Client Registration Form

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Name of Broker:			
Client Registration Number:[To be filled by Clearing Member]			
Applicable Commission [%]: Applicable Commission [%]:			
AE Name:			
AE Code: AE Address: Please affix and sign on the photograph			
AE Email:			
**TO BE FILLED BY INDIVIDUAL ONLY			
First Name Middle Name Last Name			
Name:	_		
Father's/Spouse Name:			
Date of Birth:Occupation:Occupation:			
Nationality/Residential Status:Passport No/Citizenship No.:			
Home Address: City:	_		
Pin Code: Email:			
Address for communication (if different from the Home Address):			
City:	_		
Pin Code: Email:	-		
TO BE FILLED BY COMPANIES/CORPORATION/PARTNERSHIP FIRM/			
PROPRIETORSHIP FIRM OR ANY OTHER ONLY			
Name:	_		
Date of Incorporation/Registration:[DD/MM/YYYY]			
Registered Office Address: City:			
Pin Code: Email:			
Address for communication (if different from the above):			
City:	_		
Pin Code: Email:	_		

Name of the Proprietor/Managing Director/Chairman/Chief Executive Officer:			
Name of the authorized person:			
Name of other Exchange(s) in which the applicant is/was a member:			
Name of other Exchange(s) in which any of the direct	ctor/partner/proprietor is/was a member:		
Permanent Account No.:			
Details of Bank Account:			
Name of Bank:			
Name in Bank record:	Branch:		
Account Type:	Account No.:		
TO BE FILLED FOR DSILVER ONLY			
Client Registration Number:	[To be filled by Clearing Member]		
Applicable Commission [%]:			
Name of Bank:			
Name in Bank record:	Branch:		
Account Type:	Account No.:		
DECLARATIONS:			
a) Whether the applicant wants to trade in	Normal Products DSILVER Both		
	the applicant or partners/directors/promoters of the		
applicant?	[]YES / []NO		
c) Whether the applicant or the partners/directors irregularities and subject to any disciplinary pro	s/promoters of the applicant is involved any financial occeedings? [] YES / [] NO		
d) Whether the applicant or partners/directors/promoters of the applicant were subject to any disciplinary proceedings in any other exchange. [] YES / [] NO			
e) Whether the applicant has read, understood a	and fully aware of the risk disclosure and terms and		
conditions of the agreement with Broker/CM?	[]YES / []NO		
(if answer is yes in clause (a) and (b) above, please furnish the details of such financial irregularities and/or disciplinary action in a separate sheet)			
arra, or alcolphilary action in a separate sheet)			

I/We hereby declare that the information furnished in this application is true and correct and the			
documents annexed with this application are true copies of its original. I/We undertake to inform the			
Broker / Clearing Member, in writing, immediately of any changes in the information furnished by me in			
this application. The Broker / Clearing Member or the Exchange will not be liable for any direct/indirect			
consequences arising on account of non intimation changes in the above information.			
I/We understand the contents of the Risk Disclosure Document and also agree to abide by the Bye-Laws			
and Rules of the Exchange.			
Signature: Thumb Print of Client:			
Place: Right Left			
Date:			
(Seal)			
DOCUMENTS TO BE SUBMITTED ALONG WITH THE CLIENT REGISTRATION FORM			
 Proof of Bank Account Number. Self certified photo copy of the PAN Card. 			
4. [] Resolution authorizing for application for registration and authorizing the signatory.			
5. [] Terms & Conditions for DSILVER only			
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Verified By:			
Name of Broker:			
Name of the Authorized person of Broker:			
Signature of Authorized person of Broker:			
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Date: Seal of Broker:			
Verified By:			
Name of CM:			
Name of the Authorized person of CM:			
Signature of Authorized person of CM:			
Date: Seal of CM:			