

60 years
with you



SINCE 1954

Bharat Bhushan Equity Traders Limited

503, ROHIT HOUSE, 3, TOLSTOY MARG, NEW DELHI-110 001

TEL. : 011-49800907, 41505504, FAX : 49800933

Website : www.bbinvestments.in

E-mail : dp@bharatbhushan.com

Depository Account Opening Form

For : INDIVIDUAL

NON-RESIDENT

FOREIGN NATIONAL

Annexure JB
INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

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

B. Proof of Identity (POI): - List of documents admissible as Proof of Identity:

1. Unique Identification Number (UID) (Aadhaar)/ Passport/ Voter ID card/ Driving license.
2. PAN card with photograph.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): - List of documents admissible as Proof of Address:
(*Documents having an expiry date should be valid on the date of submission.)

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

D. Exemptions/clarifications to PAN (*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

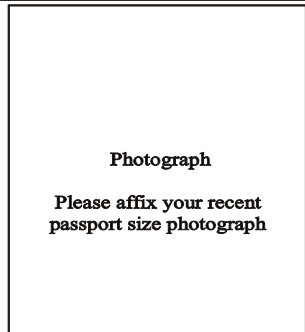
1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy /Consulate General in the country where the client resides are permitted to attest the documents.

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



Important Instructions

- A) Fields marked with ** are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- D) For particular section update, please tick ✓ in the box available before the section number and strike off the sections not required to be updated.



Signature / Thumb impression of Applicant

For office use only (To be filled by financial institution)

Application Type* New Update

KYC Number _____ (Mandatory for KYC update request)

Account Type* Normal Simplified (for low risk customers) Small

1. PERSONAL DETAILS (Please refer instruction A at the end)

1.	Name* (Same as ID proof)																				
2.	Maiden Name (if any*)																				
3.	Father's / Spouse Name*																				
4.	Mother's Name*																				
5.	a) Gender*	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Transgender	b) Marital status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others													
6.	a) Citizenship*	<input type="checkbox"/> IN-Indian				b) Residential Status*	<input type="checkbox"/> Resident Individual		<input type="checkbox"/> Non Resident Indian												
		<input type="checkbox"/> Other (ISO 3166 Country Code) _____					<input type="checkbox"/> Foreign National		<input type="checkbox"/> Person of Indian Origin												
7.	a) PAN											Date of Birth									
8.	Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Govt. Sector) <input type="checkbox"/> O-Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student) <input type="checkbox"/> B-Business <input type="checkbox"/> X-Not Categorised																			

2. ADDRESS DETAILS

1	Local / Correspondence Address	_____																	
		City/town/village*								PIN / Post Code*									
		State / U. T. Code*								ISO 3166* Country Code									
2	Contact Details (All communications will be sent on provided Mobile No. / Email-ID)	Tel. (Off.)								Tel. (Res.)									
		Fax No.								Mobile No.									
		Email ID																	
3	Current / Permanent / Overseas Address (If different from above. Mandatory for Non - Resident Applicant to specify overseas address)	_____																	
		City/town/village*								PIN / Post Code*									
		State / U. T. Code*								ISO 3166* Country Code									

3. PROOF OF ADDRESS (PoA)* (Please refer instruction D at the end)

(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 * Passport Driving Licence UID (Aadhaar) Voter Identity Card NREGA Job Card

Simplified Measures Account - Document Type code Others _____

4. PROOF OF IDENTITY (POI)* (Please refer instruction C at the end)

(Certified copy of any one the following Proof of Identity (Pol) needs to be submitted)

A-Passport Number _____ Passport Expiry Date _____

B-Voter ID Card _____

C-PAN Card _____

D-Driving Licence _____ Driving Licence Expiry 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 _____

5. ■ TICK IF APPLICABLE ■ RESIDENCE FOR TAX PURPOSE IN JURIDICION (S) OUTSIDE INDIA (Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 (3) is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent (if issued by jurisdiction)*

Place / City of Birth* _____ ISO 3166 Country Code of Birth*

6. ADDRESS IN THE JURIDICION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSE* (Applicable if section 2 (3) is ticked)

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

1	Address Details	_____										
		City/town/village				ZIP / Post Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		State				ISO 3166 Country Code						
2	Contact Details <i>(please refer instruction F at the end)</i>	Tel. (Off.)				Tel. (Res.)						
		Fax No.				Mobile No.						
		Email ID										

7. DETAILS OF RELATED PERSON (in case of additional related persons, please fill Annexure B1') (Please refer instruction G at the end)

Addition of Related Person KYC Number of Related Person _____
 Deletion of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

Name _____
 (If KYC number and name are provided, below details of Section 7 are optional)

PROOF OF IDENTITY (POI)* OF RELATED PERSON* (Please refer instruction H at the end)

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

<input type="checkbox"/> A-Passport Number _____	Passport Expiry Date _____
<input type="checkbox"/> B-Voter ID Card _____	
<input type="checkbox"/> C-PAN Card _____	
<input type="checkbox"/> D-Driving Licence _____	Driving Licence Expiry Date _____
<input type="checkbox"/> E-UID Aadhaar _____	
<input type="checkbox"/> F-NREGA Job Card _____	
<input type="checkbox"/> Z-Others (any document notified by the central government) _____	Identification Number _____
<input type="checkbox"/> S-Simplified Measures Account - Document Type Code <input type="text"/> <input type="text"/>	Identification Number _____

8. REMARK (if any)

9. 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 / E-mail on the above registered number / email address.

Place :

Date : _____ Signature / Thumb impression of the Applicant 

10. ATTESTATION / FOR OFFICE USE ONLY

Document Received <input type="checkbox"/> Certified Copies	KYC & In Person Verification Carried Out By	INSTITUTION DETAILS
Emp. Name / Code		
Emp. Designation		Code : IN 0077
Emp. Branch		
Emp. Signature		
Date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	



Bharat Bhushan Equity Traders Limited

Depository Participant NSDL DP ID- IN301209
 503, Rohit House, 3, Tolstoy Marg, New Delhi-110 001
 Tel. : 011-49800907, 41505504, Fax : 49800933

Annexure – J

PART-II - ACCOUNT OPENING FORM (FOR INDIVIDUALS)

Client-ID									
Date	D	D	M	M	Y	Y	Y	Y	

I/We request you to open a depository account in my/our name as per the following details: (Please fill all the details in CAPITAL LETTERS only)

A) Type of account

<input type="checkbox"/> Ordinary Resident	<input type="checkbox"/> NRI-Repatriable	<input type="checkbox"/> NRI-Non Repatriable
<input type="checkbox"/> Qualified Foreign Investor	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Promoter
<input type="checkbox"/> Margin	<input type="checkbox"/> Others (Please specify) _____	

B) In case of NRIs/ Foreign Nationals

RBI Approval Reference Number	
RBI Approval date	D D M M Y Y Y Y

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

a) Name	b) PAN
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D) Detail of Account holder (s):

Account holder(s)	Name
Sole First Holder	
PAN	
Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Govt.Service <input type="checkbox"/> Business <input type="checkbox"/> Retried <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Agricultruist <input type="checkbox"/> Professional <input type="checkbox"/> Other (please specify; _____)
Second Holder	
PAN	
Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Govt.Service <input type="checkbox"/> Business <input type="checkbox"/> Retried <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Agricultruist <input type="checkbox"/> Professional <input type="checkbox"/> Other (please specify; _____)
Third Holder	
PAN	
Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Govt.Service <input type="checkbox"/> Business <input type="checkbox"/> Retried <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Agricultruist <input type="checkbox"/> Professional <input type="checkbox"/> Other (please specify; _____)
Brief details	

E) Gross Annual Income Details : Income Range per annum (please tick any one)

<input type="checkbox"/> Below ₹ 1 lac	<input type="checkbox"/> ₹ 1- 5 lac	<input type="checkbox"/> ₹ 5 10 lac	<input type="checkbox"/> ₹ 10- 25 lac	<input type="checkbox"/> More than ₹ 25 lac
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F) Bank details

1	Bank account type	<input type="checkbox"/> Savings Account	<input type="checkbox"/> Current Account	<input type="checkbox"/> Others (Please specify) _____
2	Bank Account Number			
3	Bank Name			
4	Branch Address	City/town/village		
		State		
		PIN Code		
5	MICR Code			
6	IFSC			

G) Standing Instructions				
1	I/We authorise you to receive credits automatically into my/our account.			<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Account to be operated through Power of Attorney (PoA)			<input type="checkbox"/> Yes <input type="checkbox"/> No
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	Yes	No
	1	Sole/First Holder	<input type="checkbox"/>	<input type="checkbox"/>
	2	Second Holder	<input type="checkbox"/>	<input type="checkbox"/>
	3	Third Holder	<input type="checkbox"/>	<input type="checkbox"/>
4	Mode of receiving Statement of Account {Tick any one}		<input type="checkbox"/> Physical Form	
			<input type="checkbox"/> Electronic Form {Read Note 4 and ensure that email ID is provided in KYC Application Form}	
H) Nomination Option				
<input type="checkbox"/> I/We wish to make a nomination. [As per details given below]		<input type="checkbox"/> I/We do not wish to make a nomination. [Strike off the nomination details below]		
<input type="checkbox"/> I/We wish to make a nomination and do hereby nominate the following person in whom all rights and / or amount payable in respect of securities held in the Depository by me / us in the said beneficiary owner account shall vest in the event of my / our death				
Nomination can be made upto three nominees in the account.		Details of 1 st Nominee	Details of 2 nd Nominee	Details of 3 rd Nominee
1	Name of the nominee(s) (Mr./Ms.)			
2	Share of each Nominee Equally <input type="checkbox"/> [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)			
	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]			
(a)	<input type="checkbox"/> Photograph & Signature	⊗	⊗	⊗
(b)	PAN of nominee			
(c)	Aadhar number of nominee			
(d)	Savings Bank Account number of nominee, if maintained with the same Participant			
(e)	Copy of any proof of identity document (accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure JB)			
(f)	Demat account details of nominee	DP ID		
		Client ID		


I) Guardian Details (where sole holder is a minor):												
[For account of a minor, two KYC Application Forms must be filled i.e. one for the guardian and another for the minor (to be signed by guardian)]												
Guardian Name												
PAN												
Relationship of guardian with minor												
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	Relationship of Guardian with nominee											
11	Address of Guardian(s)											
	PIN Code											
12	Mobile/Telephone no. of Guardian											
13	Email ID of Guardian											
14	Guardian Identification details – [Please tick any one of following and provide details of same]											
(a)	<input type="checkbox"/> Photograph & Signature	⊗	⊗	⊗								
(b)	PAN of Guardian											
(c)	Aadhar number of Guardian											
(d)	Savings Bank Account number of Guardian, if maintained with the same Participant											
(e)	Copy of any proof of identity document (accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure JB)											
(f)	Demat account details of Guardian	DP ID										
		Client ID										

Notes :


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

Format of Request
[Please tick (v) wherever applicable]


1st Holder

DP ID	IN301209	Client ID		Date	
Name of account holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (<i>spouse, dependent children and dependent parents</i>).					
Signature of account holder					

2nd Holder

Name of account holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (<i>spouse, dependent children and dependent parents</i>).					
Signature of account holder					

3rd Holder

Name of account holder					
<input type="checkbox"/> Mobile Number					
<input type="checkbox"/> Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family (<i>spouse, dependent children and dependent parents</i>).					
Signature of account holder					

Declaration

The rules and regulations of the Depository and Depository Participants 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 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. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations. I/we acknowledge the receipt of copy of the document. "Right and Obligations of the Beneficial Owner and Depository Participant." in Physical Form Electronic Form

Name (s) of holder (s)		Signature (s) of holder (s)
Sole/ First Holder/ Guardian (in case sole holder is minor) (Mr./Ms.)		
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		



Acknowledgement

DP ID - IN301209

BHARAT BHUSHAN EQUITY TRADERS LTD.
503, ROHIT HOUSE, 3, TOLSTOY MARG, NEW DELHI-110 001

Received the application from Mr/Ms _____ as the sole/first holder along with _____ and _____ as the second and third holder respectively for opening of a depository account. Please quote the DP Id & Client Id allotted to you in all your future correspondence.

Date : _____

Participant Stamp & Signature

BHARAT BHUSHAN EQUITY TRADERS LTD.

Depository Services
SCHEDULE OF CHARGES
Effective From 01/07/2017

SCHEDULE-A

S.No.	DETAIL OF SERVICES	CHARGES
1	Account Opening	NIL
2	Account Closing	NIL
3	Annual Maintenance	Rs. 1500/- (Life Time)
4	Sell (Mkt./Off-Mkt.)	Rs. 20/-
5	Purchase (Mkt./Off-Mkt.)	NIL
6	Demat	Rs. 3/- per Certificate
7	Remat	0.3% (Min. Rs. 12/- per 100 Shares)
8	Pledge (Creation / Closure / Invocation)	0.02% (Min Rs. 50/-
9	Custody	NIL
10	IDEAS / SPEED-E	Rs. 120/- p.a.
11	KRA Upload / Download Charges (w.e.f. 01-04-2012)	Rs. 100/- per PAN

OTHERS :

- | | |
|--|--------------------------|
| a) Demat / Remat - Courier Charges | Rs. 25/- |
| b) Demat / Remat Rejection - Courier Charges | Rs. 25/- |
| c) Additional Delivery Instruction Book | Rs. 25/- |
| d) Lost / Misplaced Delivery Instruction Book | Rs. 50/- |
| e) Late Submission of Instructions on Pay-in-day | Rs. 10/- per instruction |
| f) Failed Instructions | Rs. 10/- per instruction |
| g) Modifications in Demat A/c | NIL |
| h) Document handling charges (per dispatch) | Rs. 25/- |

⊗ _____
Signature (Sole/First Holder)

- Note :**
- Charges quoted above are for the services listed and are exclusive of GST, Regulatory Charges and NSDL Charges.
 - Any service not quoted above will be charged separately.
 - Management reserves the right to Freeze/Suspend/Revise Charges of the account as per NSDL rules.

⊗ _____
Signature (Second Holder)

⊗ _____
Signature (Third Holder)

Regd. Office

Regd. Office : 503, Rohit House, 3 Tolstoy Marg, New Delhi-110001
Ph. : +91-11-49800900, Fax : +91-11-49800933
E-mail: nse@bharatbhushan.com • Website : www.bbinvestments.in

Branches

CONNAUGHT PLACE

304/404, Rohit House 3 Tolstoy Marg,
New Delhi-110001
Ph.: +91-11-49800900

H- 45, Connaught Place, New Delhi- 110001
Ph.: +91-11-23322772, 41513024
E-mail: corporate@bharatbhushan.com

NOIDA

Krishna Apra Plaza, Plot No. P3, Sector 18,
Commercial Market, Noida, Uttar Pradesh.
Ph.: +91-120-4358612-13
Email: noida@bharatbhushan.com

VASANT KUNJ

19, Vasant Arcade, Vasant Kunj,
New Delhi 110070
Ph.: +91-11-26894527, 26894602
E-mail: vk@bharatbhushan.com

GURGAON

265, Central Arcade, Phase-II,
DLF City, Gurgaon, Haryana
Ph.: +91-124-4101706-07
Email: gurgaon@bharatbhushan.com

JAIPUR

412, City Mall, C-21B, Bhagwan Das Road,
Panchbati, Jaipur-302001
Ph.: +91-141-4049938-39
Email: jaipur@bharatbhushan.com