PIN Code			
<b>11 Mobile / Telephone No. of Guardian #</b>			
<b>12 Email ID of Guardian #</b>			
<b>13 Relationship of Guardian with Nominee</b>			
<b>14 Guardian Identification Details #</b> [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank A/c No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			

	<b>Name(s) of holder(s)</b>	<b>Signature(s) of holder*</b>
Sole / First Holder (Mr./Ms.)		✓
Second Holder (Mr./Ms.)		✓
Third Holder (Mr./Ms.)		✓

<b>Witness</b>
Signature_____
Name_____
Address_____
_____

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

# Optional Fields (Information required at Serial nos. 5, 6, 7, 11, 12 & 14 is not mandatory).

**Notes :** This nomination shall supersede any prior nomination made by the account holder(s), if any.

The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s).

## DECLARATION FORM FOR OPTING OUT OF NOMINATION

<b>RAINBOW SECURITIES PRIVATE LIMITED</b> Regd. Off. : "Centre Point", 3rd Floor, Room No. 305, 21, Hemant Basu Sarani, Kolkata - 700 001										Date		D	D	M	M	Y	Y	Y	Y	
										UCC										
Demat Account No.	1	2	0	7	7	0	0	0												
Sole/First Holder Name																				
Second Holder Name																				
Third Holder Name																				
I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.																				
<b>Name and Signature of Holder(s)*</b>																				
1 ✓							2 ✓							3 ✓						
(Sole / First Holder)						(Second Holder)						(Third Holder)								
<b>Witness</b>																				
Signature _____																				
Name _____																				
Address _____																				
_____																				

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

## DECLARATION

1. I / We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.
2. 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.
3. 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.
4. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. 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 stock broker's designated website, if any.
5. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations. I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

	Name	Signatures
<b>Sole / First Holder or Guardian (in case of Minor)</b>		✓
<b>Second Holder</b>		✓
<b>Third Holder</b>		✓

**(Signatures should be preferably in black ink).**

### NOTES :

1. All communication shall be sent at the address of the Sole/First holder only.
2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
3. For receiving Statement of Account in electronic form:
  - I. Client must ensure the confidentiality of the password of the email account.
  - II. Client must promptly inform the Participant if the email address has changed.
  - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
4. Strike off whichever is not applicable.

**MANDATORY**

## ANNEXURE

### DETAIL OF PROMOTERS / PARTNERS / KARTA / TRUSTEES AND WHOLE TIME DIRECTORS AND PERSONS AUTHORIZED TO DEAL IN SECURITIES ON BEHALF OF COMPANY / FIRM / OTHERS

Particulars	1st	2nd	3rd
Designation			
Name			
PAN			
DIN / UID			
Residential Address			
Photograph	Please affix your recent passport size photograph and sign across it	Please affix your recent passport size photograph and sign across it	Please affix your recent passport size photograph and sign across it

Use additional sheets, if necessary.

**Annexure 2.2A - FOR NON-INDIVIDUALS  
Details of Politically Exposed Persons (PEP) / Related to Politically Exposed Persons (RPEP)**

Name of Holder \_\_\_\_\_ PAN of the Holder \_\_\_\_\_

Sr. No.	Name of the Authorised Signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors	Relation with the holder (i.e. promoters, whole time directors etc.	Please tick the relevant option
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP

Name & Signature of the Authorised Signatory(ies) \_\_\_\_\_ 

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

**PEP** : Politically Exposed Persons **RPEP** : Related to Politically Exposed Persons

## POLICIES AND PROCEDURES

### **A) Refusal of Orders for penny stocks :**

Penny stocks are thinly traded shares of small companies which are traded infrequently. It may be difficult to buy/sell Penny stocks. Penny stocks include the equity securities with no active trading market.

For Dealing in penny stock following procedures is being followed :

1. Authorization of the Senior Officer is to be taken if any client wants to invest in penny stocks.
2. The valid reason of the client to trade in penny stock is taken.
3. The financial position, background of the client is reviewed.

The order of a client shall be refused by the Member when it appears that

1. If the dealing amounts to manipulation of the price of the security.
2. If the dealing creates false or misleading appearance of trading in the securities market.
3. If the dealing in the security is not intended to effect transfer of beneficial ownership but intended to operate only as a device to inflate, depress or cause fluctuations in the price of the penny stock for wrongful gain or avoidance of loss.

### **B) Setting up client's exposure limits :**

At the time of entering into agreement with the clients and branches we require them to agree to abide by the exposure limits set by us from time to time subject to the availability of funds in their accounts & margins given by them in form of cash, FDRs, BGs, shares etc also. Client exposure is set on the basis of financial soundness (such as high, medium or low net worth client) and turnover position of the client.

### **C) Applicable Brokerage Rate :**

The brokerage rate that would be applicable on the client shall be decided mutually between **Rainbow Securities Pvt. Ltd.** and client. Such brokerage rate might increase/decrease during the course of time. Any such change would be intimated to the clients before implementing the same. However, the brokerage rate in any case would not exceed maximum brokerage rate of the transaction value as prescribed under SEBI/Exchange regulations.

### **D) Imposition of Penalty / Delayed Payment :**

As per the laws of Exchange /SEBI, the client must make the payment of securities/funds he/ she sold/purchased before the Pay-In date. If the client fails to make the Payment before the said period, **Rainbow Securities Pvt. Ltd.** may impose penalty or delayed payment charges not exceeding 2% per month for not making payment of their pay-in obligation on time as per the exchange requirement or net ledger debit balance as applicable.

No interest / delayed payment charges will be payable by the Trading Member on the credit balance lying in the margin account or ledger balance of the Client.

### **E) The right to sell client's securities or close client's positions, without giving notice to the client, on account of non-payment of client's dues :**

- a) Even after regular reminders, if client fails to make the payment of the margin money or pay-in amount, then we would square off his/her/their position and before taking such action in this direction, we telephonically/vide e.mail explain all the details to the client about our proposed action in this regard.
- b) Principally, company follows the practice of giving reasonable opportunity of being heard and gives a verbal show cause notice to such clients. Thereafter, if company finds after giving reasonable time that the client has failed to pay the money due from him, we square off their position. However, in exceptional cases, like in case of those

clients with whom company has a long term bonding and there is reassurance from the concerned client that they will make the payment in due course of time, in such circumstances, company may consider allowing them to continue with their positions. Further, this shall be limited to the extent of settlement / margin obligations.

**F) Shortages in obligations arising out of internal netting of trades :**

Subject to the rules, regulation and bye-laws of the relevant stock exchange/ SEBI, if the seller of the security, in case of internal netting of trades has failed to deliver the security in the scheduled settlement number in the designated settlement account of the member, the seller has to deliver the security in the designated Auction settlement for scheduled settlement.

However, if the client fails to deliver the shares, then the seller will be debited with the highest prevailing price in the NSE from the first day of the relevant trading period till the auction day or 2% above the closing price on auction day for the particular security, whichever is higher, along with charges and the buyer will get the credit for the same.

**G) Conditions under which a client neither may nor be allowed to take further position or the broker may close the existing position of a client :**

A client is not allowed to take further position or the existing position of a client is closed on the following conditions:

1. If the ledger of a client shows continuous debit balances.
2. If the client defaults in meeting funds / securities obligation, it will lead to compulsory close out of the position.
3. If the client fails to submit any information / document as are mandatory or relevant, the client may not be allowed to take further position.
4. If the exchange is not allowing any further position in that scrip.
5. If broker's limit of taking exposure in that particular scrip comes to an end.

**H) Temporarily suspending or closing a client's account at the client's request :**

- a) The account of the client shall be suspended/ closed on receipt of written request from the client specifying the reasons to close the account. If the reasons given are justified then the account of that client is suspended after effecting the settlement of the account.
- b) The Trading Member can withhold the pay out of Client and suspend his trading amount due to his surveillance action or judicial or/and regulatory order/action requiring client suspension.

**I) Deregistration of a client :**

A client shall be deregistered upon fulfillment of the following conditions after effecting full and final settlement of account with respect to funds and securities :

- a) On receipt of the specific request from the client to deregister himself and to close his accounts.
- b) If the action of the Client are prima facie illegal / improper or such as to manipulate the price of any securities or disturb the normal / proper functioning of the market, either alone or in conjunction with others.
- c) If there is any commencement of a legal process against the Client under any law in force;
- d) On the death/lunacy or other disability of the Client;
- e) If a receiver, administrator or liquidator has been appointed or allowed to be appointed of all or any part of the undertaking of the Client;
- f) If the Client has voluntarily or compulsorily become the subject of proceedings under any bankruptcy or insolvency law or being a company, goes into liquidation or has a receiver appointed in respect of its assets or refers itself to the Board for Industrial and Financial Reconstruction or under any other law providing protection as a relief undertaking;

- g) If the Client being a partnership firm, has any steps taken by the Client and/ or its partners for dissolution of the partnership;
- h) If the Client have taken or suffered to be taken any action for its reorganization, liquidation or dissolution;
- i) If the Client has made any material misrepresentation of facts, including (without limitation) in relation to the Security;
- j) If there is reasonable apprehension that the Client is unable to pay its debts or the Client has admitted its inability to pay its debts, as they become payable;
- k) If the Client suffers any adverse material change in his / her / its financial position or defaults in any other agreement with the Trading Member;
- l) If the Client is in breach of any term, condition or covenant of this Agreement;
- m) If any covenant or warranty of the Client is incorrect or untrue in any material respect;

However notwithstanding any termination of the agreement, all transactions made under / pursuant to this agreement shall be subject to all the terms and conditions of this agreement and parties to this agreement submit to exclusive jurisdiction of courts of law at the place of execution of this agreement by Trading Member.

**J) Inactive accounts :**

The account of a client who do not trade and remain inactive for 12 (twelve) months shall be declared “inactive account” and will be temporarily suspended.

The Member reserves the right to ask for any documents in support of current address, bank account, demat account, financial status, etc before reactivating such inactive accounts.

**K) Policies & Procedures :**

“As per the SEBI circular no. CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated 20.06.2019 on Handling of Client’s Securities, **Rainbow Securities Pvt. Ltd.** shall transfer the securities purchased by the client to client’s demat account within 1 working day of the pay out if clear payment is received from the client and if the client fails to make the payment in full then **Rainbow Securities Pvt. Ltd.** shall transfer the securities to the “client unpaid securities account (CUSA)”. The securities kept in the CUSA shall either be transferred to the demat account of the client upon fulfillment of its funds pay- in obligation or in case of the payment is not received by the client it shall be disposed off in the market by **Rainbow Securities Pvt. Ltd.** within 5 trading days after the date of pay out without any notice to the client to the extent of debit balance of the client and/or as per **Rainbow Securities Pvt. Ltd.** Risk Management policy and balance securities shall be transferred to the respective client’s demat account.”

**L) Running Account Authorization**

“Please note that, running account authorisation for funds and securities earlier provided by you to us at the time of account opening is now restricted to funds only and not for securities as per the recent SEBI’s circular - CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated 20.06.2019. So, w.e.f. 01.10.2019 as per the said circular, the revised running account authorisation clause will be read as follows: “Funds shall not be paid immediately until/unless specifically demanded by client and member is free to use the same for the future settlement/margin obligations etc of the client”.

**M) Voluntary Clauses**

I/We are aware and agree that as per the SEBI circular no. CIR/HO/MIRSD/DOP/CIR/P/2019/75 dated 20.06.2019 that **Rainbow Securities Pvt. Ltd.** shall transfer the securities bought by me/us received in pay-out, to my/our demat account within 1 working day if clear payment is received from the client and if I/We fail to make the payment in full then **Rainbow Securities Pvt. Ltd.** shall transfer the securities to the “client unpaid securities account (CUSA)”. I/ We further agree and confirm that, the securities kept in the CUSA shall either be transferred to my/our demat account upon fulfilment of my/our funds pay-in obligation or it shall be disposed of in the market by **Rainbow Securities Pvt. Ltd.** within 5 trading days after the date of pay out without any notice to the client to the extent of debit balance of the client and/or as per **Rainbow Securities Pvt. Ltd.** Risk Management policy and balance securities shall be transferred to the respective client’s demat account.



Signature of the Client

Any profit/loss occurred on such sale transactions of unpaid securities, will be borne by me/us and transferred to/ adjusted in my/our ledger. If any such stock will remain in CUSA due to my/our default, RAINBOW SECURITIES PVT LTD may charge a fine/penalty as levied by the exchange/depositories to me and I/We shall not object the same.

**Client acceptance of policies and procedures stated herein above :-**

I/We have fully understood the same and do hereby sign the same and agree not to call into question the validity, enforce ability and applicability of any provision/clauses this document any circumstances whatsoever. These Policies and Procedures may be amended/ changed unilaterally by the broker, provided the change is informed to me/us with through any one or more means or methods. I/We agree never to challenge the same on any ground including delayed receipt / non receipt or any other reasons whatsoever. These Policies and procedures shall always be read along with the agreement and shall be compulsorily referred to while deciding any dispute /difference or claim between me/us and stock broker before any court of law/judicial/ adjudication authority.



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Signature of the Client

## **Most Important Terms and Conditions (MITC)**

As required by SEBI Circular No. SEBI/HO/MIRSD/MIRSD-PoD-1/P/CIR/2023/180 dt.13.11.2023  
(For non-custodial settled trading accounts)

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



\_\_\_\_\_  
Signature of the Client

## TARIFF SHEET

### BROKERAGE STRUCTURE

SEGMENT	DELIVERY (%)	MINIMUM (paisa)	SQUARE OFF (%)	MINIMUM (paisa)	RISK CATEGORY
Equity Cash					
Equity Future					
Equity Options					
Currency Future					
Currency Options					

(Other charges like STT, GST, Stamp Charges, Transaction Charges if any shall be levied as per the rate stipulated by the concerned Authority)



\_\_\_\_\_  
Signature of the Client

SCORES URL Link : <https://scores.gov.in/scores/Welcome.html>

**Filing compliant on SCORES - Easy & Quick**

- a. Register on SCORES portal
- b. Mandatory details for filing complaints on SCORES
  - i. Name, PAN, Address, Mobile Number, E-mail ID
- c. Benefits:
  - i. Effective Communication
  - ii. Speedy redressal of the grievances

	Name & Signature
Original Documents Verified by	
Brokerage approved by	
Client Code Allotted by	
Client Code & Details uploaded in Back Office by	
Client Code uploaded in Exchange System by	
Client Code mapped in front office by	

## **AUTHORITY LETTER FOR RUNNING ACCOUNT OF FUNDS AND SECURITIES**

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

To

**RAINBOW SECURITIES PRIVATE LIMITED**

“Centre Point”, 3rd Floor, Room No. 305

21, Hemant Basu Sarani

Kolkata - 700 001

Dear Sir,

1. With reference to my/our trading account opened with you, I/we request you to maintain a running account for funds and securities on my/our behalf without settling the account on settlement of each transaction. I/We further request you to retain all amounts and securities receivable by me/us until specifically requested by me/us to be settled within one working day of request, if the same is lying with Rainbow Securities Private Limited & within 3 working days from the request if the same is lying with clearing member / clearing corporation.
2. I/we understand and agree that no interest will be payable to me/us on the funds or securities so retained with you.
3. I/we may be trading in derivatives segment & cash segment of various Exchanges and hence have various accounts with you. In this regard I/we hereby authorize Rainbow Securities Private Limited to act at its discretion of adjusting any credit balance under my/ our various accounts against the debit in any account across segments/Exchange, without taking any further instruction from me/us.
4. Excess margins deposited towards one exchange / segment may be adjusted, on a running basis towards margin requirement / debit balance in same / other exchange / segment, where I/we have the client account.
5. I/we also confirm that the securities lying in my withhold A/c should be considered as margin deposit / collateral.
6. I/we authorize you to set off a part or whole of the margin deposited by me/us against any of my / our dues, by appropriating relevant amount of fund or by sale of securities which form part of margin.
7. I / we hereby authorize you to deposit my / our funds deposited as margin to exchange / Clearing Corporation.
8. I/we authorise Rainbow Securities Private Limited to hold shares purchased by me / us in their beneficiary / pool account as collateral / margin against my / our future trades / obligations in same / other exchange / segment.
9. I/we may revoke the authorisation at any time by giving a written notice.
10. I/we also agree that the actual settlement of fund and securities shall be done by us, at least once in a quarter or month, as preference given below and the statement of account for the same will be provided to me by Rainbow Securities Private Limited.
11. I/we agree that fund given towards collaterals/margins in form of bank guarantee (BG) / Fixed Deposit Receipts (FDR) may not be periodically settled.
12. I/we agree that (a) in respect of derivatives market transactions, the Trading member may retain funds calculated in the manner specified below:
  - i) Entire pay-in obligation of funds outstanding at the end of day on date of settlement, across all segments.
  - ii) Member may retain 50% of end of the day (EOD) margin requirement as cash margin, excluding the margin on consolidated crystallized obligation/ MTM.
  - iii) Apart from 50% cash margin mentioned in point ii above, member may also retain 225% of EOD margin (which includes additional 125% margin) reduced by 50% cash margin and the value of securities (after applying appropriate haircut) accepted as collateral from the clients by way of 'margin pledge' created in the Depository system for the purpose of margin and value of commodities (after applying appropriate haircut). The margin liability shall include the end of the day margin requirement in all the segments across exchanges excluding the margin on consolidated crystallized obligation/ MTM. The margin liability may also include the margin collected by the Member from their clients as per the risk management policy and informed to the clients.

13. I / we authorise you to retain an amount upto ` 10,000/- (consolidated amount across segments and across stock exchanges) for actual settlement of that respective traded quarter / month.
14. I/we agree/understand that there shall be no inter-client adjustment for the purpose of settlement of the running account.
15. I/we shall bring any dispute arising from the statement of account or settlement so made to the notice of the Trading Member preferably within 30 working days from the date of receipt of funds/securities or statement as the case may be.

<b>PREFERENCE OF CLIENT FOR SETTLEMENT OF RUNNING ACCOUNT (FUNDS &amp; SECURITIES)</b>		
Settlement Preferences	<input checked="" type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly

Thanking you,

Yours truly,



\_\_\_\_\_  
Signature of the Client

## MANDATE TO ISSUE DOCUMENTS IN ELECTRONIC FORMAT

Dated : \_\_\_\_\_

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001


Sir,

### **Re : Electronic Communication**

This has reference to the facility of receiving contract notes and other documents in Electronic form issued by you in compliance with regulations and guidelines issued by SEBI and Stock Exchanges. I / We understand that ECN are valid legal contract notes as per Stock Exchange / SEBI Rules and recognized under Income Tax Act, as well as other Acts in India.

Therefore, the ECN shall be an accepted form of Contract Note to me / us and should be mailed to the following Email ID(s) :

**E-mail Id (a)** \_\_\_\_\_  \_\_\_\_\_  
**(Primary - compulsory)** **Signature of Client**

**(b)** \_\_\_\_\_  \_\_\_\_\_  
**(Alternate - optional)** **Signature of**

**Client**

I / We wish to inform you that I / We would like to avail of this facility. In this regard we state the following :

1. This is to further confirm that it will be my / our responsibility that my / our e.mail ID is active and if not, then I / we will inform you to update new e.mail ID.
2. I / we undertake to check the ECNs and discrepancy if any shall be brought to your notice within 24 hours of the issuance of contract notes.
3. You are authorized to send me / us account statement / other documents / other notices / correspondence periodically through the same channel.
4. I / we undertake that any change in my / our Email ID shall be communicated to you in writing through a physical letter.

Kindly take the above into your record and oblige.

Thanking you,

Yours truly,



\_\_\_\_\_  
Signature of Client

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

## DECLARATION/LETTER OF UNDERSTANDING

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

To  
**RAINBOW SECURITIES PRIVATE LIMITED (RSPL)**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Dear Sir,

1. I/We agree not to hold RSPL liable or responsible for delay or default in performance of your obligations due to contingencies beyond your control such as fire, flood, civil commotion, earthquake, riots, war strikes, failure of systems, failure of internal links, government/regulatory actions or any other contingencies beyond your control.
2. I/We am/are agreeable for inter-settlement transfer of securities towards settlements.
3. All fines/penalties and charges levied upon RSPL due to my acts/deeds or transactions may be recovered by RSPL from my account.
4. Any queries related to my/our contract note shall be brought to the notice of RSPL within 7 days of the receipt of the contract note.
5. I/We hereby authorize RSPL not to provide me Order Confirmation/ Modification/ Cancellation slips and Trade Confirmation Slips to avoid unnecessary paper work. I/We hereby request RSPL to kindly accept my/our verbal orders/instructions over phone and execute the same. I/We understand the risk associated with placement of verbal orders and accept the same. In case I wish to withdraw this consent I shall inform RSPL in writing and get the same acknowledged by RSPL at least one week in advance from the date of withdrawal.
6. I/We will be extending all co-operation to RSPL in their endeavour towards Anti Money Laundering. RSPL may initiate any enquiry against me/us and/or my/our transactions any time without any legal implication whatsoever against them.
7. I/We understand that information about me/us and my/our transactions may be reported by RSPL to FIU/concerned authorities without any intimation to me/us and have no objection to the same.
8. I/We undertake that if I/we fail to deliver any one or more securities to the pool account of RSPL in respect of the securities sold by me/us before the pay-in date notified by the Exchange from time to time, such undischarged obligation in relation to delivering any one or more securities shall be deemed to have been closed out at the auction price or close-out price, as may be debited to RSPL in respect of the security for the respective settlement, otherwise the close out price on the date of pay-out in respect of the relevant securities, declared by the Exchange. The loss, if any, on account of the close out shall be borne by me/us.
9. I agree to RSPL tape-recording the conversation between me and RSPL officers in its absolute discretion, whether personally or over the telephone. Such recordings may be relied upon by RSPL as and when required and I agree not to challenge the evidentiary value of such recordings.
10. I hereby authorize RSPL to debit my account with depository services charges, bank charges on account of dishonor of cheques, stop payment instruction charges, demand draft/ pay order/PGP charges. NEFT/RTGS charges, call and trade charges, SMS charges, settlement/ professional charges (for as may be applicable to NRIs), research service/message fee, trading platform charges, application money and processing charges for mutual funds, initial public offerings/follow on public offerings, rights issue, fixed deposit(s), money market instruments etc. generally various investment avenues / products, processing fees/charges towards contract note/statement of account etc. and any other such or similar fees / charges as may become applicable from time to time.

Thanking you,

Yours truly,



\_\_\_\_\_  
Signature of the Client

**VOLUNTARY**

## OPERATIONAL INSTRUCTION LETTER

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

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Dear Sir,

### Sub : Instructions in respect of my/our client account

I / We have opened a client account with your company for Investment / Trading / Speculation in shares & securities for both cash as well as Futures & Options Segments. I / We hereby give you certain operational Instructions with respect to the said dealings by me / us.

1. Orders : My / Our orders for purchase / sale of shares & securities will be given on telephone or orally during my / our visit to your office.
2. I / We request you to kindly adjust my payout credit with any debits in my account and treat the balance payment as margin money for trading, till I / we specifically ask for it.
3. I / We request you to keep my / our securities, funds etc. with you to meet pay-in obligation for margin or otherwise in the succeeding settlements in the same segment as well as other segment of BSE for BSE transactions.
4. You are authorised to undertake any intra client transfers of balance available between various segments of different exchanges.
5. I / We hereby permit you to adjust / hold back any amounts of funds from its pay-out against Margin / Security Deposit, against its position as & when required. It is understood that this amount will not attract any interest during the tenure.

Thanking You,

Your Faithfully,



\_\_\_\_\_  
Signature of the Client

## LETTER OF AUTHORITY

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

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Dear Sir,

### **SUB.: LETTER OF AUTHORITY IN RESPECT OF TRADING IN BSE / NSE SEGMENT**

I/We are dealing in securities with you at NSE/ BSE vide my/our above referred Trading Account. For smooth operations of my / our Trading Account, I / we hereby, willfully and unconditionally, authorize you as under:

1. I / We authorize you to set-off any outstanding balance in any of my / our accounts against credits available or arising in any accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to any transactions in any segment of any Exchange and/or as a result of the value of cash margin or collateral shares provided to you by me / us.
2. I / We hereby authorize you to keep and retain all the funds and securities which I / we give to you as margin / collateral or otherwise and / or the funds and securities received by you on behalf of us as payout to use the same for meeting any my / our margin, pay-in and / or any other obligations on any of the Stock Exchanges or otherwise. I / We also authorize you to pledge such securities in favour of / with any bank and/or taking any loan and / or any other credit facility against the same. I / We also authorize you to use the said securities to meet any margin/pay-in obligation on my/our behalf or for giving the same as margin to the Stock Exchange or otherwise.
3. I/We authorize you to maintain a running account with you for funds and securities instead of settlement to settlement clearance of funds and securities. I / We also authorize you to retain credit balance in any of our account and to use the same towards our present and / or future margin, pay-in and / or other obligations at any of the Stock Exchanges unless I / we instruct you otherwise. I / We further authorize you to demand additional margin/funds as and when required to meet our any of our obligations. I / We also instruct you that no release of funds and / or securities should be made to me / us unless specifically demanded by me / us and only to the extent of amount and / or securities demanded by me / us. However, you shall be at liberty to release such funds and / or securities to me / us whenever you deem it fit. I / We also understand and agree that no interest shall be payable to me / us for any such credit balance of funds and / or securities lying with you.
4. I/We accept that if the amount of Debit Balance is not paid as per Exchange Rules, I/We accept and allow RSPL to charge Interest @ \_\_\_\_\_% on Daily Basis EOD (End of Day) Debit Balance, as may be decided vide our mutual Agreement.
5. Looking to the practical difficulties in placing orders in writing, I / We request you to receive and accept my / our instructions for order placement / order modification / order cancellation verbally over telephone and / or by personal visit to your place.
6. I / We request that you may send/ dispatch the Contract Notes, Bills, Statement of Funds and Securities, Statement of Margin and other documents through E-mail on my / our designed e-mail address as provided to you.
7. I / We will inform you about any change in my / our e-mail address, if any, from time to time in writing.
8. This Letter of Authority shall be valid and binding on us from the date of issue till the date of closure of account or till the revocation / modification /renewal of the same, in writing, by me/us, whichever is earlier.

Thanking You,

Your Faithfully,



\_\_\_\_\_  
Signature of the Client



## CONSENT LETTER FOR EMAIL AND MOBILE ALERT FACILITIES

Dated : \_\_\_\_\_

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Sir,


This is with reference to my/our trading account opened with you, I/we request you to arrange facility of receiving email and/or mobile alert facility issued by Exchange in compliance with regulation and guidelines issued by concerned authorities from time to time.

Email Facility	Service Required - YES <input type="checkbox"/> NO <input type="checkbox"/>
Email ID	
Owned by - Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	
SMS Facility	Service Required - YES <input type="checkbox"/> NO <input type="checkbox"/>
Mobile Number	
Owned by - Name	
- PAN Number*	
Relationship with Client	
Signature of the Client	

\* Please specify the Name and PAN detail in case email id and/or Mobile Number is other than that of the client.

In this regards we state the following :

1. This is to further confirm that it will be my/our responsibility that my/our Email ID and/or Mobile Number are active and the relevant Inbox is not full. Further, the trading member will not be held liable for the mails and / or SMS alert not received.
2. I/we undertake that any change in my/our Email ID and/or Mobile Number shall be communicated to you in writing through a physical letter.
3. I/we agree that this authority shall be valid, until it is revoked by me/us at any time by giving a written notice to **RAINBOW SECURITIES PRIVATE LIMITED**.

  
\_\_\_\_\_  
Signature of the Client

**VOLUNTARY**

**SELF DECLARATION WITH REFERENCE TO NAME MISMATCH**

(To be filled if the name on documents is different)

Date\_\_\_\_\_

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Sub : Declaration for Name Mismatch

This is to bring to your notice that my name is spelt differently in my Identity proof, Income Tax Website, Address proof and Bank proof. Please find below the names as spelt in respective proofs:

Name as per PAN CARD\_\_\_\_\_

Name as per Income Tax Website\_\_\_\_\_

Name as per Address Proof\_\_\_\_\_

Name as per Bank Proof\_\_\_\_\_

Name as per Account Opening Form & KRA\_\_\_\_\_

I hereby confirm that all the said names belong to me. I hereby state and confirm that what is stated above is true and correct information.

I hereby undertake to indemnify and keep indemnified Rainbow Securities Private Limited at all times from and against all costs, charges, damages, penalties (including reasonable attorney fees) suffered and/or incurred by them for any act done or omitted to be done on the above Declaration.



\_\_\_\_\_  
Signature of the Applicant

**SELF DECLARATION WITH REFERENCE TO SIGNATURE MISMATCH**

(To be filled, if Client's signature is mismatched from PAN Card and Bank)

Date\_\_\_\_\_

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Sub : Declaration for Signature Mismatch

This is to bring into your notice that my signature on PAN Card / Bank and Account Opening Form are as follows:

Signature as per PAN Card\_\_\_\_\_

Signature as per Bank\_\_\_\_\_

Signature as per Account Opening Form & KRA\_\_\_\_\_

I hereby confirm that all the above signatures are mine. I hereby state and confirm that what is stated above is true and correct information.

I hereby undertake to indemnify and keep indemnified Rainbow Securities Private Limited at all times from and against all costs, charges, damages, penalties (including reasonable attorney fees) suffered and/or incurred by them for any act done or omitted to be done on the above Declaration.

Thanking You,

Your Faithfully,



\_\_\_\_\_  
Signature of the Client

**DECLARATION IN CASE OF SAME MOBILE NUMBER AND / OR E.MAIL ID FOR DIFFERENT CLIENTS**

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

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Dear Sir,

**Sub: Authorization for using same Mobile number & E mail ID for Demat/Trading.**

Dear Sir,

I/We hereby give my/our consent and declare that I have provided the following mobile number and / Email id on the KRA/KYC form(s) submitted to you for opening of demat and/or trading account(s).

	Details	Name of the person whose Mobile no./ email id is provided	Relationship with the client	Signature of the person whose Mobile No. / email ID is provided
Mobile No.				
Email ID				

I request you to please keep the aforesaid mobile number and/or email id registered with you. I/we confirm to dispatch the statement of accounts and any other documents to me/us in the above mentioned mobile no. and email id.

Any change in the email id and/or mobile no. will be communicated to you in writing.

Thanking You,

Your Faithfully,



\_\_\_\_\_  
Signature of the Client

DP Client ID : 12077000\_\_\_\_\_

UCC Client Code : \_\_\_\_\_

## **CONSENT LETTER FOR INTEREST ON SEGREGATION ETC.**

Dated : \_\_\_\_\_

To  
**RAINBOW SECURITIES PRIVATE LIMITED**  
"Centre Point", 3rd Floor, Room No. 305  
21, Hemant Basu Sarani  
Kolkata - 700 001

Dear Sir,

**Subject : Client Consent on Interest on segregation and Monitoring of Collateral at Client Level**

With Reference to SEBI circular no. SEBI/HO/MRD2\_DCAP/CIR/2021/0598 dated July 20, 2021 has put in place a framework for "Segregation and Monitoring of Collateral at Client Level". The said circular inter-alia stipulated that minimum 50% cash equivalent collateral requirement applicable at the end client level.

In view of the above, w.e.f. 02nd May 2022, Trading Members shall require to maintain Cash and Non Cash Collateral in the ratio of 50:50 at client level.

Hence, for the smooth and un-interrupted trading, I/we will maintain our collateral in 50:50 proportion between Cash & Non Cash Collateral to avoid Interest charges.

Further we give our consent to charge Interest @ 18% p.a on our 50% Cash Margin Shortfall.

Thanking You,

Your Faithfully,



\_\_\_\_\_  
Signature of the Client

**Voluntary information provided by the client in relation to the Prevention of Money Laundering Act, 2002**

Name of the Client : \_\_\_\_\_

If Business / Profession : Nature of business : \_\_\_\_\_

Industry : \_\_\_\_\_

Details of my / our Relatives, having account with **RAINBOW SECURITIES PRIVATE LIMITED** :

Name	Relationship	UCC (Client Code)
1.		
2.		
3.		
4.		

Details of the Corporate / Partnership Firm / Trust etc. where I/We am/are affiliated

Name	Entity Type	Nature of Business	Relationship	UCC (Client Code)
1.				
2.				
3.				
4.				

I / we hereby submit and agree to submit every year following documents to **RAINBOW SECURITIES PRIVATE LIMITED**, before the due date as prescribed by **RAINBOW SECURITIES PRIVATE LIMITED** :

1. Profit and Loss Account & Capital Account
2. Balance Sheet
3. Self attested copy of Income Tax Return (If return not available, I / we will furnish Form 16)
4. Copy of Form 16 in case of Salary Income
5. Any other document providing financial details of the client

I / we confirm that I / we will immediately inform **RAINBOW SECURITIES PRIVATE LIMITED** in case I / we am / are convicted under any grounds or any action is taken against me/us by any authority(ies).

I / we intend to invest in the stock market with :  Own Funds  Borrowed Funds

(If Borrowed Funds, then please specify below Sources of funds :)

Sources of Borrowed Funds (if any)	Amount (₹)

(Certificated / Opinion Report from the Banker / Financial Institution confirming that there has been no default in the client's account is to be attached, which I / we agree to attach herewith.)

I / we hereby declare that I / we am/are beneficial owner of the Trading / On-line account opened with **RAINBOW SECURITIES PRIVATE LIMITED**, and that I / we am / are investing my / our own funds with **RAINBOW SECURITIES PRIVATE LIMITED**.



Client Signature

Client's Name

**For Office use only :**

Risk categorisation of client as per PMLA, 2002 :  High Risk  Medium Risk  Low Risk

Verified by : \_\_\_\_\_

Authorised & Approved by : \_\_\_\_\_

**VOLUNTARY**

## DECLARATION BY KARTA & ALL CO-PARCENERS IN CASE OF HUF ACCOUNT

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

To

**RAINBOW SECURITIES PRIVATE LIMITED**

“Centre Point”, 3rd Floor, Room No. 305

21, Hemant Basu Sarani

Kolkata - 700 001

A/c No. \_\_\_\_\_

1. WHEREAS the Hindu Undivided Family of (hereinafter referred to as the said “joint family”) carrying on business in the firm name and style of at \_\_\_\_\_ or elsewhere (hereinafter referred to as “the said H.U.F. firm”) intend to deal, have or desire to have Trading Account with Rainbow Securities Private Limited (hereinafter referred to as “Member”) we, the undersigned, hereby confirm and declare :
  - (a) that we are the present adult co-parceners of the said joint family ;
  - (b) that Shri \_\_\_\_\_ is the present Karta of the said Joint Family;
  - (c) that we are entitled to trade in shares and open Share Trading Account of the said Joint Family;
  - (d) that each one of us has full and unrestricted authority to act on behalf of, and bind, the said H.U.F. Firm and all the present as well as future members, both adults and minors, of the said joint family, howsoever constituted from time to time.
2. We confirm that the affairs of the said joint family and the busines of the said H.U.F firm are carried on mainly by the Karta, the said Shri \_\_\_\_\_, on behalf and in the interest and for the benefit of all the co-parceners of the said joint family. We hereby authorise the Karta Shri \_\_\_\_\_, on behalf of the H.U.F., to deal on Capital Market Segment (CM), F&O Segment (F&O), Currency Derivatives Segment (CD) or any other Segment that may be introduced by BSE / NSE in future and the said Trading Member is hereby authorised to honour all instructions, oral or written, given by him on behalf of the H.U.F.





Shri \_\_\_\_\_ is authorised to sell, purchase, transfer, endorse, negotiate documents and / or other wise deal through Rainbow Securities Private Limited on behalf of the H.U.F. He is also authorised to sign, execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may be deemed necessary or expedient to open account and give effect to this purpose. We are however jointly and severally responsible for all liabilities of the said H.U.F firm to the Member and agree and confirm that any claim due to Member from the said H.U.F firm shall be recoverable from the assets of any one or all of us and also from the estate of the said joint family including the interest thereon of every co-parcener of the said joint family, including the share of the minor coparceners, if any.
3. We undertake to advise the Member in writing of any change that may occur in the Kartaship or in the constitution of the said joint family or of the said H.U.F. firm and until receipt of such notice by the Member, the member will be entitled to regard each of us as a member of the said joint family and as a partner of the said H.U.F. firm and all acts, dealings and transactions purporting to have been done on behalf of the said joint family or of the said H.U.F. firm before the Member shall have received notice in the manner aforesaid, shall be binding on the said joint family and the said H.U.F. firm and on our respective estate. We shall, however, continue to be liable jointly and severally to the Member for all dues and obligations of the said H.U.F. firm in the Member’s book on the date of the receipt of such notice by the Member and until all such dues and obligations shall have been liquidated and discharged.

4. We recognize that a beneficiary account can be opened with Depository Participant only in the name of Karta as per regulations. To facilitate the operation of the above share trading account with you and for the purpose of completing the share transfer obligations pursuant to the trading operations, we authorise you to recognize the Beneficiary Account No. \_\_\_\_\_ with Depository \_\_\_\_\_ opened in name of \_\_\_\_\_.
5. I agree that obligations for share purchase and / or sale by the H.U.F. will be handled and completed through transfers to / from the above mentioned account. I recognize and accept transfers made by you to the beneficiary account as completion of obligations by you in respect of trades executed in the above trading account of the H.U.F.
6. The names and dates of birth of the present minor co-parceners of the said joint family are given below. We undertake to inform you in writing as and when each of the said members attains the age of majority and is authorized to act on behalf of, and bind the said H.U.F. Firm.

Name of the Minor	Father's Name	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. We have received and read a copy of the Member's rules and regulations for the conduct of Share Trading Accounts and we agree to comply with and be bound by the said rules now in force or any changes that may be made therein from time to time.

Yours faithfully,

 _____ (Signature of Karta) (Along with rubber stamp)	 _____ (Signature of Co-parcener)	 _____ (Signature of Co-parcener)	 _____ (Signature of Co-parcener)
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Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

**List Of Karta & Co-Parcener**

Name	Date of Birth	Age	Relation	Signature
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

\_\_\_\_\_  
Karta Signature With Stamp

**FORMAT OF BOARD RESOLUTION IN CASE OF CORPORATE**

(To be obtained on pre-printed letterhead of the company)

CERTIFIED TRUE COPY OF THE RESOLUTION PASSED IN THE MEETING OF THE BOARD OF DIRECTORS OF \_\_\_\_\_ LTD. AND HAVING ITS REGISTERED OFFICE AT \_\_\_\_\_

HELD ON DAY \_\_\_\_\_ OF \_\_\_\_\_ 20\_\_\_\_ AT \_\_\_\_\_.

“Resolved that the company is empowered to deal on Capital Market Segment, F&O Segment, Currency Derivatives Segment or any other segment that may be introduced by BSE / NSE / MF and in pursuance of the same do enter into agreement with **Rainbow Securities Private Limited**, a Member of BSE Limited (BSE), Mutual Fund (MF) and National Stock Exchange of India Ltd. (NSE) and the said Trading Member be and is hereby authorized to honor instructions, oral or written, given on behalf of the Company by any one of the undernoted authorized signatories:-

Sl. No.	Name	Designation
1.	_____	_____
2.	_____	_____
3.	_____	_____

who is authorized to sell, purchase, transfer, endorse, negotiate documents and/or otherwise deal through Rainbow Securities Private Limited on behalf of the Company.

RESOLVED FURTHER THAT CDSL Beneficiary/Clearing Member Demat Account for Securities to be opened in the name of (Company Name) with **Rainbow Securities Pvt. Ltd.** having its registered office at 305, Centre Point, 3rd Floor, 21, Hemant Basu Sarani, Kolkata – 700 001.

RESOLVED FURTHER THAT Mr. \_\_\_\_\_ and /or Mr. \_\_\_\_\_ Directors and/ or Mr. \_\_\_\_\_ Authorized Signatory of the Company be and are hereby severally / jointly authorized to sign, execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may be deemed necessary or expedient to open account and give effect to this resolution.

For \_\_\_\_\_ Ltd.

Director/Company Secretary

Specimen Signatures of the Authorized Persons

Sl. No.	Name	Specimen Signature
1.	_____	_____
2.	_____	_____
3.	_____	_____

The above signatures to be attested by the person signing the resolution for account opening on behalf of the Company.

**List of Directors & Authorized Signatory as on \_\_\_\_\_ (Date)**  
 (To be obtained on pre-printed letterhead of the company)

Sl. No.	Name	PAN	Designation	Address	Specimen Signature
1.					
2.					
3.					

**Shareholding Pattern as on \_\_\_\_\_ (Date)**  
 (To be obtained on pre-printed letterhead of the company)

Sl. No.	Name of Shareholder	PAN	No. of Shares	% of Shares
1.				
2.				
3.				
4.				
5.				
Total				

**Common Registration Form for availing SMS Alert and /or TRUST facility**

To  
**Rainbow Securities Private Limited**  
305, Centre Point, 3rd Floor  
21, Hemant Basu Sarani  
Kolkata – 700 001

Dear Sir/Madam,

I/We wish to avail the following facility/ies provided by the depository on my/our mobile number as provided below, subject to the terms and conditions as specified by CDSL :

- a. SMART-SMS alert facility
- b. TRUST- TRAnsaction using Secured Texting facility

***(please note that SMS alert facility is mandatory if TRUST facility is opted for)***

BOID 

1	2	0	7	7	0	0	0
---	---	---	---	---	---	---	---

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

  
(Please write your 8 digit DPID) (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 

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

***(Existing users registered for SMS alerts:- Please note that if the mobile number for TRUST is different than the registered mobile number for SMS alert, the new mobile number will be updated for SMS alert also. )***

The mobile number is registered in the name of:

(Name) \_\_\_\_\_

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

I/ We consent to CDSL providing to the service provider such information pertaining to account/ transactions in my/our account as is necessary for the purpose of availing the said facility.

I/We have read and understood the terms and conditions prescribed by CDSL for the said facility/ies 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.

Signatures 

 _____	 _____	 _____
-----------	-----------	-----------

  
Sole / First Holder                      Second holder                      Third Holder

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

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



## AUTHORITY LETTER

To  
**Rainbow Securities Private Limited (RSPL)**  
305, Centre Point, 3rd Floor  
21, Hemant Basu Sarani  
Kolkata – 700 001

**Sub : Authority to debit the Demat Account Charges**

<b>Beneficiary Client ID</b>	
<b>Trading Account Code</b>	

Dear Sir,

This is to inform **Rainbow Securities Private Limited** that,

1. I/We have a beneficiary account with **Rainbow Securities Private Limited** (DP) with client ID as mentioned above.
2. Further I/we have a trading account with **Rainbow Securities Private Limited** (trading code mentioned above) for investment and trading purpose.
3. I/We find it extremely inconvenient to give cheques against your depository bills and client registration charges.

With respect to the above mentioned subject and consideration, I/we hereby authorize you to debit the trading account maintained with **Rainbow Securities Private Limited** for the debit charges payable to RSPL, as Depository Participant for providing depository services. Any such debited to my/our account shall be binding on me/us.

Thanking You

Yours faithfully,

Signature of the Client :  \_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_  
First Holder Second Holder Third Holder

Name of the client : \_\_\_\_\_

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



## Rainbow Securities Private Limited

Regd. Office : "Centre Point", 3rd Floor, Room No. 305, 21, Hemant Basu Sarani, Kolkata – 700 001

Telefax : (033) 2213-5183 / 5184 / 4943, E.mail : dp@rainbowindia.co.in

Website : www.rainbowindia.co.in, CIN : U67120WB1994PTC065293

DP ID : 12077000 ❖ SEBI Regn. No. IN-DP-CDSL-689-2013

### RATE-SHEET FOR DEMAT ACCOUNT (SECURITIES SEGMENT) IN CDSL

Tariffs	Normal Account	BSDA Account	Special Category
Statutory Charges at the time of Account Opening	AT ACTUALS	AT ACTUALS	AT ACTUALS
Advance / Deposit	NIL	NIL	NIL
Account Maintenance	Rs.300/- p.a. for Individuals and Rs. 800/- for Corporate (to be paid at the beginning of the year / at the time of account opening)	FREE (If the value of Holdings does not exceed Rs.50,000 at any point of time) Rs.100/- (If the value of Holding is between Rs.50,001 to Rs.2,00,000)	Rs.1000/- p.a for all (to be paid at the beginning of the year / at the time of account opening)
Life Time AMC	Rs.1500/- (one time ) for Individuals and Rs.2500/- (one time) + Annul Maintenance Fee for Corporate Accounts as levied by Depository as and when.	N.A	N.A.
Demat	Rs.50/- per Request (up to 50 certificate plus courier charges of Rs.50/- per 500 gms for local (within West Bengal) and Rs.70/- per 500 gms for outstation.	Rs.50/- per Request (up to 50 certificate plus courier charges of Rs.50/- per 500 gms for local (within West Bengal) and Rs.70/- per 500 gms for outstation.	CDSL ACTUALS
Remat	Rs.15/- for every hundred securities or part thereof, or Rs. 15/- per certificate (whichever is higher)	Rs.15/- for every hundred securities or part thereof, or Rs.15/- per certificate (whichever is higher)	CDSL ACTUALS
Transaction (Debit)	Rs.15/- for Market Transaction and Rs.30/- per Off Market Transaction & Rs.20/- for per Market Transaction and Rs.35/- per Off Market Transaction for Lifetime Client.	Rs.50/- for all Market Transaction and Off Market Transaction.	Rs.5.5 for Market Transaction and Rs.30/- per Off Market Transaction & Rs.35/- for other market Transaction (other than Rainbow)
Pledge Creation / Closure / Invocation	Rs.50/- per transaction.	Rs.50/- per transaction.	CDSL ACTUALS
Pledge Creation confirmation	NIL	NIL	NIL
Margin Pledge / Unpledged / Repledge setup	Rs.20/- per transaction	Rs.20/- per transaction	CDSL ACTUALS
Failed Instruction charges	Rs.25/- per failed Instruction	Rs.25/- per failed Instruction	CDSL ACTUALS

## RATE-SHEET FOR DEMAT ACCOUNT (SECURITIES SEGMENT) IN CDSL

Tariffs	Normal Account	BSDA Account	Special Category
Other Charges	<ol style="list-style-type: none"> <li>1. Freeze/Unfreeze Rs.25/- per request.</li> <li>2. Courier charges of Rs.70/- for local (within West Bengal) and Rs.100/- for outstation.</li> <li>3. Non-periodic statement and other communications shall be charged @ Rs.5/- per page and courier charges.</li> <li>4. One DIS booklet free of cost at the time of Account opening &amp; thereafter subsequent DIS will be issued @ Rs.30/- per booklet of 10 leaves.</li> <li>5. Cheque dishonor charges Rs.300/- per instance.</li> <li>6. KRA Charges Rs.100/- at the time of opening of Account.</li> </ol>	<ol style="list-style-type: none"> <li>1. Freeze/Unfreeze Rs.25/- per request.</li> <li>2. Courier charges of Rs.70/- for local (within West Bengal) and Rs.100/- for outstation.</li> <li>3. Non-periodic statement and other communications shall be charged @ Rs.5/- per page and courier charges.</li> <li>4. One DIS booklet free of cost at the time of Account opening &amp; thereafter subsequent DIS will be issued @ Rs.50/- per booklet.</li> <li>5. Cheque dishonor charges Rs.300/- per instance.</li> <li>6. KRA Charges Rs.100/- at the time of opening of Account.</li> </ol>	<ol style="list-style-type: none"> <li>1. Freeze/Unfreeze Rs. 25/- per request.</li> <li>2. Courier charges of Rs.70/- for local (within West Bengal) and Rs.100/- for outstation.</li> <li>3. Non-periodic statement and other communications shall be charged @ Rs. 5/- per page and courier charges</li> <li>4. One DIS booklet free of cost at the time of Account opening &amp; thereafter subsequent DIS will be issued @ Rs.50/- per booklet.</li> <li>5. Cheque dishonor charges Rs.300/- per instance.</li> <li>6. KRA Charges Rs.100/- at the time of opening of Account.</li> </ol>

**Note : GST and/or other Statutory Charges shall be payable in addition to charges mentioned above as per applicable rate.**

- Resend of any document due to any problem/error, courier charges of Rs.50/- for local (within West Bengal) and Rs. 70/- for outstation.
- In case of any debit balance in Client's name existing with the Company, DP is authorized to refuse to accept any type of Instruction relating to transfer of shares/securities from Client's account till the clearance of such dues.
- In case of foreign correspondence address, in addition to Annual Account Maintenance Charges, Statement / Communication Charges on actual basis.
- In case of non-payment of bill/dues within 15 days of due date, the Depository Services are liable to be discontinued within a period of 30 days from the date of demand. The renewal charges for resuming the services will be Rs.100/-
- In case of any upward revision in Schedule of Charges, 30 days notice would be given.
- In case of Demat rejection, postage shall be charged @ Rs.50/- for every 500 gms for local (within West Bengal) and Rs.70/- per 500 gms for outstation.
- BSDA Scheme is applicable only for Individual Clients.
- All payment have to be made favoring Rainbow Securities Private Limited.
- Billing Cycle – Monthly.



Sole/First Holder



2nd Holder



3rd Holder

## DECLARATION OF ULTIMATE BENEFICIAL OWNERSHIP

(Mandatory For Non-Individuals)

Investor Name \_\_\_\_\_ PAN \_\_\_\_\_

### Part I - LISTED COMPANY / ITS SUBSIDIARY COMPANY [If applicable, Part II Not Applicable]

We hereby declare that the Applicant/ Owner of the controlling interest in the applicant

- is a Company listed on a Stock Exchange
- is a majority-owned subsidiary of a Company listed on a Stock Exchange

Name of the holding/ parent company (with % share) \_\_\_\_\_

Name of such Listed Company (if not the Applicant itself) \_\_\_\_\_


Stock Exchange where listed \_\_\_\_\_ Security ISIN \_\_\_\_\_

### Part II - OTHER THAN LISTED COMPANY / ITS SUBSIDIARY COMPANY

Name & Address of the Ultimate Beneficial Owner [UBO]	PAN or any other identification proof where PAN not applicable	Country of tax residency	% of beneficial interest in the Applicant	Whether Politically Exposed?	UBO Code (see instruction next page)
(1)					
(2)					
(3)					

If UBO is already KYC compliant, KYC complied proof to be enclosed. Else PAN or any other valid identity proof and address proof must be attached (self certified by the UBO and certified by the Applicant)

### Part III - DECLARATION

<p>We understand that Rainbow Securities Private Limited is relying on this information for the purpose of determining the beneficial ownership of the account. We certify that the information we provided on this form is true and complete to the best of our knowledge and belief. We agree to submit a new form within 30 days if any information or certification on this form gets changed.</p>	<div style="text-align: center;">               _____              Authorised Signatory [with seal]         </div> <p>Date : _____ Place : _____</p>
--	---

**In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit.**

## **GENERAL INFORMATION & INSTRUCTIONS**

As per SEBI Master Circular No. CIR/ISD/AML/3/2010 dated December 31, 2010 regarding Client Due Diligence policy, related circulars on anti-money laundering and SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

Ultimate Beneficiary Owner [UBO]:

### **A. For Investors other than individuals or trusts:**

- (i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:
  - more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
  - more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership;
  - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

### **B. For Investors which is a trust:**

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

### **C. Exemption in case of listed companies/foreign investors**

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/ MIRSD/ 11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client.

### **UBO Code Description**

- UBO-1 : Controlling ownership interest of more than 25% of shares or capital or profits of the Applicant, where the Applicant is a company
- UBO-2 : Controlling ownership interest of more than 15% of the capital or profits of the Applicant, where the Applicant is a partnership
- UBO-3 : Controlling ownership interest of more than 15% of the property or capital or profits of the Applicant, where the Applicant is an unincorporated association or body of individuals
- UBO-4 : Natural person exercising control over the Applicant through other means i.e., exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under UBO-1 to UBO-3 above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests]
- UBO-5 : Natural person who holds the position of senior managing official [In case no natural person could be identified as above]
- UBO-6 :The settler(s) of the trust
- UBO-7 :Trustee(s) of the Trust
- UBO-8 :The Protector(s) of the Trust [if applicable].
- UBO-9 :The beneficiaries with 15% or more interest in the trust if they are natural person(s)
- UBO-10 : Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership.

**FATCA/CRS DECLARATION FORM - FOR INDIVIDUAL**

**Applicant Name** \_\_\_\_\_

**PART I - Please fill in the country for each of the following :**

1. Country of :
- a) Birth \_\_\_\_\_ b) Citizenship \_\_\_\_\_
- c) Residence for Tax Purposes \_\_\_\_\_
2. US Person\* :  Yes  No

**PART II - Please note :**


- a. If in all fields above, the country mentioned by you is India and if you do not have US person status, please proceed to **Part III** for signature.
- b. If for any of the above field, the country mentioned by you is not India and/or if your US person status is Yes, please provide the Tax Payer Identification Number (TIN) or functional equivalent\*\* as issued in the specific country in the table below :
- |                |                        |
|----------------|------------------------|
| i) TIN _____   | Country of Issue _____ |
| ii) TIN _____  | Country of Issue _____ |
| iii) TIN _____ | Country of Issue _____ |
- a. In case any of the parameters in **Part I** indicates that you are a US person or a person resident outside of India for tax purpose and you do not have Taxpayer Identification Numbers/functional equivalent, please complete and sign the Self-Certification section given in **Part IV**.
- b. In case you are declaring US person status as 'No' but your Country of Birth is US, please provide document evidencing Relinquishment of Citizenship. If not available provide reasons for not having relinquishment certificate

\_\_\_\_\_

Please also fill **Part IV** Self-Certification.

**PART III - Customer Declaration (Applicable for all customers)**

- (i) Under penalty of perjury, I/we certify that :
1. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision 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 a US person)**
  2. The applicant is an applicant taxable as a tax resident under the laws of country outside India. **(This clause is applicable only if the account holder is a tax resident outside of India)**
- (ii) I/We understand that Rainbow Securities Private Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. Rainbow Securities Private Limited 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.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- (iv) I/We agree that as may be required by domestic regulators/tax authorities Rainbow Securities Private Limited may also be required to report, reportable details to CBDT or close or suspend my account.
- (v) 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.

Signature :  \_\_\_\_\_

Name : \_\_\_\_\_ Date (DD/MM/YYYY) : \_\_\_\_\_

**PART IV - Self-Certification :**

To be filled only if-

- (a) Name of the country in Part I is other than India and TIN or functional equivalent is not available, or
- (b) US person is mentioned as Yes in Part I, and TIN is not available

I confirm that I am neither a US person nor a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India. Therefore, I am providing the following document as proof of my citizenship and residency in India.



Signature

Document Proof submitted (Please tick document being submitted)

Passport  Election Id Card  PAN Card  Driving License  UIDAI Letter  NREGA Job Card  Govt. Issued ID Card

**\* U.S. Person** means,

- (a) an individual, being a citizen or resident of the United States of America;
- (b) a partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;
- (c) a trust if,-
  - (i) a court within the United States of America would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust; and
  - (ii) one or more U.S. persons have the authority to control all substantial decisions of the trust; or
- (d) an estate of a decedent who was a citizen or resident of the United States of America;

**\*\* Functional Equivalent of TIN**

Many countries do not issue TIN to their taxpayers. However, such countries issue some other high integrity number with an equivalent level of identification (a functional equivalent). Examples of such numbers are-

- Social Security Number
- National Insurance Number
- Citizen Or Personal Identification Code Or Number
- Resident Registration Number

## FATCA/CRS DECLARATION FORM - FOR NON-INDIVIDUAL

Applicant Name \_\_\_\_\_

### PART I

A. Is the account holder a Government body/International Organization/listed company on recognized stock exchange:

Yes  No

*If "No", then proceed to point B. If "yes" please specify name of stock exchange, if you are listed company \_\_\_\_\_ and proceed to sign the declaration.*

B. Is the account holder a (Entity/Financial Institution) tax resident of any country other than India :  Yes  No

*If "yes", then please fill of FATCA/ CRS Self certification Form. If "No", proceed to point C.*

C. Is the account holder an Indian Financial Institution :  Yes  No

*If "yes", please provide your GIIN, if any \_\_\_\_\_. If "No", proceed to point D.*

D. Are the Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian citizen :  Yes  No

*If "yes", (then please fill FATCA/ CRS self-certification form)). If "No", proceed to sign the declaration.*

### CUSTOMER DECLARATION

( ) Under penalty of perjury, I/we certify that :

1. The applicant is:

(i) An applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District to 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 a US person)**

2. The applicant is an applicant taxable as a tax resident under the laws of country outside India.



(i) I/We understand that Rainbow Securities Private Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. Rainbow Securities Private Limited is not able to offer any tax advice on FATCA/CRS or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

(ii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

(iii) I/We agree that as may be required by domestic regulators/tax authorities Rainbow Securities Private Limited may also be required to report, reportable details to CBDT or close or suspend my account.

(iv) 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.

Name of the Entity \_\_\_\_\_

Signature 1  \_\_\_\_\_ Signature 2  \_\_\_\_\_

Signature 3  \_\_\_\_\_ ( As per MOP)

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

**PART II**

**Self-Certification Form (Entity) for Foreign Account Tax Compliance Act (“FATCA”) and Common Reporting Standards(CRS)**

**Section 1 : Entity information**

Name of Entity \_\_\_\_\_

Customer id (if existing) \_\_\_\_\_ Entity Constitution Type \_\_\_\_\_

Entity Identification type :  Tax Identification Number (TIN)  US GIIN  Company Identification Number  
 Global Entity Identification Number (EIN)  Other

Entity Identification No. \_\_\_\_\_

Entity Identification issuing country \_\_\_\_\_ Country of Residence for tax purpose \_\_\_\_\_

**Section 2 : Classification of Non-Financial entities**

I/We (on behalf of the entity) certify that the entity is:

a) An entity incorporated and taxable in US (Specified US person) :  Yes  No

*If “Yes”, please provide your U.S. Taxpayer Identification Number (TIN) \_\_\_\_\_*

b) An entity incorporated and taxable outside of India (other than US) :  Yes  No

*If “Yes”, please provide your TIN or its functional equivalent \_\_\_\_\_*

*Provide your TIN issuing country \_\_\_\_\_*

c) *Please provide the following additional details if you are not a Specified US Person :*

**FATCA / CRS classification for Non-financial entities (NFFE)**

Active NFFE  Passive NFFE without any controlling Person

Passive NFFE with Controlling Person(s) : US  Others

Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus Rainbow Securities Private Limited is not required to do the reporting)

Please provide GIIN number : \_\_\_\_\_

**Section 3 : Classification of financial institutions (including Banks)**

I/We (on behalf of the entity) certify that the entity is :

a. An entity is a U.S. financial institution :  Yes  No

*If “Yes”, (i) Please provide your Taxpayer Identification Number (TIN)*

*(ii) Please provide GIIN, if any \_\_\_\_\_*

*If “No”, please tick one of the following boxes below :*

**FATCA classification**

**Please provide the Global Intermediary Identification number (GIIN) or other information where**

Reporting Foreign Financial Institution in a Model 1 Inter-Governmental Agreement (“IGA”) Jurisdiction \_\_\_\_\_

Reporting Foreign Financial Institution in a Model 2 IGA Jurisdiction \_\_\_\_\_

Participating FFI in a Non-IGA Jurisdiction \_\_\_\_\_

Non-reporting FI \_\_\_\_\_

Non-Participating FI \_\_\_\_\_

Owner-Documented FI with specified US owners \_\_\_\_\_

**Section 4 : Controlling person declaration**

If you are classified as “Passive NFFE with Controlling Person(s)” or “Owner documented FFI” or “Specified US person”, please provide the following details:

Name of controlling person	Correspondence Address	Country of residence for tax purpose	TIN	TIN issuing country	Controlling person type

Details	Controlling person 1	Controlling person 2	Controlling person 3	Controlling person 4	Controlling person 5
Identification Type					
Identification Number					
Occupation Type					
Occupation					
Birth Date					
Nationality					
Country of Birth					

**Section 5 : Declaration**

- (i) Under penalty of perjury, I/we certify that :
  1. The number shown on this form is the correct taxpayer identification number of the applicant, and
  2. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America (“U.S.”) or any state or political subdivision 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, or
  3. The applicant is an applicant taxable as a tax resident under the laws of country outside India.
- (ii) I/We understand that Rainbow Securities Private Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with CRS/FATCA. Rainbow Securities Private Limited 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.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form gets changed.
- (iv) I/ We agree as may be required by Regulatory authorities, Rainbow Securities Private Limited shall be required to comply to report, reportable details to CBDT or close or suspend my account.
- (v) 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 tax payer identification number of the applicant.

**I/We hereby confirm that details provided are accurate, correct and complete**



Authorized Signatories and Company Seal (if applicable)

Name \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_

## **ANTI-MONEY LAUNDERING (AML) – COMBATING FINANCING OF TERRORISM (CFT) WHAT YOU MUST KNOW – FAQs**

Help us in preventing money laundering / terrorist financing.....Your assistance really matters us.

Ever wondered why the Broker is asking you certain personal information which has hitherto never been called for? Such information can include documents evidencing source of funds / income tax returns / bank records etc. By providing this information to the Broker, at the time of account opening and subsequently as and when required, you are actually assisting the efforts in prevention of money laundering / terrorist financing. Here are the details, presented in the form of frequently asked questions (FAQs) to let you know how.

### **What is Money Laundering?**

Money Laundering is the process by which criminals attempt to hide and disguise the true origin and ownership of the proceeds of their criminal activities, thereby avoiding prosecution, conviction and confiscation of the criminal funds. The term Money Laundering is also used when the funds are used for terrorist financing, though the origin of the funds may be legitimate.

Money Laundering has acquired a global character that not only threatens security, but also compromises the stability, transparency, and efficiency of financial systems. Money-laundering techniques are becoming more sophisticated and complex with each passing day.

The objective of AML & CFT Program is to prevent financial intermediaries from being used as a tool for the purpose of Money Laundering & terrorist financing and to preserve the integrity of the Financial system.

In response to mounting concern over money laundering, the Financial Action Task Force on money laundering (FATF) was established by the G-7 Summit in Paris in 1989 to develop a co-ordinated international response. One of the first tasks of the FATF was to develop Recommendations, 40 in all, which set out the measures national governments should take to implement effective anti-money laundering programmes.

### **How much money is laundered per year?**

The IMF has stated in 1996 that the aggregate size of money laundering in the world could be somewhere between two and five percent of the world's gross domestic product.

Using 1996 statistics, these percentages would indicate that money laundering ranged between USD 590 billion and USD 1.5 trillion. However it must be said that overall it is absolutely impossible to produce a reliable estimate of the amount of money laundered and therefore the FATF does not publish any figures in this regard.

### **How is money laundered?**

In the initial - or placement - stage of money laundering, the launderer introduces his illegal profits into the financial system. This might be done by breaking up large amounts of cash into less conspicuous smaller sums that are then deposited directly into a bank account, or by purchasing a series of monetary instruments (cheques, money orders, etc.) that are then collected and deposited into accounts at another location.

After the funds have entered the financial system, the second – or layering – stage takes place. In this phase, the launderer engages in a series of conversions or movements of the funds to distance them from their source. The funds might be channelled through the purchase and sales of investment instruments, or the launderer might simply wire the funds through a series of accounts at various banks across the globe. This use of widely scattered accounts for laundering is especially prevalent in those jurisdictions that do not co-operate in anti-money laundering investigations. In some instances, the launderer might disguise the transfers as payments for goods or services, thus giving them a legitimate appearance.

Having successfully processed his criminal profits through the first two phases the launderer then moves them to the third stage – integration – in which the funds re-enter the legitimate economy. The launderer might choose to invest the funds into real estate, luxury assets, or business ventures.

### **Where does money laundering occur?**

Money laundering can occur practically anywhere in the world. Generally, money launderers tend to seek out countries or sectors in which there is a low risk of detection due to weak or ineffective anti-money laundering programmes.

### **How does money laundering affect business, economic development & society at large?**

Money laundering damages the integrity of the financial institution, entire society and undermines democracy and the rule of the law as it rewards corruption and crime.

There is a damping effect on foreign direct investment when a country's commercial and financial sectors are perceived to be subject to the control and influence of organised crime. Fighting money laundering and terrorist financing is therefore a part of creating a business friendly environment which is a precondition for lasting economic development.

The possible social and political costs of money laundering, if left unchecked or dealt with ineffectively, are serious. Organised crime can infiltrate financial institutions, acquire control of large sectors of the economy through investment, or offer bribes to public officials and indeed governments.

The economic and political influence of criminal organisations can weaken the social fabric, collective ethical standards, and ultimately the democratic institutions of society.

### **How does fighting money laundering help fight crime?**

Targeting the money laundering aspect of criminal activity and depriving the criminal of his ill-gotten gains means hitting him where he is vulnerable. Without a usable profit, the criminal activity will not continue.

### **What should individual governments be doing about it?**

A great deal can be done to fight money laundering, and, indeed, many governments have already established comprehensive anti-money laundering regimes. These regimes aim to increase awareness of the phenomenon – both within the government and the private business sector – and then to provide the necessary legal or regulatory tools to the authorities charged with combating the problem.

Some of these tools include making the act of money laundering a crime; giving investigative agencies the authority to trace, seize and ultimately confiscate criminally derived assets; and building the necessary framework for permitting the agencies involved to exchange information among themselves and with counterparts in other countries.

### **What are Local regulations on AML / CFT?**

- a) Prevention of Money Laundering Act, 2002 (PMLA) came in to force with effect from July 01, 2005 read with the prevention of Money Laundering (Amendment) Act, 2009.
- b) SEBI Guidelines on PMLA vide circular issued in January 2006 followed by latest Master circular issued in February 2010.
- c) Exchanges have also issued Guidelines on PMLA to be followed by all registered intermediary.

### **How is Money Laundering defined under PMLA 2002?**

Section 3 of the Prevention of Money Laundering Act (PMLA) 2002 defines the “Offence of Money Laundering” as:

“Whosoever directly or indirectly attempts to indulge or knowingly assists or knowingly is party or is actually involved in any process or activity connected with the **proceeds of crime** and projecting it as untainted property shall be guilty of the offence of money laundering.”

“**Proceeds of crime**” has been defined in Section 2 of the PMLA as the property derived or obtained directly or indirectly by any person, as a result of criminal activity relating to a scheduled offence or the value of such property.

“**Scheduled Offences**”, as per section 2 of PMLA, are specified in two parts of the schedule to PMLA. The value involved in offences specified in Part B should be Rs.30 lakhs or more.

### **Why KYC / AML Policy for Market Intermediary?**

SEBI has instructed all Market Intermediary to adopt a KYC / AML Policy

- a) To prevent criminal elements from using the Capital Market for money laundering activities.
- b) To enable the Broker to know / understand the customers and their financial dealings better, which in turn would help the Broker to manage risks prudently.
- c) To put in place appropriate controls for detection and reporting of suspicious activities in accordance with applicable laws / laid down procedures.
- d) To comply with applicable laws and regulatory guidelines.
- e) To take necessary steps to ensure that the concerned staff is adequately trained in KYC / AML procedures.

### **What are the obligations of Market Intermediary under PMLA 2002?**

Section 12 of PML Act 2002, places certain obligations on every banking company, financial institution and market intermediary, which include:

- a) Maintaining a record of prescribed transactions.
- b) Furnishing information of prescribed transactions to the specified authority (Financial Intelligence Unit-India (FIU-IND)).
- c) Verifying and maintaining records of the identity of its clients.
- d) Preserving records in respect of a,b,c above, for a period of 10 years from the date of cessation of transactions with the clients.

### What is Financial Intelligence Unit-India (FIU-IND)?

FIU-IND is a central, national agency, set up by Government of India on 18th November,2004, responsible for receiving (and as permitted, requesting), analyzing and disseminating to the competent authorities, disclosures of financial information (i) Concerning suspected proceeds of crime and potential financing of terrorism, or (ii) Required by national legislation or regulation, in order to combat money laundering and terrorist financing.

### What are the transactions to be reported by Market Intermediary to FIU-IND?

- a) All cash transactions of the value of more than Rs.10 lakhs or its equivalent in foreign currency.
- b) All series of cash transactions integrally connected to each other, which have been valued below Rs.10 lakhs or its equivalent in foreign currency (excluding individual transactions below Rs.50,000/- in the reporting) where such series of transactions have taken place within a month and the aggregate value of such transactions exceeds Rs.10 lakhs.
- c) Counterfeit currency transactions.
- d) Suspicious transactions.

### What are suspicious transactions?

Rule 2(1)(g) of PMLA-2002 defines suspicious transactions as:

A transaction whether or not made in cash which, to a person acting in good faith :

- (a) gives rise to a reasonable ground of suspicion that it may involve the proceeds of crime; or
- (b) appears to be made in circumstances of unusual or unjustified complexity; or
- (c) appears to have no economic rationale or bonafide purpose; or
- (d) gives rise to a reasonable ground of suspicion that it may involve financing of activities relating to terrorism.

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### POLICY / DECLARATION ON AML / CFL

Sl.No.	AML Measures	Particulars
1	AML Policy	We have in place written policy & procedure as per guidelines issued by SEBI / Exchange
2	Know Your Customer (KYC)	We have in place system for identification of our clients including KYC documentation.
3	Maintenance of Records	We update the client profile on a regular basis.
4	Screening against negative lists	We have in place record maintenance and retention procedures as prescribed. We screen the client database to ensure that it is not held by or linked to anyone included in the specified list.
5	Risk Assessment	We have in place system to place clients into high, medium & low risk category and apply enhanced due diligence for clients that pose a higher risk.
6	Clients of Special Category	We have in place policy to place clients of special category such as persons with political link, non residents, Trusts, NGOs, closely held Companies, etc. in high risk category.
7	Monitoring, Identification & Reporting of Suspicious Transactions	We have in place, systems and procedures for monitoring, detection and reporting of suspicious transactions to the relevant authorities.
8	Audit	We are subject to inspection by SEBI/Exchange. Additionally we are periodically audited by an independent internal auditor that assesses AML policies and procedures too.

**DEMAT DEBIT AND PLEDGE INSTRUCTION [DDPI]**

(Execution of this document is not mandatory)

<hr/> <hr/> <hr/>	To <b>Rainbow Securities Pvt. Ltd.</b> 305, Centre Point, 3rd Floor 21, Hemant Basu Sarani Kolkata – 700 001
<b>UCC :</b>	<b>BO ID :</b>

Dear Sir,

Due to exigency and paucity of time, I / We do hereby jointly and severally nominate, constitute and authorise **Rainbow Securities Pvt. Ltd.**, acting through their respective director(s), employees or such other person as may be authorised by them through Resolution, whether passed in a meeting of the Board of Directors or any Committee formed by the Board, for the aforesaid and various other purposes, to execute the following transactions on my / our behalf :

1. Issue / execute instructions for the purpose mentioned here below :

Sl. No.	Purpose	Signature of Client
1	Transfer of securities held in the abovementioned Beneficial Owner Account towards Stock Exchange related to deliveries / settlement obligations arising out of trades executed by me / us on the Stock Exchange through <b>Rainbow Securities Pvt. Ltd.</b>	1st Holder ✓
		2nd Holder ✓
		3rd Holder ✓
2	Pledging / re-pledging of securities in favour of Trading Member (TM) / Clearing Member (CM) / Clearing Corporation (CC) for the purpose of meeting margin requirements in connection with the trades executed by me / us on the Stock Exchange.	1st Holder ✓
		2nd Holder ✓
		3rd Holder ✓
3	Mutual Fund transactions being executed on Stock Exchange order entry platforms	1st Holder ✓
		2nd Holder ✓
		3rd Holder ✓
4	Tendering shares in open offers through Stock Exchange platforms	1st Holder ✓
		2nd Holder ✓
		3rd Holder ✓

2. To issue / execute instructions for the purpose mentioned hereinabove in favour of any of the following Demat Accounts of **Rainbow Securities Pvt. Ltd.** :

**CDSL NSE POOL A/C** : 12077000 00004891  
**CDSL BSE POOL A/C** : 12077000 00000050  
**CDSL PLEDGE A/C** : 12077000 00011231  
**CDSL PLEDGE (MTF) A/C** : 12077000 00011358  
**CDSL PLEDGE (MTF) A/C** : 12077000 00011489  
**CDSL CUSPA A/C** : 12077000 00014534  
**CDSL TM POLL (F & O) A/C** : 12077000 00014422  
**CDSL BSE EARLY PAY-IN A/C** : 11000010 00023268  
**CDSL NSE EARLY PAY-IN A/C** : 11000011 00019971  
**NSDL NSE POOL A/c** : IN520108 12126148  
**NSDL BSE POOL A/c** : IN664227 11571703

3. To do all such other acts or deeds which **Rainbow Securities Pvt. Ltd.**, in its sole discretion considers necessary in this connection in order to complete the transaction(s).
4. **Rainbow Securities Pvt. Ltd.** shall return to me / us the securities that may have been received by it erroneously or those securities that it was not entitled to receive from me / us.
5. That this authorisation shall continue until I / we have given to **Rainbow Securities Pvt. Ltd.** in writing to the contrary upon the satisfaction of all amounts / dues payable by me / us to **Rainbow Securities Pvt. Ltd.** towards the aforementioned purposes. However, I / we understand that the powers and authorities conferred by this authorisation shall be revocable at any time without notice.

I / we, myself / ourselves, my / our heirs, executors and administrators do hereby agree to ratify, confirm and validate all and whatsoever my said Attorney shall do or purport to do or cause to be done by virtue of these presents.

I / we agree to indemnify and keep indemnified and hold harmless **Rainbow Securities Pvt. Ltd.** from any and all reasonable costs, liabilities and expenses resulting directly or indirectly from all lawful actions in accordance with properly issued instructions where required.

This Authorisation is in accordance with the SEBI Circular No. SEBI/HO/MIRSD/DoP/P/CIR/2022/44 dated April 4, 2022.

<b>Signature of the Client</b>	<b>In case of HUF, Signature of Co-parceners</b>
1st Holder ✓	
2nd Holder ✓	
3rd Holder ✓	
<b>Witness 1 :</b>	<b>Witness 2 :</b>
<b>Signature :</b>	<b>Signature :</b>
<b>Name and Address :</b>	<b>Name and Address :</b>
<b>Date :</b> <b>Place :</b>	<b>We accept :</b> <b>For Rainbow Securities Pvt. Ltd.</b>  <b>Director / Authorised Signatory</b>

**FOR OFFICE USE ONLY**

Account Opened by : \_\_\_\_\_

Account Verified by : \_\_\_\_\_

Client ID : \_\_\_\_\_

**UPFRONT PAYMENT DETAILS :**

Cheque No. \_\_\_\_\_ dated \_\_\_\_\_ for ₹ \_\_\_\_\_

drawn on \_\_\_\_\_.

**BREAK-UP OF PAYMENT :**

Maintenance ₹ \_\_\_\_\_

Stamp Charges ₹ \_\_\_\_\_

Others ₹ \_\_\_\_\_

**TOTAL** ₹ \_\_\_\_\_

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

	Documents verified with Originals	Client Interviewed 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.*



\_\_\_\_\_  
**Signature of the Authorised Signatory**

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

**Seal/Stamp of the stock broker**

**REQUEST FOR NON-CONVERSION OF REGULAR DEMAT ACCOUNT  
INTO BASIC SERVICES DEMAT ACCOUNT (BSDA)**

From :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

To  
**Rainbow Securities Private Limited**  
**DP ID : 12077000**  
305, Centre Point, 3rd Floor  
21, Hemant Basu Sarani  
Kolkata – 700 001

Dear Sir,

With reference to my/our application for opening a Demat Account with you as per the following details,

	Name	PAN
Sole/First Holder	_____	_____
Second Holder	_____	_____
Third Holder	_____	_____

Please note that I/We have read and understood the SEBI Guidelines for facility for a BSDA. I/We hereby declare that I/we am/are do not wish to open a Depository Account as a BSDA holder and undertake to comply with the requirements specified by SEBI or any such Authority for such facility from time to time. Further, at any point of time in future, even if my/our account do meet the eligibility of a BSDA, my/our aforesaid Account should always be a Regular Account & never be converted into BSDA Account.

Thanking you,

Yours truly,



\_\_\_\_\_  
Signature of the Client

Client ID \_\_\_\_\_

## ACKNOWLEDGEMENT FOR THE RECEIPT OF DOCUMENTS

From:

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

To  
**Rainbow Securities Private Limited**  
**DP ID : 12077000**  
305, Centre Point, 3rd Floor  
21, Hemant Basu Sarani  
Kolkata – 700 001

### Ref. : Acknowledgement for the receipt of documents

Dear Sir,

This is to acknowledge and declare that

- I/We have received a photocopy of the KYC (full booklet), duly executed with you, to my/our satisfaction including my / our Unique Client Code (Trading Code).
- I/We have ( Physically  Electronically) received, read and understood the Rights & Obligations, Risk Disclosure Documents, Guidance Note, "Rights and Obligations of Beneficial Owner and Depository Participant" as prescribed by SEBI and Depositories
- I/We have received, read and understood the Policies and Procedures.
- I/We have received Copy of Power of Attorney
- I/We have received Client Master Report
- The email id noted with you (for ECN and other purposes) is correct.

I/we hereby declare that I/we have the full intimation of the Client ID allotted to me/us.

Thanking you,

Yours truly,



\_\_\_\_\_  
Signature of the Client

Client Code \_\_\_\_\_



# Rainbow Securities Private Limited

Regd. Office : "Centre Point", 3rd Floor, Room No. 305

21, Hemant Basu Sarani, Kolkata – 700 001

Telefax : (033) 2213-5183 / 5184 / 4943, E.mail : dp@rainbowindia.co.in

Website : www.rainbowindia.co.in, , CIN : U67120WB1994PTC065293

**DP ID : 12077000 ❖ SEBI Regn. No. IN-DP-689-2013**

Investors' Grievances Redressal E.mail : investorgrievanceredressel@rainbowindia.co.in



**CDSL**  
Your Depository

(To be filled by the Depository Participant)

## Acknowledgement Receipt

**Application No. :**

**Date :**

We hereby acknowledge the receipt of the Account Opening Application Form :

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

For **RAINBOW SECURITIES PRIVATE LIMITED**

Seal and Signature

Authorised Signatory

## Acknowledgement Receipt

Received Nomination Form from :

<b>DP ID</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>7</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	Client ID								
Name																	
Address																	
Nomination in favour of																	
No Nomination	<input type="checkbox"/> Does not wish to nominate																
Registration No.									Registered on	<b>D</b>	<b>D</b>	<b>M</b>	<b>M</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>

For **RAINBOW SECURITIES PRIVATE LIMITED**

Seal and Signature

Authorised Signatory

## Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

<b>DP ID</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>7</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	Client ID								
Name of the Sole / First Holder																	
Name of Second joint Holder																	
Name of Third joint Holder																	

For **RAINBOW SECURITIES PRIVATE LIMITED**

Seal and Signature

Authorised Signatory