



ACCOUNT OPENING FORM FOR DEMAT (NSDL / CDSL) - INDIVIDUAL

Premium Account ☐

Regular Account ☐

Simplified Account ☐

C KYC

KRA

DP ID

DP CLIENT ID

*Explore opportunities and be part
of India's incredible Journey*



Experience Excellence with Farsight : Your Sherpa to Invest in India

This opportunity to invest in India is to embark upon a journey of financial prosperity with Farsight Group, a distinguished and unwavering financial powerhouse committed to pinnacle of investment services. Established in 1995, it stands proudly as a signature Broking House, with memberships in the NSE, BSE, MCX and DP of NSDL & CDSL.

Why India

Political stability, long term vision duly supported with Big ticket reforms and world scale infrastructure, demographic dividends have put India on the map of world's fastest growing economies. NIFTY and the Sensex are amongst the best performing indices truly capturing the resilience, depth and growing power of Indian Investors. This has culminated into higher GDP growth, stronger FDI and FII investment and the portfolio of any investor is incomplete without exposure on India.

Why Farsight?

A Legacy of Trust: With three decades of dedicated commitment, Farsight boasts of a perfect track record—ZERO client grievances. Our thrust to customer satisfaction is unparalleled. Experience of our customer's is excelled further by Kunjee – the Trading App, Insta Fund Transfer and dedicated e-Farsight portal.

Comprehensive Services:

- EQUITIES
- DERIVATIVES
- COMMODITIES
- IPO
- BONDS
- MUTUAL FUNDS

Regulatory & Compliances:

Our expert professionals can help in making application, getting registration and ensuring timely and regular compliances.

INDEX OF DOCUMENTS*			
S. No.	Name of Document	Brief Significance of the Document	Page No.
MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES			
1.	Account Opening Form	<p>A. CKYC form - Document captures the basic information about the constituent and instruction/check list. and FATCA and CRS Information.</p> <p>B. Document captures the additional information about the constituent relevant to trading account and instruction/check</p>	1- 9
2.	Rights and Obligations (Trading & DP)	Document stating the Rights & Obligations of stock broker/trading member sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading)	As per separate booklet (As per format annexure 4, 5 & 6) as per SEBI Circular: CIR/MIRSD/64/2016 dt. 12-07-2016 also available on website and on demand
3.	Risk Disclosure Document (RDD)	Document detailing risks associated with dealing in the securities market.	
4.	Guidance note	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	
5.	DP Tariff sheet	Document detailing the rate/amount and other charges levied on the client depository services	10

SEBI Registration No. : INZ000169935 Segment: NSE/BSE/MCX Dated: 23/03/2018

Depository Participants : IN-DP-579-2021 NSDL/CDSL Dated: 31/03/2021

* SOFT COPIES OF THE DOCUMENTS ARE AVAILABLE ON WWW.FARSIGHTSHARES.COM

Details of premium & simplified accounts special terms & conditions are also available on demand & on site.

FOR OFFICE USE ONLY

KRA/CKYC NO.

Upload/Download

Verified by

Branch Code

UCC Code allotted to the Client :

DP ID & CLIENT ID :

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

Account Opened by : Date :

Exchange activated & Mapped by : Date :

Rechecked by : Date :

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.

Name & Signature of the Authorised Signatory

Date

Seal/Stamp
Farsight Securities Limited

Know Your Customer (KYC) Application Form
Individual
For office use only (To be filled by company officials only)

 Application Type* ☐ New ☐ Update KYC Number*

(Mandatory for KYC update request)

 Fields marked with* are mandatory fields. Account Type ☐ Normal ☐ Simplified (for low risk customers) ☐ Small

 DP ID :- Client ID :- UCC :-
1. PERSONAL DETAILS

 Name* Prefix

(Same as ID proof)

Maiden Name (If any*)

Father / Spouse Name*

Mother Name*

Date of Birth*

 Gender* ☐ M-Male ☐ F-Female ☐ T-Transgender

 Marital Status* ☐ Married ☐ Unmarried ☐ Others

 Citizenship* ☐ IN Indian ☐ Others (ISO 3166 Country Code)

 Residential Status* ☐ Resident Individual ☐ Non Resident Indian
☐ Foreign National ☐ Person of Indian Origin

 Occupation Type* ☐ Private Sector ☐ Public Sector ☐ Government Service

 (Please Tick any one and give brief details) ☐ Professional ☐ Self Employed ☐ Retired

☐ Housewife ☐ Student ☐ B-Business

☐ X- Not Categorised (brief details)
PHOTO


Please affix the recent passport size photograph (Size 3.5 cm X 4.5 cm)



Signature / Thumb Impression

2. PROOF OF IDENTITY (PoI)*

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

☐ A- Passport Number Passport Expiry Date
☐ B- Voter ID Card
☐ C- PAN Card
☐ D- Driving Licence Exp. Date
☐ E- UID (Aadhaar)
☐ F- NREGA Job Card
☐ Z- Others (any document notified by the central government) Identification Number
☐ S- Simplified Measures Account - Document Type code Identification Number
3. PROOF OF ADDRESS (PoA)*
3.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS

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

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

 Proof of Address* ☐ Voter Identity Card ☐ Driving Licence ☐ Passport ☐ NREGA Job Card ☐ UID (Aadhaar)

☐ Others

 Address*

 City / Town / Village* District* Pin / Post Code*

 State / U.T* Code* Country* Country Code* as per ISO 3166

3.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS *
☐ Same as Current / Permanent / Overseas Address details

 Address*

 City / Town / Village* District* Pin / Post Code*

 State / U.T* Code* Country* Country Code* as per ISO 3166

4. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID)

Tel.(Off/Res)	<input type="text"/>	—	<input type="text"/>	Fax	<input type="text"/>	—	<input type="text"/>
Mobile	<input type="text"/>	—	<input type="text"/>	Mobile (2)	<input type="text"/>	—	<input type="text"/>
Email ID	<input type="text"/>						

5. FATCA / CRS Information**Do you satisfy any of the criteria mentioned below:-**

	Yes	No
a. Citizen of any country other than India(dual/multiple) [including green card]		
b. Country of birth is any country other than India		
c. Tax resident of any country/ies other than India		
d. POA or a mandate holder who has an address outside India		
e. Address or telephone number outside India.		

If answer to any of the above questions is a YES or in case of NRI account .please fill the below details :-

Country#	Tax Identification Number	Identification Type(TIN or other*, please specify)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

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

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill below details)☐ Addition of Related Person ☐ Deletion of Related Person

KYC Number of Related Person (If available*)

Related Person Type ☐ Guardian of Minor ☐ Assignee ☐ Authorized RepresentativeName

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

Proof of Identity of Related Person

Identity Proof Submitted Number Exp. Date

Other (any document notified by the Central Govt.)	Identification No.
Simplified Measures Account-Document Type Code	Identification No.

7. REMARKS (If any)**8. APPLICANT DECLARATION**

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

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

Subject to applicable laws, I hereby give consent to share my FATCA/CRS information with domestic/overseas regulators or tax authorities wherever necessary. I also declare and confirm that the FATCA/CRS details given as per point no-5 above are true, correct & complete. I further confirm that I have read and understand the FATCA/CRS terms and conditions and hereby accept the same.

Date : Place :  (2)**Signature / Thumb Impression of Applicant**

Note : Separate KYC to be done for each client in case of more than one account holder (for Demat Account only).

FOR OFFICE USE ONLY

Details of Employee /AP/ Authorized Signatory	Documents Verified with Originals	Client Interviewed by & IN-Person Verification done by	DD / MM / YYYY Farsight Securities Limited Code - IN0242
Name			Seal / Stamp of the Intermediary
Designation/Code			
Date	DD / MM / YYYY	DD / MM / YYYY	
Signature			

9. ADDITIONAL DETAILS :- ☐ NSDL / ☐ CDSL ☐ TRADING

I / We request you to open a Demat NSDL / CDSL / Trading account in my/ our name as per the following details:

9.1 DETAILS OF ACCOUNT HOLDER(S) :- (For Demat Account Only)

Account Holder (s)	Sole / First Holder	Second Holder	Third Holder
Name			
PAN	<input type="text"/>	<input type="text"/>	<input type="text"/>
UID (Aadhaar)	<input type="text"/>	<input type="text"/>	<input type="text"/>

10 BANK DETAILS
Default Bank (Through which payout transactions would generally be routed)

1. Bank Account type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRI/NRE/NRO <input type="checkbox"/> Others (Please specify)_____	
2. Bank Account No.	<input type="text"/>	
3. Bank Name	<input type="text"/>	
4. Bank Address	<input type="text"/>	
	PIN Code <input type="text"/>	
5. MICR Code	<input type="text"/>	6. IFSC Code <input type="text"/>
Proof of Bank Submitted	<input type="checkbox"/> Bank Statement# <input type="checkbox"/> Cancelled Cheque (with client Name and A/c No. printed) <input type="checkbox"/> Bank Passbook## <input type="checkbox"/> Bank Verification Letter (Original)	

Additional Bank

1. Bank Account type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRI/NRE/NRO <input type="checkbox"/> Others (Please specify)_____	
2. Bank Account No.	<input type="text"/>	
3. Bank Name	<input type="text"/>	
4. Bank Address	<input type="text"/>	
	PIN Code <input type="text"/>	
5. MICR Code	<input type="text"/>	6. IFSC Code <input type="text"/>
Proof of Bank Submitted	<input type="checkbox"/> Bank Statement# <input type="checkbox"/> Cancelled Cheque (with client Name and A/c No. printed) <input type="checkbox"/> Bank Passbook## <input type="checkbox"/> Bank Verification Letter (Original)	

11. DEPOSITORY ACCOUNT(S) DETAILS

Depository Name	DP Name	DP ID	Beneficiary Name	Beneficiary ID (BO ID)
<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	Farsight Securities Ltd	<input type="checkbox"/> IN301766 <input type="checkbox"/> 12056300		

12. OTHERS DETAILS (please tick any one)

1. Gross Annual Income Details	<input type="checkbox"/> Below ₹ 1 Lac <input type="checkbox"/> ₹ 1 - 5 Lac <input type="checkbox"/> ₹ 5 - 10 Lac <input type="checkbox"/> ₹ 10 - 15 Lac <input type="checkbox"/> More than ₹ 25 Lac	
Networth (Optional)	Amount (₹) _____ As on (Date) <input type="text"/> (Networth should not be older than 1 Year)	
2. Type of Account (Please tick as Applicable)(For Demat A/c only)		
Status	Sub-Status	
<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)_____	
3. Please tick, as applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (RPEP) <input type="checkbox"/> None (If PEP/RPEP ticked than please provide details in separate sheet)	
4. Educational Qualification	<input type="checkbox"/> Under Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Professional_____	
5. Any Other Information	<input type="text"/>	











13. For Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the DP account is opened in the name of the natural persons, the name & PAN of the Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned below:

a) Name	<input type="text"/>	b) PAN	<input type="text"/>
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14 IN CASE OF NRI'S / FOREIGN NATIONALS			
RBI Approval Reference Number		RBI Approval (Date) D D M M Y Y Y Y	
15 GUARDIAN DETAILS (In case the Sole Holder is a Minor) (Applicable for Demat Account only):			
Guardian Name			
PAN	 	Relationship of guardian with minor	
16 FAMILY DECLARATION FOR SAME MOBILE NUMBER / EMAIL ID			
Please refer to the Trading/DP accounts opened with you, for the purpose of dealing in NSE/BSE/MCX/NSDL/CDSL. We all belong to same family or having common director			
MOBILE NUMBER : COMMON EMAIL ID :			
I hereby declare that the Mobile Number or E-Mail ID or Both as per KYC belongs to <input type="checkbox"/> Self / <input type="checkbox"/> Family*			
Code/Client ID	Name	Relationship	Signature of Family Member's
* in case of family all details need to filling			
17 AADHAR AUTHENTICATION CONSENT			
"I/we hereby state that I/we have no objection in authenticating myself/ourselves with Aadhar based authentication system through NSDL e-Governance Infrastructure Limited / CDSL Ventures Limited and give my/our consent to provide my Aadhaar Number, OTP, Demographic details or Biometric for Aadhaar based authentication. I/we also authorize NSDL e-Governance Infrastructure Limited / CDSL Ventures Limited to share the authentication details with Farsight Securities Limited for the purpose of carrying Aadhaar Authentication as required by PMLA guidelines, which shall not be further shared."			
18 STANDING INSTRUCTION			Yes
			No
1.	I/We authorise you to receive credits automatically into my/our DP account.		<input type="checkbox"/>
2.	Account to be operated through Power of Attorney (POA)		<input type="checkbox"/>
3.	SMS Alert facility : [Mandatory if you are giving Power of Attorney (POA). Ensure that the mobile number is provided in the KYC Application Form]		
	Sr. No.	Holder	
	a)	Sole / First Holder	<input type="checkbox"/>
	b)	Second Holder	<input type="checkbox"/>
	c)	Third Holder	<input type="checkbox"/>
4.	I/We request you to enable my/our DP account for Auto Pledge confirmation.		<input type="checkbox"/>
5.	I wish to avail facility for Internet Trading and Wireless Technology		<input type="checkbox"/>
6.	I/We would like to share the email ID with the RTA		<input type="checkbox"/>
7.	Mode of Receiving Contract Note, Statement of Account, Margin Reports, Standard KYC Documents & Other Documents (tick any one)	<input type="checkbox"/> Physical Form	<input type="checkbox"/> Electronic Form <small>(Read Note 4 and ensure that email id is provided in KYC Application Form)</small>
8.	I/We would like to receive the Annual Report	<input type="checkbox"/> Physical Form	<input type="checkbox"/> Electronic Form
9.	Whether you wish to receive A. Rights & Obligations of Stock Broker, Sub-Broker & Client, B. Rights & Obligations of Beneficial Owner & Depository Participants, C. Right & Obligations of members, AP and clients as prescribed by SEBI and Commodity Exchanges D. Unique Form Risk Disclosure Documents, E. Guidance Note Detailing Do's & Don't for Trading on Stock Exchanges. <input type="checkbox"/> Physical or <input type="checkbox"/> Electronic form Rights & Obligations Uniform Risk Disclosure & Guidance Note		
19 ADDITIONAL DETAILS			
	• Number of years of Investment/Trading Experience: _____		
	• Employee of Farsight Group/Other Broker/Exchange <input type="checkbox"/> Yes <input type="checkbox"/> No, If Yes provide details _____		
	• Relative of an Employee of Farsight Group/other Broker/Exchange <input type="checkbox"/> Yes <input type="checkbox"/> No, if yes provide details _____		
	• Any other information _____		
20 GST DETAILS			
	• GST Number • GST Implementation Location 		

21 TRADING PREFERENCES

*Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.

	NSE	BSE	MCX
CASH	 (3.1)	 (3.2)	 (3.3)
F&O	 (3.4)	 (3.5)	 (3.6)
CURRECNY	 (3.7)	 (3.8)	 (3.9)
MUTUAL FUND	 (3.10)		

If, in future, the client wants to trade on any new segment/new exchange, separate authorization/letter should be taken from the client by the stock broker

22 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 : ☐ No ☐ Yes If Yes, Please Specify Details _____


23 DEALINGS THROUGH OTHER STOCK BROKERS

- Whether dealing with any other stock broker (in case dealing with multiple stock brokers, provide details of all)
Stock Broker Name : _____
Client Code: _____ Exchange: _____
- Details of disputes/dues pending from/to such stock broker : _____

24 INTRODUCER DETAILS (OPTIONAL)

- Name of the Introducer _____
- Status of the Introducer ☐ AP ☐ Existing Client ☐ Employee ☐ Other, please specify _____
- Address of the Introducer _____
- Phone No. of the Introducer _____ Signature of the Introducer : _____

25 ONLY FOR CDSL DEMAT CLIENTS

SMS Alerts Facility Refer to Terms & Conditions given as Annexure 2.4	Mobile No.	+	9	1														
	[(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).																	<input type="checkbox"/> Yes <input type="checkbox"/> No
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. I have read and understood the Terms and Conditions prescribed by CDSL for the same.																	<input type="checkbox"/> Yes <input type="checkbox"/> No
	I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST																	
	Stock Exchange Name / ID				Clearing Member Name						Clearing Member ID (Optional)							
	To register for easi, please visit our website : www.cdslindia.com Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.																	<input type="checkbox"/> Yes <input type="checkbox"/> No

Place: _____

Date: _____

 Signature of the Client  (4)

Only for CDSL DP Client

Only for CDSL DP Client

Only for CDSL DP Client

(Only for CDSL DP Client)

Sole/First Holder Signature

Second Holder Signature

Third Holder Signature

Nomination Form

[Annexure A to SEBI circular no. SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2022/23 dated February 24, 2022 on Nomination for Eligible Trading and Demat Accounts]

M/s. FARSIGHT SECURITIES LTD. 17A/55, TRIVENI PLAZA, 3rd FLOOR GURUDWARA ROAD, KAROL BAGH, NEW DELHI-110005, PH:01145044439,41 Website: www.farsightshares.com										FORM FOR NOMINATION <i>(To be filled in by individual applying singly or jointly)</i>																	
Date	D	D	M	M	Y	Y	Y	Y	UCC/ DP ID	I	N							Client ID									
I/We wish to make a nomination. [As per details given below]																											
Nomination Details																											
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.																											
Nomination can be made upto three nominees in the account.										Details of 1st Nominee					Details of 2nd Nominee					Details of 3rd Nominee							
1	Name of the nominee(s) (Mr./Ms.)																										
2	Share of each Nominee		Equally <small>[If not equally, please specify percentage]</small>							%					%					%							
Any odd lot after division shall be transferred to the first nominee mentioned in the form.																											
3	Relationship With the Applicant (If Any)																										
4	Address of Nominee(s) City / Place: State & Country:																										
			PIN Code																								
5	Mobile / Telephone No. of nominee(s) #																										
6	Email ID of nominee(s) #																										
7	Nominee Identification details # [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature PAN <input type="checkbox"/> Aadhaar Saving Bank account no. Demat Account ID																										
Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:																											
8	Date of Birth {in case of minor nominee(s)}																										
9	Name of Guardian (Mr./Ms.) {in case of minor nominee(s) }																										
10	Address of Guardian(s)																										

	City / Place: State & Country:					
		PIN Code				
11	Mobile/ Telephone no. of Guardian #					
12	Email ID of Guardian #					
13	Relationship of Guardian with nominee					
14	Guardian Identification details # [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN Account no. Proof of Identity <input type="checkbox"/> Demat Account ID					
Name(s) of holder(s)					Signature(s) of holder*	
Sole / First Holder (Mr./Ms.)						
Second Holder (Mr./Ms.)						
Third Holder (Mr./Ms.)						

* 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)

Note:

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)

Name and Signature of Holder(s)*		
1. _____	2. _____	3. _____

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

Declaration Form for opting out of nomination




[Annexure B to SEBI circular No. SEBI/HO/MIRSD/RTAMB/CIR/P/2021/601 dated July23, 2021 on Mandatory Nomination for Eligible Trading and Demat Accounts]

To	Date	D	D	M	M	Y	Y	Y	Y
M/s. FARSIGHT SECURITIES LTD. 17A/55, TRIVENI PLAZA, 3 rd FLOOR GURUDWARA ROAD, KAROL BAGH, NEW DELHI-110005, PH:011- 45044439,41 Website: www.farsightshares.com									
UCC/DP ID									
Client ID (only for Demat account)									
Sole/First Holder Name									
Second Holder Name									
Third Holder Name									
I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in 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.									
Name and Signature of Holder(s)*									
1. _____ 2. _____ 3. _____									

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

Declaration

The rules and regulations of the Depository and Depository participant pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. 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 any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/we am/are aware that I/we maybe held liable for it. In case of nonresident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations. I/we further confirm having read/been explained and understood the contents of Right and obligation of the beneficial owner and depository participant/stock brokers & clients, risk Disclosure document, Policies & procedures, schedule of charges/Tariff sheet and acknowledge the receipt of copy of the same. I/we do hereby agree to be bound by such provision 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.

	Name(s) of holder(s)	Signature(s) of holder	Sign to be used
Sole / First Holder / Guardian (in case sole holder is minor)		 (5)	
Second Holder			
Third Holder			

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 Notary Public or a Special Executive Magistrate.
3. Instructions related to nomination are as below:
 - I. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non-individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
 - II. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
 - III. The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
 - IV. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
 - V. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
 - VI. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non-individuals including society, trust, body corporate, partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
 - VII. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
 - VIII. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
 - IX. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
 - X. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure D.
 - XI. DP ID and client ID shall be provided where demat details is required to be provided.
4. For receiving Statement of Account in electronic Form:
 - (i) Client must ensure the confidentiality of 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 terminate this facility by giving 10 days prior notice.
5. Strike off whichever is not applicable.



FARSIGHT SECURITIES LTD.

Depository Participant : NSDL, DP - ID - IN301766 CDSL, DP - ID - 12056300

SEBI Regn No. (NSDL, CDSL) : IN-DP-579-2021

17-A/55, Farsight Triveni Plaza, Gurudwara Road, Karol Bagh, New Delhi-110005

EAPBX: 011-4504-4444 (30 Lines) Fax: 011-45044434 | E-mail : demat@farsightshares.com

Sl. No.	PARTICULARS	CORPORATE	INDIVIDUAL/HUF			
			A	B	C	BSDA
1.	Account Opening	NIL	NIL	NIL	NIL	NIL
2.	(i) Annual Maintenance	`500/- Per Annum	`1000/- Per Annum	`300/- Per Annum	1st Year `999 Subsequent year NIL	Nil (Value of holding upto `50,000/-) `100/- p.a. (Value of holding from `50,001/- to `200,000/-)
	(ii) Maintenance Charges By Depositories	`500/- Per Annum	NIL	NIL	NIL	NIL
3.	Transaction Charges					
	Delivery In-coming	NIL				
	Delivery Out-going (through Speed- E, POA)	`18/- per Trxn	`6/- per Trxn	`18/- per Trxn	`18/- per Trxn	`30/- per Trxn
4.	KRA/CKYC Modification	`250/- per modification			`100/- per modification	
5.	Dematerialisation	`20/- Plus `3/- per Certificate (Postage Charges `50/- Extra)				
6.	Rematerialisation	`20/- per certificate or `20/- for every certificate every 100 securities which ever is higher (Postage Charges `50/- Extra)				
7.	Instruction Booklet	`25/- for 10 Leaves (Postage charges `50/- extra)				
8.	Pledge Creation/ Closure/ Invocation	`50/- per Transaction				

N. B. :

- Any other services not specified above shall be charged extra.
- Rejection charges on failure of instruction `50/ per instruction shall be charged.
- Non - execution of delivery instruction due to any problem / error `50/- per communication / dispatch.
- Physical DIS execution charges `10/- per slip extra.
- Charges / Services standards are subject to revision at Depository Participants discretion after giving 30 days notice.
- In case of Demat rejection postage shall be charged @ 50/- for dispatch to the Client for removal of objection.
- In case of Non-Payment of the bill within 30 days from the date of bill, Interest @ 1.5% p.m. will be charged.
- The depository services are liable to be discontinued on such default. The renewal charges will be `100/-.
- Statements of accounts will be mailed by ordinary post only, at free of cost. Statements can be provided by courier with extra charges of `50/- per dispatch.
- Amount charged by NSDL/CDSL for CAS will be charge extra.
- Client Master Charge `50/- Per Request.
- Taxes and other government levies extra as applicable from time to

time.

- Charges for transaction value from `5 to 20 lac `50/- and transaction value above 20 lac `80/- per Instruction.
- DP reserves the right not to execute the delivery instruction in case service charges are outstanding.
- Client will maintain minimum `200/- as an advance payment which will be adjusted against future bills.
- `20/- per page for holding / transaction / financial accounts for extra statements.
- In case the value of the holdings in the BSDA account exceeds the prescribed criteria at any point of time; the regular tariff applicable to non BSDA accounts would be charged from that date onwards.
- The Annual Maintenance Charges are levied in advance at the beginning of the billing cycle.
- Margin Pledge transactions charge `50/- per instruction will be charged in all scheme.
- Please Place my /our Account under Scheme

A _____ / B _____ /
C _____ / BSDA _____ /

HOLDER'S SIGNATURES

(8) _____

First Holder

For Farsight Securities Ltd

(Authorised Signatory)

Second Holder

Third holder

Received Copy

(8.1) _____

Client(s) Signature

Explore INVESTMENT OPTIONS



Stocks



IPO



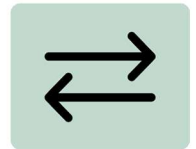
F&O



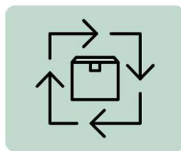
Mutual Funds



Intraday Trading



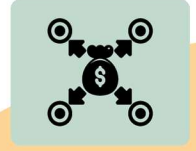
US stocks



Commodities



Debt Market/Bonds



ETF

Start your Investment journey with **FARSIGHT**

Proven Leadership: The Group has been promoted by **Dr. Naresh Maheshwari**, a financial luminary with a standing of 30 years. He brings unparalleled expertise, having served as the former President of ANMI, CPAI and DPAI (the National level bodies of Indian Stock Brokers, Custodians and Depository Participants). **Dr. Maheshwari** is a prolific commentator on capital market and economic issues and has chaired the ASIA Region of the International Forum for Investor Education (IFIE), showcasing India's leadership on the global stage. His leadership in the Asia Securities Forum (ASF) underscores his dedication to shaping the global capital market.

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FARSIGHT : GLORIOUS MOMENTS



**Dr. NC Maheshwari, Chairman-Farsight Securities Ltd,
Member core team - 18th Asia Securities Forum**



FARSIGHT SECURITIES LIMITED

MEMBER NSE, BSE, MCX
Depository Participant : NSDL, CDSL

SEBI REGN. NO.:
INZ000169935
IN-DP-579-2021

DATE:
23/03/2018
31/03/2021

Compliance Officer's Details

Name : Pawan Joshi
E-mail Id : compliance@farsightshares.com

CEO's Details

Name : Manju Maheshwari
E-mail Id : coo@farsightshares.com

Note: 1. Established in 1996 and registered with SEBI vide Certificate No.:
INB230853732 Dated-13-03-1996 For NSE

2. NSDL DP activated in 2000 vide SEBI registration No.: IN-NSDL-148-2000 in
Year 2000

17-A/55, Farsight Triveni Plaza, Gurudwara Road, Karol Bagh, New Delhi

For any grievance/dispute please contact FARSIGHT SECURITIES LIMITED at the above address or email id ig@farsightshares.com.
In case not satisfied with the response, please contact the concerned exchange(s) at

Exchange Name

National Stock Exchange of India Ltd.
Bombay Stock Exchange Ltd.

E-mail ID

ignse@nse.co.in
iscdelhi@bseindia.com

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For Website