



*A broker you can trust...*

# ***Gopalji Broking Pvt. Ltd.***

**Member : BSE (Capital Market, F&O and Currency Derivative Segment)**  
**Depository Participant : CDSL**

Client Name.....

Client Code .....

Demat Account No. ....

Date of Registration.....



*A broker you can trust...*

*Dear Customer,*

*Welcome to Gopalji Broking!*

*We look forward to your becoming our client and to the pleasure of serving you. To start with, we request you to kindly fill up the relevant details and submit the required documents.*

*We have designed the form for ease of completion with simple instructions at relevant places to guide you along.*

*Should you face any difficulty in understanding the requirements, please do not hesitate to contact our staff who will be ever willing to assist/guide you.*

*It shall be our endeavor as always, to provide you truly satisfying services.*

*Regards,*

*Team Gopalji Broking Pvt. Ltd.*

**GOPALJI BROKING PVT. LTD.****CIN : U67120DL2004PTC127758**

Member : BSE (Capital Market, F&amp;O and Currency Derivative Segment)

SEBI Regn. No.: INZ000298037, Membership No. : 6754

Depository Participant : CDSL

SEBI Regn. No.: IN-DP-CDSL-598-2021 • DP ID : 12093100

**Compliance Officer's Name** : Miss Pooja Gupta

Ph.: +91-11-43027981

E-mail Id: pooja@gopaljibroking.com

**CEO's Name** : Mr. Surendra Kumar

Ph. : +91-11-43027981

E-mail Id: surendra@gopaljibroking.com

**Regd. & Corp. Office** : 203, Yamuna Tower, Saini Enclave, LSC, Delhi-110092

Ph.: +91-11-43027981, Fax : +91-11-43027981

E-mail : info@gopaljibroking.com Website : www.gopaljibroking.com

**CONTACT DETAIL FOR INVESTOR GRIEVANCES**

For any grievance/dispute please contact GOPALJI BROKING PVT LTD. at the above address or email id- info@gopaljibroking.com and Phone No. +91-11-43027981. In case not satisfied with the response, please contact the concerned exchange(s) at :

Exchange Name	E-mail ID	Phone No.
Bombay Stock Exchange Ltd.	is@bseindia.com	022-22728097
Central Depository Services (India) Ltd.	complaints@cdslindia.com	022-22723333, 18002005533

## INDEX OF DOCUMENTS

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1.	Account Opening Form	A. KYC Form - Part - I Documents captures the basic information about the constituent and instruction/check list (to be sent to KRA)	1 to 2
		B. KYC Form - Part - II Documents captures the additional information about the constituent relevant to trading account.	3 to 6
2.	Brokerage Structure	Document details the rate/amount of brokerage and other charges levied on the client for trading on the stock exchange(s) (to be added by the stock Broker)	7
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4.	Rights and Obligations	Document stating the Rights & Obligation of Stock Broker/Trading Member, Sub broker and client for Trading on exchanges (including additional Rights and Obligations in case of Internet/Wireless Technology based Trading)	Provided in soft or paper form as opted by client
5.	Risk Disclosure Document (RDD)	Documents detailing Risk associated with dealing in the Securities Market.	
6.	Guidance Note	Document detailing Do's & Don'ts for Trading on exchange, for the education for the investors.	
7.	Policies & Procedures	Documents describing significant policies and procedures of the stock broker (to be added by the stock broker)	
8.	Rights and Obligations of BO and Depository Participant	Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI & Depositories.	
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12.	Authorization for Electronic Contract Notes (ECN)	Authorization to member for issuing ECN and other documents in electronic form	13
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<b>PART - III ADDITIONAL DOCUMENTS FOR DEPOSITORY ACCOUNT</b>			
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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 is available at the end.  
 H) List of two character ISO 3166 country codes is available at the end.  
 I) KYC number of applicant is mandatory for update application.  
 J) The 'OTP based E-KYC' check box is to be checked to accounts opened using OTP based E-KYC in non-face to face mode.

**For office use only**

(To be filled by financial institution)

Application Type\*

☐ New☐ Update

KYC Number

(Mandatory for KYC update request)

Account Type\*

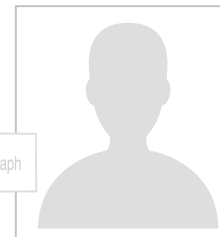
☐ Normal☐ Minor☐ Aadhaar OTP based E-KYC (in non-face to face mode)☐ **1. PERSONAL DETAILS** (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
PAN*	<input type="text"/>	<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

☐ **PHOTO\*****Address**

Line 1*	<input type="text"/>														
Line 2	<input type="text"/>														
Line 3	<input type="text"/>														
District*	<input type="text"/>	Pin / Post Code*	<input type="text"/>	State / U.T Code*	<input type="text"/>	ISO 3166 Country Code*	<input type="text"/>	City / Town / Village*	<input type="text"/>						

☐ **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 to 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 KYC details furnished by me are true and correct to the best of my knowledge and belief and I under-take 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 KRA/CERSAI (CKYC) through SMS/Email on the above registered number/Email address.
- I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.



Signature / Thumb Impression of Applicant

Date : 

D	D	-	M	M	-	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

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    ☐ Digilocker Verified

**KYC VERIFICATION CARRIED OUT BY**

Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y										
D	D	M	M	Y	Y	Y	Y												
Emp. Name	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																		
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[Employee Signature]

**INSTITUTION DETAILS**
Name **Gopalji Broking Pvt. Ltd.**  
Code

[Institution Stamp]





## ADDITIONAL DETAILS FOR TRADING ACCOUNT (FOR INDIVIDUALS)

### A. BANK ACCOUNT(S) DETAILS

Bank Name	Branch Address	Account Number	Account Type	MICR Number	IFSC Code
			<input type="checkbox"/> Saving <input type="checkbox"/> Current		
			<input type="checkbox"/> Saving <input type="checkbox"/> Current		

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

### B. DEPOSITORY ACCOUNT(S) DETAILS (THROUGH WHICH TRANSACTIONS SHALL GENERALLY BE ROUTED)

Depository Participant Name	Name of Depository	Beneficiary Name	DP ID	Beneficiary ID (BO ID)
<b>Gopalji Broking Pvt. Ltd.</b>	<input type="checkbox"/> NSDL <input checked="" type="checkbox"/> CDSL		1 2 0 9 3 1 0 0	
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			

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

### C. TRADING PREFERENCES

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

#### Market Segment/s

<input type="checkbox"/> BSE Cash	<input type="checkbox"/> BSE F&O	<input type="checkbox"/> BSE CDS
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### ONLINE / OFFLINE PREFERENCES

Capital Market (BSE), Derivative (BSE)	<input type="checkbox"/> Offline <input type="checkbox"/> Online
--	--

### D. FINANCIAL & OCCUPATION DETAILS

Gross Annual Income Details: Income Range per annum :

☐ Below Rs. 1 Lac 
 ☐ Rs. 1 Lac to 5 Lac 
 ☐ Rs. 5 Lac to 10 Lac 
 ☐ Rs. 10 Lac to 25 Lac 
 ☐ Rs. 25 Lac to 1 Crore 
 ☐ >1 Crore

Net Worth (Net worth should not be older than 1 year) Amount Rs .....  
as on (date).....(Compulsory for Non-Individuals)

Please tick, if applicable (Note : In case of Non-individuals please tick, if applicable for any of your authorised signatories/ Promoters/Partners/Karta/Trustees/whole time directors) :

☐ Politically Exposed Person (PEP) 
 ☐ Related to Politically Exposed Person (PEP)

Any other information\_\_\_\_\_

Family Code Group (if any)\_\_\_\_\_

**E. 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 :

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**F. ADDITIONAL DETAILS**

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 avail of the facility of internet trading/ wireless technology (please specify) : ☐ YES ☐ NO

Number of years of Investment/Trading Experience :

**G. INTRODUCER DETAILS (optional)**

Name of the introducer

Status of the Introducer    Remisier ☐    Auth. Person ☐    Existing Client ☐    Others ☐

Address and Ph. No. of the Introducer

Sign. of the Introducer

**PMLA DECLARATION**

I \_\_\_\_\_ having the trading code no. \_\_\_\_\_ with GBPL confirm and declare that I have read and understood the contents and the provisions of the PMLA Act, 2002 and it was also explained by GBPL official. I further declare that I shall adhere to the rules and regulations and requirements mentioned in the PMLA Act, 2002.

**DECLARATION**

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. 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' designated website, if any.

Place \_\_\_\_\_

Date \_\_\_\_\_

Client Signature





**NOMINATION FORM - TRADING AND DEMAT ACCOUNTS****(Annexure-A)***(To be filled in by individual applying singly or jointly)***Gopalji Broking Pvt. Ltd.**

Regd. &amp; Corp. Office : 203, Yamuna Tower, Saini Enclave, LSC, Delhi-110092

DATE	D	D	M	M	Y	Y	Y	Y	UCC							
DP ID									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 securities held in the Depository by me/us in the said beneficiary owner 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 [If not equally, please specify percentage]	%	%	%
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 <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			

**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 nominee(s)			

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 <input type="checkbox"/> AADHAAR <input type="checkbox"/> Saving Bank A/c No. <input type="checkbox"/> 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.  
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).

### DECLARATION FORM FOR OPTING OUT OF NOMINATION

(Annexure-B)

To,

**Gopalji Broking Pvt. Ltd.**

Regd. & Corp. Office : 203, Yamuna Tower,  
Saini Enclave, LSC, Delhi-110092

DATE	D	D	M	M	Y	Y	Y	Y	UCC								
DP ID									Client ID								

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.



Signature of Sole/First Holder

Signature of Second Holder

Signature of Third Holder

## BROKERAGE STRUCTURE

## CAPITAL MARKET SEGMENT

Brokerage Slab	Slab in %	Minimum per Share
Delivery Based		
Square Off		

## F &amp; O SEGMENT

Brokerage Slab	Slab in %	Delivery	Minimum per Lot
Future			
Options			

## CURRENCY DERIVATIVES SEGMENT

Brokerage	Slab in %	Minimum Brokerage per Lot

## OTHER CHARGES

In addition to brokerage defined hereinabove, clients shall also be required to pay following additional charges which are subject to change from time to time:

**Charges levied by Central Government, State Governments, SEBI, Stock Exchanges, Clearing Member and/or other Statutory / Legal Authorities:**

- Securities Transaction Tax;
- Stamp Duty;
- GST;
- SEBI Turnover Fees;
- Stock Exchange's Transaction Charges with GST;
- Clearing charges charged by Clearing Corporation / Clearing Member with GST;

**Other Charges \*\***

- Late pay-in/delayed payment charges upto 24% p.a.
- All such charges / penalties that may be levied upon Gopalji Broking Pvt. Ltd. by stock exchanges/SEBI/any other statutory authority due to any act/ommission/negligence, whether wilful or otherwise, on part of the client
- In addition to the above, appropriate charges shall also be levied for all such services/facilities that may be availed by the client in addition to services/facilities as per defined Rights and Obligations

\*\* GST at applicable rates shall additionally be levied on all of these charges



(Signature of Client)

## DISCLOSURE OF PROPRIETARY TRADING BY GOPALJI BROKING PVT. LTD.

Dear Client,

In term of SEBI circular No. SEBI/MRD/SEC/Cir-42/2003 dated 19th November, 2003, member is required to disclose to its client about the proprietary trades.

In view of this circular, we wish to inform you that, we do proprietary trades in the Cash, F&O and Currency Derivative segment of BSE.

I have noted the above \_\_\_\_\_



(Signature of Client)

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

PAN	<input type="text"/>	Trading Code	<input type="text"/>	DP BO ID	<input type="text"/>
Name	<input type="text"/>				
Place of Birth	<input type="text"/>	Country of Birth	<input type="text"/>		
Nationality	<input type="text"/>				
Annual Income	<input type="checkbox"/> Below Rs. 1 Lac	<input type="checkbox"/> Rs. 1 Lac to 5 Lac	<input type="checkbox"/> Rs. 5 Lac to 10 Lac		
	<input type="checkbox"/> Rs. 10 Lac to 25 Lac	<input type="checkbox"/> Rs. 25 Lac to 1 Crore	<input type="checkbox"/> >1 Crore		

Occupational ☐ Business ☐ Private Sector ☐ Professional ☐ Government Service ☐ Public Sector  
Detail ☐ Agriculturist ☐ Housewife ☐ Student ☐ Retired ☐ Forex Dealer ☐ Others Pl. Specify

Politically Exposed Person (PEP) ☐      Related to Politically Exposed Person (RPEP) ☐

Are you a tax resident of any country other than India ☐ Yes ☐ No

If yes please indicates the all countries in which you are resident for tax purpose and the associated Tax ID number below.

Sr. No.	Country	Tax Identification Number	Identification Type (TIN or Other, please specify)
1.			
2.			
3.			

I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform Gopalji Broking Pvt. Ltd. for any modification to this information promptly.

I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic Exchange of Information (AEOI).

Client Signature 

Date : 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

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

For Investor convenience, Gopalji Broking Pvt. Ltd. (GBPL) collecting this mandatory information for updating across all Group Companies of GBPL whether you are already an investor or would become an investor in future.

Please submit the form fully filled, signed, for all the holders, separately, and submit at your nearest GBPL branch or you can dispatch the hard copy to-

**Gopalji Broking Pvt. Ltd.**

**Regd. & Corp. Office : 203, Yamuna Tower, Saini Enclave, LSC, Delhi-110092**

• For Detail Terms & Conditions please visit [www.gopalijbroking.com](http://www.gopalijbroking.com)

## LETTER FOR NSE MFSS / BSE STAR MF

From \_\_\_\_\_

To,

**Gopalji Broking Pvt. Ltd.**

Regd. &amp; Corp. Office : 203, Yamuna Tower,

Saini Enclave, LSC, Delhi-110092

Dear Sir,

Dated \_\_\_\_\_

**Sub: Mutual Fund Service System (MFSS) facility of NSE/BSE STAR MF**

I / We am / are registered as your client with Client Code as mentioned below for the purpose of trading in the Capital Market Segment.

I / We am / are interested in availing the facility of the following Exchange for the purpose of dealing in the units of Mutual funds Scheme permitted to be dealt with.

NSE MFSS ☐ BSE STAR MF ☐

For the purpose of availing the facility, I / We state that Know Your Client details as submitted by me/us for the securities broking may be considered for this purpose and I / We further confirm that the details contained in same remain unchanged as on date.

I / We am / are willing to abide by the terms and conditions as mentioned in the Circular dated November 24, 2009 and as may be specified by the Exchange from time to time in this regard.

I / We shall also ensure compliance with the requirements as may be specified from time to time by the Securities and Exchange Board of India and/ or Association of Mutual Funds of India (AMFI).

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


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

**Terms and Conditions**

1. The client shall be bound by circulars issued by NSEIL/ BSE, Rules, Regulations and circulars issued there under by SEBI and relevant notifications of Government authorities as may be in force from time to time.
2. The client shall notify the Participant in writing if there is any change in the information in the 'client registration form' provided by the client to the Participant at the time registering as a client for participating in the New MFSS/ BSE STAR MF or at any time thereafter.
3. The client shall submit to the Participant a completed application form in the manner prescribed format for the purpose of placing a subscription order with the Participant.
4. The client has read and understood the risks involved in investing in Mutual Fund Schemes.
5. The client shall be wholly responsible for all his investment decisions and instruction.
6. The client shall ensure continuous compliance with the requirements of the NSEIL, BSE, SEBI and AMFI.
7. The Client shall pay to the Participant fees and statutory levies as are prevailing from time to time and as they apply to the Client's account, transactions and to the services that Participant renders to the Client.
8. The client will furnish information to the Participant in writing, if any winding up petition or insolvency petition has been filed or any winding up or insolvency order or decree or award is passed against him or if any litigation which may have material bearing on his capacity has been filed against him.
9. In the event of non-performance of the obligation by the Participant, the client is not entitled to claim any compensation either from the Investor Protection Fund or from any fund of NSEIL/ BSE or NSCCL/ ICCL
10. In case of any dispute between the Participants and the investors arising out of this facility, NSEIL/BSE and / or NSCCL/ ICCL agrees to extend the necessary support for the speedy redressal of the disputes.

Thanking You.

Yours faithfully

Signature: 

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

Note: Signature required in case opted for NSE MFSS or BSE STAR MF on Trading Account details page

## LETTER OF AUTHORISATION

To,  
**Gopalji Broking Pvt. Ltd.**

Dated \_\_\_\_\_

Regd. & Corp. Office : 203, Yamuna Tower,  
Saini Enclave, LSC, Delhi-110092

**Sub : Letter of Authority - BSE**

I/We am/are dealing in shares/securities with you at BSE in various segments and in order to facilitate ease of operations. We authorize you as under :

**1. Delivery of order/trade confirmation/cancellation :**

I/We hereby authorize you not to provide me / us order confirmation / Modification / Cancellation Slips and Trade Confirmation slips to avoid unnecessary paper work. I/we shall get the required details from contract notes and confirmation issued by you.

**2. Telephonic Conversation :**

I/We request you to consider my/our telephonic instructions for order placing/order modification/order cancellation as a written instruction and give us all the confirmation on telephone unless instructed otherwise in writing. I/We am/are getting required details from contracts issued by you.

**3. Adjustment of balance in Family Accounts :**

Sl. No.	Client Code of Family Members/Associates	Name of Family Members /Associates	Category	Name of Father / Spouse

I/We authorize you to adjust the credit balance available in my account of any segment, against any margin obligation of any other segment outstanding in my or any of the account of above mentioned family members or any other party or company with whom / in which I'm interested as the director (Name given below). I further understand that the above adjustment shall not be valid for monthly / quarterly settlement of accounts.

.....

.....

.....

**4. Set off of outstanding:**

I/We authorize you to set off outstanding in any of my / our accounts against credits available or arising in any other accounts maintained with you irrespective of the fact that such credits in the accounts may pertain to transactions in any segment of the Exchange and / or against the value of cash margin or collateral shares provided to you by me / us. I further authorise you to debit the financial charges @ 18% per annum of the outstanding debit balance, if any, in my account and not settled as per the exchange requirement.

**5. Fines & Penalties :**

All fines/penalties and charges levied upon you due to my acts / deeds or transactions may be recovered by you from my account.

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



## 6. Charges & Balance Maintenance :

I/We have a Trading As well as depository relationship with Gopalji Broking Pvt. Ltd. Please debit the charges relevant with depository services from my/our trading account on monthly basis. I/We also agree to maintain the adequate balance in my/our trading account / pay adequate advance fee for the said reason.

## 7. Authority for intimation

I/ we shall authorise you to send SMS and email to registered email/ mobile no. in respect of my Trading and Demat account.

## 8. Facsimile Authorisation

During the operation of my trading I may require to place order instructions through Fax/Scan, I therefore authorise you to honor the instruction and orders send through Fax/Scan copy send by me/ us.

## 9. Pro Trading Intimation :

I/We have been informed that GBPL is doing Pro trading in addition to trading for clients.

10. I/We have been explained that I/We may not opt to give any of the above authorisation and that the above authorisations are voluntary on my/our part and that I/We can revoke this authorisation at any point of time during the operation of my/our trading account with you by giving you a notice in writing.

## For and On Behalf of Constituent

Thanking you,

Yours faithfully

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

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

To,

**Gopalji Broking Pvt. Ltd.**

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

Regd. & Corp. Office : 203, Yamuna Tower,  
Saini Enclave, LSC, Delhi-110092

Dear Sir,

In terms of SEBI Circular No. CIR/MIRSD/64/2016 dated July 12, 2016, I/We have the option of receiving the following documents either electronically or physically:

- Rights & Obligations of stock broker, auth. person and client for trading on exchanges (including additional rights & obligations in case of internet/ wireless technology based trading);
- Rights and Obligations of beneficial owner and depository participant as prescribed by SEBI and depositories;
- Uniform Risk Disclosure Documents (for all segments/ exchanges); and
- Guidance Note detailing Do's and Don'ts for trading on stock exchanges.
- Policies and Procedures as per SEBI Circular No. MIRSD/SE/CIR-19/2009 dated 03rd December, 2009

Accordingly, I wish to receive the abovesaid documents in the below mentioned manner:

☐ Electronically ☐ Physically

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

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

**RUNNING ACCOUNT AUTHORISATION**

**(Kindly note that these additional clause(s)/ documentation(s) are voluntary and at the discretion of the stock broker and the client. The same are required for maintaining the account of the Client on a running basis. The client need not execute this document if he / she does not wish to. The client has the right to terminate the document, in which eventuality; the stock broker shall maintain the account of the client on a settlement basis)**

To,

**Gopalji Broking Pvt. Ltd.**Regd. & Corp. Office : 203, Yamuna Tower,  
Saini Enclave, LSC, Delhi-110092

Dated \_\_\_\_\_

**Sub : Running Account Authorisation**

I/ we / are/ shall be maintaining a trading account with you for the purpose of doing trading transactions and in order to facilitate ease of operations. I/ we authorize you as under:

1. My/ our trading account w.r.t funds transactions may please be maintained on a running basis i.e. the funds pay out due to me/ us on the date of pay- out may be retained with your good selves and adjusted towards my/ our future margin obligations and/ or funds pay-in obligations.
2. While settling my/ our trading account on a periodical basis, you may retain my/ our funds only to such extent as may be allowed as per applicable directives/ guidelines issued by Stock Exchanges/. SEBI.
3. I/ we confirm that I/ we shall bring to your notice all the discrepancies/ disputes, if any, arising out of statements sent to me/ us at the time of my/ our periodical settlement, within a period of 30 working days from the date of such statements.
4. I/ we reserve my/ our right to revoke this authorization at any time without any prior notice by submitting a written request with your goodselves:
5. I/ we would prefer to get my/ our trading account actually settled as per the periodicity indicated herein after:

☐ Once in every 30 days☐ Once in every 90 days

Thanking you

Yours faithfully,

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

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

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

**AUTHORISATION FOR ELECTRONIC CONTRACT NOTES**

To,  
**Gopalji Broking Pvt. Ltd.**

Dated \_\_\_\_\_

Regd. & Corp. Office : 203, Yamuna Tower,  
Saini Enclave, LSC, Delhi-110092

I/We have been/shall be dealing through you as may/our broker on the Capital Market Segment and/or F&O Segment and/or Currency Derivatives Segment and/or Interest Rate Futures Segments and/or Commodity Future and Options Segment. As my/our broker i.e. agent I/We direct and authorize you to carry out trading/dealings on my/our behalf as per instructions given below.

I/We understand that, I/We have the option to receive the contract notes/financial ledger/security ledger/margin statement and other documents in physical form or electronic form. In pursuance of the same, I/We hereby opt to receive contract notes/financial ledger/security ledger/margin statement and other documents in electronic form. I/We understand that for the above purpose, you are required to take from the client "an appropriate email account" for you to send the contract notes/financial ledger/security ledger/margin statement and other documents. Accordingly, please take the following email account(s)/email id on your record for sending the contract notes to me/us.

1. \_\_\_\_\_

2. \_\_\_\_\_

I/We also agree that non-receipt of bounced mail notification by you shall amount to delivery at my/our email account(s)/ email id(s).

I/We agree that the log reports of your dispatching software shall be a conclusive proof of dispatch of contract notes to me/us and such dispatch shall be deemed to mean receipt by me/us and shall not be disputed by me/us.

I/We understand that I/we am/are required to intimate any change in the email id/email account mentioned herein above needs to be communicated by me/us through a physical letter to you, provided however that if I/We am/are an internet client then in that event the request for change in email id/email account can be made by me/us through a secured access using client specific user id and password.

Please treat this authorization as written ratification of my/our verbal directions/authorizations given and carried out by you earlier.

I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions given above.

This authorisation is voluntary & can be revoked at any time by giving notice in writing.

Thanking you,

Yours faithfully

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

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

## DECLARATION, INDEMNITY CUM UNDERTAKING FOR NAME DISCREPANCY IN PAN CARD, BANK PROOF & ADDRESS PROOF

To,

**Gopalji Broking Pvt. Ltd.**

Dated \_\_\_\_\_

Regd. & Corp. Office : 203, Yamuna Tower,  
Saini Enclave, LSC, Delhi-110092

I, \_\_\_\_\_ s/o., w/o., d/o \_\_\_\_\_  
\_\_\_\_\_, refer to my Trading and Demat Account \_\_\_\_\_  
with Gopalji Broking Pvt. Ltd. (GBPL) do hereby affirm, declare and undertake that

1. That my name as it appears on my trading account is \_\_\_\_\_
2. That my name as it appears on my demat account is \_\_\_\_\_
3. That my name as it appears on the Income Tax website is \_\_\_\_\_
4. That my name as it appears on the Address proof is \_\_\_\_\_
5. That my name as it appears on my Pan Card is \_\_\_\_\_
6. That my name as it appears on the Bank Proof is \_\_\_\_\_
7. That my name as it appears on my Aadhaar Card is \_\_\_\_\_
8. That above mentioned names, on Trading account, Demat account, Income Tax website, Address proof, Aadhaar, PAN Card No. \_\_\_\_\_ and Bank account bearing no. \_\_\_\_\_ are mine alone.
9. That I hereby request GBPL to maintain my name in Demat and trading account as per the name appearing on the income tax website/ PAN Card.
10. That I promise and undertake to get my PAN card altered in accordance with my name as appearing on the Income tax within 45 days from the date of signing this undertaking. GBPL may, at its sole discretions, terminate my trading and demat account in the event of me not getting my name altered within 45 days of signing this undertaking.
11. That I further undertake to open a bank account in accordance with the name as appearing on the income tax website within a week from the date of signing this undertaking.
12. I further undertake that in case my name has been changed after approval from government authorities and notification gazette. I shall get the name change effected in PAN, Bank account etc. and furnish immediately to GBPL.
13. That I further declare that I am responsible and I shall indemnify & keep indemnified GBPL, its directors, officers, employees, agents from and against any all losses, claims liabilities, obligations, damages, deficiencies, judgments, action proceedings arising out or in relation to corporate benefits, IPO refund, Foreign exchange Management Act (FEMA) transfer, dematerialization of securities, rematerialization of securities, dividends, interest etc., that may arise out Declaration-cum-undertaking and/or acting on this basis.

That the contents of this declaration, indemnity-cum-undertaking have been explained to me in vernacular and I have understood before signing it. That the declaration, indemnity-cum-undertaking given by me to GBPL is by my absolute free will and coercion, undue influence, pressure etc., and at present I am having sound health and mind.

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

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

## ADDITIONAL DETAILS FOR OPENING A DEMAT ACCOUNT (FOR INDIVIDUAL)

### IDENTITY DETAILS

Application No.		Date							
DP Internal Reference No.									
DP ID	<b>12093100</b>	Client ID							

### HOLDERS DETAILS

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

Name\*

\*In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.

### TYPE OF ACCOUNT (Please tick whichever is applicable)

<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)	

### DETAILS OF GUARDIAN (in case the account holder is minor)

Guardian's Name		PAN	
Relationship with the applicant			


I/We instruct the DP to receive each and every credit in my/our account (if not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I/We would like to instruct the DP to accept all the pledge instructions in my/our account without any other further instruction from my/our end (if not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/>
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)	
Do you wish to receive dividend/interest directly in to your 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

**BANK DETAILS (Dividend Bank Details)**

Bank Code (9 digit MICR Code)			
IFS Code (11 Character)			
Account Number			
Account Type	Saving <input type="checkbox"/>	Current <input type="checkbox"/>	Others (specify) <input type="checkbox"/>
Bank Name			
Branch Name			
Bank Branch Address			
	City	State	Country
PIN			
1. Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or) 2. Photocopy of the Bank Statement having name and address of the BO. 3. Photocopy of the Passbook having name and address of the BO, (or) 4. Letter from the Bank. In case of option (ii), (iii) and (iv) above, MICR Code of the branch should be present/mentioned on the document.			
SMS Alert Facility Refer to Terms & Conditions given as Annexure 2.4	MOBILE No.: +91-.....		<input type="checkbox"/> Yes <input type="checkbox"/> No
[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).			
Transaction 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)
Easi	To register for easi, please visit our website <a href="http://www.cdslindia.com">www.cdslindia.com</a> . Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online.		

**DECLARATION**

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.

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signature			

(Signatures should be preferably in Black ink)



## Gopalji Broking Pvt. Ltd.

(Depository Participant - CDSL) DPID : 12093100, DP SEBI Regn. No. IN-DP-CDSL-598-2021

Regd. & Corp. Office : 203, Yamuna Tower, Saini Enclave, LSC, Delhi-110092

Ph.: +91-11-43027981, Fax : +91-11-43027981, E-mail : info@gopaljibroking.com

### Terms & Conditions-Cum-Registration / Modification Form for receiving SMS Alerts from CDSL

(SMS Alerts will be sent by CDSL to BOs for all debits)

#### Definitions:

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

#### Fees, Charges and deposits

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Tower, Dalal Street, Fort, Mumbai-400001 and all its branch offices and includes its successors and assigns.
2. 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. 'BO' means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. 'Alerts' means a customized SMS sent to the BO over the said mobile phone number.
6. 'Service Provider' means a cellular service provider(s) with whom the depository has entered/will be entering into an arrangement for providing the SMS alerts to the BO.
7. 'Service' means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

#### Availability:

1. The service will be provided to the BO at his/her request and at the discretion of the depository. The service will be available to those account holders who have provided their mobile numbers to the depository through their DP. The service may be discontinued for a specific period/indefinite period with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository.

In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

#### Receiving Alerts:

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

9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.

**Fees:**

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

**Disclaimer:**

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warrant the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository will not be liable for any unauthorized use or access to the information and/or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by an third person.

I/We wish to avail the SMS Alerts facility provided by the depository on my/our mobile number provided in the registration form subject to the terms and conditions mentioned below. I/We consent to CDSL providing to the service provider such information pertaining to account/transactions in my/our account as is necessary for the purpose of generating SMS Alerts by service provider, to be sent to the said mobile number.

I/We have read and understood the terms and conditions mentioned above and agree to abide by them and any amendments thereto made by the depository from time to time. I/we further undertake to pay fee/charges as may be levied by the depository from time to time.

I/We further understand that the SMS alerts would be sent for a maximum four ISINs at a time. If more than four debits take place, the BOs would be required to take up the matter with their DP.

I/We am/are aware that more acceptance of the registration form does not imply in any way that the request has been accepted by the depository for providing the service.

DP ID	<b>12093100</b>
BO Id	
Sole/First Holder's Name	
Second Holder's Name	
Third Holder's Name	
Mobile No. on which messages are to be sent (Please write only the mobile number without prefixing country code or zero)	
The Mobile Number is registered in the name of	
(Please write only ONE valid Email Id on which communication; if any, is to be sent)	




---

 Signature of Sole/First Holder

---

 Signature of Second Holder

---

 Signature of Third Holder

**IN CASE OF JOINT HOLDING, ALL JOINT HOLDERS MUST SIGN.**

**\*Please do not use correction fluid, all cuttings must be attested by all the joint holder(s).**

Place : Delhi

Date : \_\_\_\_/\_\_\_\_/20\_\_\_\_

## SMS / E-MAIL ALERT DECLARATION FORM

To,  
**Gopalji Broking Pvt. Ltd.**  
 Regd. & Corp. Office : 203, Yamuna Tower,  
 Saini Enclave, LSC, Delhi-110092

**Subject : Trading Account No. \_\_\_\_\_ and Demat Account No.**

Dear Sir / Madam,

I/We, Mr./Mrs./M/s. \_\_\_\_\_ would like to Email/SMS alerts and other communications with respect to the captioned account(s) from Exchange/Depository/DP/Trading Member.

Please update my/my family member's below mentioned Email Id and/or Mobile No. in my trading account / Demat Account.

Email Id : \_\_\_\_\_

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

My relationship with the holder of above Email Id & Mobile No. is an mentioned below.

• Self	• Spouse	• Dependent Child	• Dependent Parent	
--------	----------	-------------------	--------------------	--

Master PAN (Applicable if relationship is other than self, PAN of the individual holding the above Mobile Number and / or Email id is to be provided)

However, in case of any further regulatory requirements, I/we undertake to abide upon hearing from you.

Thanking You,

Yours truly,

Signature of the Account Holder

Name of the Account Holder :

**Note:**

- On successful registration the Exchange may seek confirmation by way of Email/SMS which needs to responded to get the Email/SMS alerts and other information.
- This form is applicable for individuals only.

## OPTION FORM FOR ISSUE OF DIS BOOKLET

Date	D	D	M	M	Y	Y	Y	Y
------	---	---	---	---	---	---	---	---

DP ID	1	2	0	9	3	1	0	0	Client ID								
First Holder Name																	
Second Holder Name																	
Third Holder Name																	

To,  
**Gopalji Broking Pvt. Ltd.**  
 Regd. & Corp. Office : 203, Yamuna Tower,  
 Saini Enclave, LSC, Delhi-110092


Dear Sir / Madam,

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

☐ **OPTION 1 :**

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

Yours faithfully


	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

**OR**

☐ **OPTION 2 :**

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

Yours faithfully

	First / Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

## DECLARATION FOR AVAILING OF BASIC SERVICE DEMAT ACCOUNT (BSDA) FACILITY

To,

**GOPAL JI BROKING PVT. LTD.**

Regd. &amp; Corp. Office : 203, Yamuna Tower,

Saini Enclave, LSC, Delhi-110092

Date	D	D	M	M	Y	Y	Y	Y
------	---	---	---	---	---	---	---	---

Dear Sir / Madam,

- ☐ I / We wish to avail the BSDA facility for the new account for which we have submitted my / our account opening form.
- ☐ I / We do not wish to avail the BSDA facility for the new account for which we have submitted my / our account opening form.
- ☐ I / We wish to avail the BSDA facility for my / our below mentioned demat account number.
- ☐ I / We do not wish to avail the BSDA facility for my / our below mentioned demat account number.

Application No.	
-----------------	--




DP ID	1	2	0	9	3	1	0	0	Client ID							
-------	---	---	---	---	---	---	---	---	-----------	--	--	--	--	--	--	--

	NAME	PAN
Sole/First Holder		
Second Holder		
Third Holder		

I/We have read and understood the regulatory (SEBI) guidelines for opening a Basic Services Demat Account and undertake to comply with the aforesaid guidelines from time to time. I/We also undertake to comply with the guidelines issued by any such authority for BSDA facility from time to time. I/We also agree that in case our demat account opened / converted under BSDA facility does not meet the eligibility for BSDA facility as per guidelines issued by SEBI or any such authority at any point of time, my/our BSDA account will be converted to regular demat account without further reference to me/us and will be levied charges as applicable to regular accounts as informed by the DP.

I/We wish to avail the SMS Alert Facility provided by Depository on +91\_\_\_\_\_ My/our mobile No.

I, the first / Sole holder also hereby declare that I do not have / propose to have any other demat Account across depositories as a first / sole holder.

	Signature
Sole/First Holder	
Second Holder	
Third Holder	

## SCHEDULE OF SERVICES CHARGES FOR DP SERVICES

SCHEME	SCHEME - A	SCHEME - B (For Individual A/c only) Rs. 1000/- (Non Refundable) for Nil Life Time AMC
1. Account Opening Charges	Nil	Nil
2. Account Maintenance Charges	Rs. 200/- per annum (For Individual Account) Rs. 1500/- per annum (For Corporate Account)	Nil
3. Stamp Paper & KRA Charges	As per applicable	As per applicable
4. Dematerialisation Charges	Rs. 50/- Per DRF plus Rs. 5/- per certificate plus courier charges	Rs. 50/- Per DRF plus Rs. 5/- per certificate plus courier charges
5. Rematerialisation Charges	Rs. 25/- per every 100 securities or part thereof; or a flat fee of Rs. 20/- per certificate whichever is higher will be payable plus courier charges	Rs. 25/- per every 100 securities or part thereof; or a flat fee of Rs. 20/- per certificate whichever is higher will be payable plus courier charges
6. Custody	Nil	Nil
7. Transaction Charges (per transaction) (a) Receipt/Purchase (b) Delivery/Sale	Nil 0.01% (Minimum Rs.15/-)	Nil 0.01% (Minimum Rs.15/-)
8. Pledge Charges (per transaction) Creation Invocation/Closure	Rs. 50/-	Rs. 50/-
9. Margin Pledge per transaction/ Release of Margin Pledge Margin Re-Pledge per transaction/ Release of Margin Re-Pledge	Rs. 15/-  Rs. 10/-	Rs. 15/-  Rs. 10/-
10. Easiest Subscribers (Password User)	Rs. 100/- p.a.	Rs. 100/- p.a.
11. Instruction Booklet (1st Book Free)	Rs. 40/- plus courier charges	Rs. 40/- plus courier charges

**In addition to the above, the following out of pocket expenses shall also be charged.**

- Failed Instruction Intimation : Rs. 20/- per intimation per instruction
- Additional Statement of Holding/Transaction : Rs. 5/- per page + Postage as per actuals.
- Incase of demat rejection, postage charges shall be charged @ Rs. 35/- for dispatch of share certificates to the clients.
- Any Modification in client master will be charged @ Rs. 50/- per modification.
- Any other services not specified above shall be charged extra.
- Taxes and other government fee/charges shall be levied extra, as applicable from to time.
- Charges for DP services in respect of clients having trading account/s with GOPALJI BROKING PVT. LTD. will be debited to their trading accounts.
- Late payment charges @ 24% p.a. shall be levied.
- GOPALJI BROKING PVT. LTD. may suspend/freeze the depository services of the account holder in case of non-payment of outstanding bill till the time of actual clearance of debit balance.
- Above charges are subject to revision as per GOPALJI BROKING PVT. LTD. sole discretion after providing 30 days' prior notice.

Please Tick : ☐ Scheme - A ☐ Scheme - B







Signature of Sole/First Holder

Signature of Second Holder

Signature of Third Holder



## DEMAT DEBIT AND PLEDGE INSTRUCTION (DDPI)

Purpose 1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement obligations arising out of trades executed by clients on the Stock Exchange through the same stock broker	Signature of Sole/First Holder 
		Signature of Second Holder
		Signature of Third Holder
Purpose 2	Pledging / re-pledging of securities in favour of M/S Gopalji Broking Pvt. Ltd. as a trading member (TM) / clearing member (CM) for the purpose of meeting margin requirements of the clients in connection with the trades executed by the clients on the Stock Exchange.	Signature of Sole/First Holder 
		Signature of Second Holder
		Signature of Third Holder
Purpose 3	Mutual Fund transactions being executed on Stock Exchange order entry platforms	Signature of Sole/First Holder 
		Signature of Second Holder
		Signature of Third Holder
Purpose 4	Tendering shares in open offers through Stock Exchange platforms	Signature of Sole/First Holder 
		Signature of Second Holder
		Signature of Third Holder



Broker/Agent Code ARN: 128856		SUB-BROKER:		EUIIN: 210574	
<b>Unit Holder Information</b>					
<b>Name of the First Applicant :</b>					
PAN Number :		KYC:		Date of Birth :	
Father Name :			Mother Name :		
Name of Guardian :			PAN :		
<b>Contact Address :</b>					
City :		Pincode :		State : Country :	
Tel.(Off) :		Tel.(Res) :		Email :	
Fax (Off) :		Fax (Res) :		Mobile :	
Income Tax Slab/Networth :			Occupation Details		
Place of Birth :		Country of Tax Residence :			
Tax Id No. :					
Politically exposed person / Related to Politically exposed person etc.?				Yes	No
Mode of Holding :			Occupation :		
<b>Name of Second Applicant :</b>					
PAN Number :		KYC:		Date of Birth :	
Income Tax Slab/Networth :			Occupation Details		
Place of Birth :		Country of Tax Residence :			
Tax Id No. :					
Politically exposed person / Related to Politically exposed person etc.?				Yes	No
<b>Name of Third Applicant :</b>					
PAN Number :		KYC:		Date of Birth :	
Income Tax Slab/Networth :			Occupation Details		
Place of Birth :		Country of Tax Residence :			
Tax Id No. :					
Politically exposed person / Related to Politically exposed person etc.?				Yes	No
<b>Other Details of Sole/ 1st Applicant</b>					
<b>Overseas Address :</b>					
(In case of NRI investor)					
City :		Pincode :		Country :	
<b>Bank Mandate Details</b>					
Name of Bank :			Branch :		
A/C No. :		A/c Type :		IFSC Code:	
<b>Bank Address :</b>					
City :		Pincode :		State : Country :	
<b>Nomination Details</b>					
Nominee Name :			Relationship :		
Guardian Name (If Nominee is Minor) :					
<b>Nominee Address :</b>					
City :		Pincode :		State :	
<b>Declaration and Signature</b>					
I/We confirm that details provided by me/us are true and correct. The ARN holder has disclosed to me/us all the commission (In the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Fund From amongst which the scheme is being recommended to me/us.					
Date :			Place :		
1st applicant Signature :		2nd applicant Signature :		3rd applicant Signature :	

FACT SHEET

AUTHORISED PERSON CLIENT DETAILS		
Name	Code	Signature

CLIENT MAPPING DETAILS	
Name of Sales Executive	Mapping Code of Sales Executive



*A broker you can trust...*

## ***Gopalji Broking Pvt. Ltd.***

**CIN No : U67120DL2004PTC127758**

**Member : BSE (Capital Market, F&O and Currency Derivative Segment)**

**SEBI Regn. No.: INZ000298037, Membership No.: 6754**

**Depository Participant : CDSL**

**SEBI Regn. No.: IN-DP-CDSL-598-2021 • DP ID : 12093100**

**Regd. & Corp. Office :**

203, Yamuna Tower, Saini Enclave, LSC, Delhi-110092

Ph.: +91-11-43027981, Fax : +91-11-43027981

E-mail : [info@gopaljibroking.com](mailto:info@gopaljibroking.com), Website : [www.gopaljibroking.com](http://www.gopaljibroking.com)