MCX ACTIVATION LETTER

FARSIGHT SECURITIES LTD		
17A/55, Triveni Plaza,		
Gurudwara Road, Karol Bagh,		
New Delhi – 110005.		

Date:

Dear Sir,

Sub: Activation Trading Code - in MCX 10915 -

1. I am having a trading account in NSE / BSE. You are requested to please activate the same in MCX. All other Terms and Conditions like Brokerage, Settlement of Accounts, Inter-Settlement and Inter Exchange adjustments would remain the same.

Whereas I/We do hereby confirm that submitted POA with Farsight Securities Limited, Depository (DP Id IN 301766) also should be valid for pay-in / pay-out obligations / margin or any other requirements against of sales / purchase made by me / us through Farsight Securities Limited in Multi Commodity Exchange of India (MCX).

- 2. My running account authorization with Farsight securities for NSE/BSE will also be valid for MCX for quarterly settlement.
- 4. The above declaration and the guidelines on ECN given in the Annexure have been read and understood by me. I am aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same
- * (The email id must be written in handwriting of the client in case of commodity trading)

Thanking You Yours Faithfully,

Name and Signature

Enclosure: Additional Details

Code: _	Additional Details for activation in Commodities trading		
1.	INVESTMENT / TRADING EXPERIENCE		
	No Prior Experience		
	Years in Commodities		
	2 Years in other investment re	elated fields	
2.	SALES TAX REGISTRATION DETAILS (A Local Sales Tax State Registration No Validity Date Name of the State Central Sales Tax Registration No.		
	Validity Date	:	
	Other Sales Tax State Registration No		
	Validity Date	:	
	Name of the State	:	
3 V	AT DETAILS (As applicable, State wise) Local VAT Registration No. Validity Date Name of the State Other VAT Registration No. Name of the State Validity Date		
4. GST REGISTRATION DETAILS			
2 Local Sales Tax State Registration Validity Date			
② Central Sales Tax Registration Validity Date			
Other Sales Tax State Registration Validity Date			
	Name of the State GSTN No.		

Name and Signature: