

**DOCUMENT PACK
NSDL DEMAT DOCUMENTS: INDIVIDUAL END CLIENT**

CHECK LIST

Check List for On-Boarding of Individuals

S. No.	Particulars	Remarks	Specific Instructions
1	Orbis Account Opening Documents	<i>(In case of joint account holders, all account holders have to sign the undertaking)</i>	
1.1	Master Power of Attorney	No. of pages - 3 No. of signatures – 3	- Stamp paper / Franking of Rs.100 - Stamp Paper / Franking in Orbis' name - Blanks, if any, to be filled and initialed - Signature on page 5, 6 & 7 - In case of joint account, to be signed by all account holders
1.2	NSDL Demat Account Opening Form	No. of pages - 5 No. of signatures – 1	- Nomination is Optional - If opted for Nomination, please provide one of the following: - Affix nominee's photograph, nominee to sign across photo on Page no. 11 - Mention PAN / Aadhaar ID of the nominee - Provide self-signed copy of nominee's ID proof (Driving License / Voter ID Card / Government Identity Card) - In case nominee is a minor, please provide one of the followings: - Affix guardian's photograph, guardian to sign across photo on Page no. 11 - Mention PAN / Aadhaar ID of the guardian - Provide self-signed copy of guardian's ID proof (Driving License / Voter ID Card / Government Identity Card) - Client Signature (2) on Page No. 11 & 13 - In case of joint account, to be signed by all account holders - In case of joint account, select Mode of operation for demat account If Nomination not opted, Declaration Form for opting out of nomination is required (Page no.20)
1.3	Tariff Sheet	No. of pages – 1 No. of signatures – 1	- Signature on Page no. 15 - In case of joint account, to be signed by all account holders
1.4	Terms and Conditions and letter from Client for providing the Transaction Statement through Internet	No. of pages – 2 No. of signatures – 2	- Signature on Page no. 16, 17 - In case of joint account, to be signed by all account holders
1.5	Declaration under the Prevention of Money Laundering Act, 2002	No. of pages – 1 No. of signatures – 1	- Signature on Page no. 18 - In case of joint account, to be signed by all account holders
1.6	Declaration - Same Mobile number or Email	No. of pages – 1 No. of signatures – 1	- Signature on Page no. 19 - In case of joint account, to be signed by all account holders
1.7	Declaration Form for opting out of nomination	No. of pages – 1 No. of signatures – 1	- Signature on Page no. 20 - In case of joint account, to be signed by all account holders

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1.8	Central KYC Form (Attached Separately)	No. of pages – 6 No. of signatures – 2	• Affix photograph and sign in the box on Page no. 1 • One Signature in the Box on Page no. 2 • In case of joint account, to be signed by each account holder Separately
1.9	Client Consent Form [Attached Separately]	No. of pages - 1 No. of signatures – 1	• To be printed on plain paper • In case of joint account, to be provided separately by all account holders
2	KYC Documents		
2.1	Proof of Identity		• Self attested copy of PAN Card
2.2	Proof of Address		• Self attested copy of Passport / Adhaar ID / Voter ID / Driving License / Bank Statement / Utility bill (not more than 3 months old) • In case Proof of Residence and Proof of Correspondence Address are different, proof for both the addresses are required.
2.3	Bank Proof (In case Proof of Address is other than the bank statement)		• Self attested copy of bank statement (should not more than 3 months old)
2.4	In case Account Holder / Nominee is a minor		• Copy of Birth Certificate of minor - For minor account holder : to be attested by Guardian - For minor nominee : to be attested by Account Holder • Self attested copies of Proof of Identity and Proof of Address of Guardian
2.5	Aadhaar Card		• Self attested copy of Aadhaar card of the client
2.6	Financial Status proof		• Self attested copy of Income Tax Return (ITR) / or any other document of the client, which can substantiate client Net Worth / Annual Income.

IMPORTANT NOTE

Signature Types:

- ⊗ Signature of Client/ First Holder
- ➡ Signature of Second Holder
- ↔ Signature of Third Holder
- ⊠ Signature of Witnesses
- ☛ Signature of Orbis

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MASTER POWER OF ATTORNEY

I/We _____ (name of first holder), residing at _____ (address of first holder), jointly with _____ (name of second holder) and _____ (name of third holder) (hereinafter referred to as the “**Client**” and which expression shall, unless contrary to the context hereof, include all its heirs, successors, nominees and permitted assigns)

WHEREAS Orbis Financial Corporation Limited, a company incorporated under the Indian Companies Act, 1956 having its registered office at 4A, Technopolis, Sector 54, Golf Club Road, Gurgaon 122002, Haryana, India are registered with the Securities Exchange Board of India as a Custodian, Clearing members on the Clearing houses of the Bombay Stock Exchange, the National Stock Exchange and the Metropolitan Stock Exchange and Depository Participants / DDP on the NSDL and CDSL.

WHEREAS the Client is desirous of investing in the financial markets in India as permitted under the laws and regulations from time to time.

For the purpose of this document:

- (a) "Securities" shall mean any shares, stocks, debentures, bonds, notes, warrants, derivatives, options, futures, securities as defined under the Securities Contracts (Regulation) Act, 1956 and permitted by the regulators, depository receipts, commercial papers, repos, foreign exchange, swaps, certificate of deposits, participatory notes, commodities, interests in any collective investment vehicles (whether in corporate, unit trust or any other legal form), units or any other such instrument issued under any mutual fund scheme or other similar property (including evidence of securities or title thereto and all rights in respect thereof, whether represented by a certificate or by an entry in the books or other permanent records of an issuer, a trustee or other fiduciary thereof or in any Securities System); and

Client

⊗¹First Holder

⊖¹Second Holder

↔¹Third Holder

Signature

**Attorney
Signature**

Orbis Financial Corporation Ltd

✍

- (b) "Instructions" shall mean instructions given to the Attorney directly by the Client or through an authorized person which (i) contains all material information required by the Attorney to enable it to carry out the instructions; (ii) are received by the Attorney via telephone, telex, facsimile, short messaging service (SMS), Straight Through Processing (STP), Real Time Gross Settlement (RTGS), National Electronics Funds Transfer System (NEFT) or other teleprocesses, the Attorney's electronic instruction system or such other means as are for the time being agreed by and between the Client and the Attorney; and (iii) are transmitted with such testing or authentication or which comply with such procedures for verification of origination of instructions as the Attorney may specify.

Accordingly, the Client hereby nominates, constitutes and appoints Orbis Financial Corporation Limited acting through its officers as its lawful Attorney (hereinafter referred to as "**Attorney**") to do all or any of the following acts, deeds and things in relation to and concerning its financial investments in India:

1. To operate the bank account with [REDACTED], having its branch office at [REDACTED] (the "**Bank**"), in connection with the investments of the Client made in India in compliance with laws and regulations as prevalent from time to time ("**Bank Account**"). The Bank Account shall be operated only by the authorized signatories appointed by the Attorney from time to time.
2. To prepare, sign and submit all necessary documents and instructions as may be required by the Bank with respect to the operations of the Bank Account.
3. To prepare, sign and submit the "Know Your Client" (KYC) form on behalf of Client and submit the same to KYC Registration Agency or otherwise as may be necessary to do the same.
4. To operate, deposit and withdraw sums from the Bank Account through electronic banking or otherwise for settlement of trades on relevant stock exchanges (Exchange obligation), settlement / payment towards margins on these stock exchanges, payment of brokerage / fee to relevant service providers including Custodian Designated Depository Participant charges through auto debit, payment of commissions and expenses including out of pocket expenses, payment of taxes including withholding taxes, making remittances overseas, to apply for the IPO, FPO, Right Issues, etc, to settle Clients trades under Delivery V/s Payment (DVP) mechanism, to invest money in money market products including liquid mutual funds and such other transactions as may be necessary / expedient within the regulatory parameters as prevalent from time to time.
5. To operate a depository account with the NSDL/CDSL and to issue instructions relating to freezing of accounts, to block and/or debit the account, give delivery/receipt instructions, pledge instructions, pledge closure instructions, lending and borrowing instructions, enabling corporate actions, voluntary or otherwise and other actions necessary in the course of business relating to the operation of the depository account in accordance with applicable laws and regulations.
6. To undertake all necessary acts to subscribe, purchase, sell, transfer, redeem, renounce, assign, tender or endorse Securities as permitted by the regulatory provisions prevalent from time to time under the instructions of the Client and/or its authorized financial advisor.
7. To invest /switch / redeem interim temporary surplus funds into liquid mutual funds or such other schemes / avenues as available from time to time pursuant to the Instructions of the Client and / or its authorized financial advisor.
8. To open and operate such accounts as may be designated by the Client for the purpose of giving effect to the Custodial Agreement between the Attorney and the Client.

Client	⊗ ² First Holder	☉ ² Second Holder	↔ ² Third Holder
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Signature

Attorney Signature	Orbis Financial Corporation Ltd ☞
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9. To attend, vote and act as the attorney/proxy of the Client at corporate meetings of the members /creditors pursuant to the Instructions of the Client.
10. To sign contracts, agreements, transfers, acceptances, receipts or other instruments to accept and carry out correspondence with such person(s) or authorities and to do all lawful activities which may be necessary for effecting the activities envisaged herein.
11. To execute and affix signatures as Client's Agent on affidavits, indemnities, declarations, legal documents, deeds and writings in legal/statutory matters as per requirement and under Client's Instructions.
12. The Attorney is authorized to submit copies of this Power of Attorney to relevant entities in India including, but not limited to, banks, depositories, clearing houses, stock exchanges, regulatory and other governmental bodies, stock brokers and financial advisors in regard to the investments/financial interests of the Client in India, as may be required from time to time.
13. This Power of Attorney is revocable by the Client at any point of time through a written notice of revocation to the Attorney.
14. This Power of Attorney shall not be affected by lapse of time and shall continue in full force and effect until a written notice of revocation, signed and executed by the Client is submitted to the Attorney and such revocation or termination in no way shall affect the validity of this Power of Attorney with reference to any transaction initiated by the Attorney prior to actual receipt of notice of such revocation or termination.
15. Any third party, including bank, after receiving a certified/notarized true copy of this Power of Attorney shall act upon it and that revocation or termination hereof shall be ineffective as to such third party, including bank, unless and until actual notice or knowledge of such revocation or termination shall have been received by such third party or bank.
16. The Attorney shall have the power to do, execute and perform any act(s), deed(s) or matters which in the opinion of the Attorney are necessary and ought to be done keeping in mind the best interest of the Client. Further, the Client shall not at any time act in a manner which has the effect of diluting, nullifying or vitiating the powers given to the Attorney whilst this Power of Attorney is subsisting.
17. Since the Attorney is a body corporate, the powers granted pursuant to this Power of Attorney may be exercised by any of its agents or employees to whom the Attorney may delegate any of the aforesaid powers. Further, the Attorney may appoint and remove any agent or employee from time to time as it may consider appropriate.
18. This Power of Attorney shall be interpreted as per the laws of India and shall be subject to the jurisdiction of the courts of New Delhi, India.

IN WITNESS WHEREOF the Client, has/have caused this Power of Attorney to be executed on this _____ day of _____ 20____.

Client

☒³First Holder ☐³Second Holder ☐³Third Holder

Signature

Name

Custodian

Orbis Financial Corporation Ltd

Signature



Name

Designation

Witness:

Name / Address

Signatures

1. ☒

2. ☒

Executing before Notary Public /Oath Commissioner

Seal & Signature



NSDL DEMAT ACCOUNT OPENING FORM

Application No																		
NSDL Depository Details:																		
Client ID										DP Internal Reference No								
I/We request you to open a depository account in my/our name as per the following details: <i>(Please fill all the details in CAPITAL LETTERS only)</i>										Date		D	D	M	M	Y	Y	
A) Details of Account holder(s):																		
Holder		Name								PAN								
Sole/ First Holder																		
Second Holder																		
Third Holder																		
B) For 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 Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned below:																		
Name								PAN										
C) Type of Account																		
☒ Ordinary Resident ☐ NRI-Repatriable ☐ Margin ☐ Promoter																		
☐ NRI-Non-Repatriable ☐ Others (please specify)																		
D) In case of NRIs/ Foreign Nationals																		
RBI Approval Reference Number																		
RBI Approval Date																		
E) Bank Details: Dividend Bank Details																		
1 Bank Account Type		☐ Savings Account ☒ Current Account ☐ Others (please specify)																
2 Bank Account No																		
3 Bank Name																		
4 Bank Branch Address																		
Cit y		State						PIN										
Country		India																
5 Bank Code (9Digit MICR Code)										IFSC Code								
6 Account held since (No of Years)				Bank Tel No (ISD Code)														
F) Standing Instructions																		
1 I/We authorize you to receive credits automatically into my/our account.										☒ Yes ☐ No								
2 Basic Service Demat Account										☐ Yes ☒ No								
3 Account for RGESS										☐ Yes ☒ No								
4 No Download of E-mail ID to issuer / RTA										☐ Yes ☒ No								

5	Account to be operated through Power of Attorney (PoA)		☒ Yes ☐ No	
6	I / We have issued a Power of Attorney (POA) in favour of Orbis Financial Corporation Limited for Executing delivery instructions for settling stock exchange trades effected through clearing member, margin obligations etc.		☐ Option 1: I / We require you to issue Delivery Instruction Slip Booklet to me / us though we have issued POA. ☒ Option 2: I / We do not require the Delivery Instruction Slip for the time being.	
7	I / We request you to send Electronic Transaction-cum-Holding Statement at Sole / First Holders Email ID stated in the Account Opening Form (kindly refer terms and conditions at page no 38)		☐ Yes ☐ No	
8	SMS Alert facility: [Mandatory if you are giving Power of Attorney (PoA). Ensure that the mobile number is provided in the C KYC Application Form.			
	S.No	Holder	Yes	No
	1	Sole/First Holder	☒	☐
	2	Second Holder	☐	☐
	3	Third Holder	☐	☐
9	Mode of receiving Statement of Account [Tick any one] ☐ Physical Form ☒ Electronic Form			
10	For Joint accounts communication to be sent to [Tick any one] ☐ First Holder ☐ All joint account holders			
11	I / We would like to receive the 'Rights and Obligations of Beneficial Owner and Depository Participant' ☒ Physical / ☐ Electronic (Tick the applicable box)			
G)	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			
H)	Nomination Option ☐ I/We wish to make a nomination (Details are provide Nomination Detail) ☐ I/We wish to opt out of a nomination (Declaration Form opting out as prescribed by SEBI) I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.			
	Nomination can be made upto three nominees in the account.		Details of 1st Nominee	Details of 2nd Nominee
1	Name of the Nominee (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			
	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] Photograph & Signature OR PAN, Aadhaar, Saving Bank account no. Proof of Identity Demat Account ID			
(S. Nos. 8-14) should be filled only if nominee is a minor:				
8	Date of Birth (in case of minor nominee)			
9	Name of Guardian (Mr./Ms.) (in case of minor nominee)			
10	Address of Guardian(s) PIN Code			
11	Mobile / Telephone no. of Guardian			
12	Email ID of Guardian			
13	Relationship of Guardian with nominee			
14	Guardian Identification Details (please tick any one from (a) to (f) and provide details of the same)			
(a)	Nominee Identification details # [Please tick any one of following and provide details of same] Photograph & Signature OR PAN, Aadhaar, Saving Bank account no. Proof of Identity Demat Account ID			
Name(s) of holder(s)			Signature(s) of holder	
Sole/First Holder/Guardian (in case sole holder is minor) (Mr./Mrs.)			⊗ ⁴	
Second Holder (Mr./Mrs.)			⤵ ⁴	
Third Holder (Mr./Mrs.)			↔ ⁴	

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

Optional Fields (Information required at Serial nos. 5, 6, 7, 11, 12 & 14 is not mandatory)

This nomination shall supersede any prior nomination made by the account holder(s), if any. The Depository Participant shall provide acknowledgement of the nomination form to the account holder(s)

Name of the Witness		Address		Signature of witness
		Date		
Other Details (Mandatory as per SEBI)				
First Holder				
Gross Annual Income (Rs.) ☐ < 1 Lacs ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs – 1 crore ☐ > 1 crore				
Occupation ☐ Private Sector ☐ Public Sector ☐ Professional ☐ Agriculturist ☐ Government Service				
☐ Business	☐ Student	☐ Retired	☐ Housewife	☐ Others _____
Please tick if applicable ☐ Politically Exposed Person (PEP) / ☐ Related Political Exposed Person ☐ Not Applicable				
Net Worth as on _____ (dd/mm/yyyy) (Should not be older than 1 year)				
Source of Funds and amount		Salary ☐ House Property ☐ Capital Gains Business ☐ Others _____ Amount _____		
Source of Wealth and amount		Income from Employment ☐ Property Sale ☐ Savings ☐ Sale of Investments ☐ Inheritance ☐ Other _____ Amount _____		
Line of Business / Industry		Mfg ☐ Real Estate ☐ Trader ☐ Bullion ☐ Stock ☐ Broker ☐ Agri ☐ Others _____		
Second Holder				
Gross Annual Income (Rs.) ☐ < 1 Lacs ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs – 1 crore ☐ > 1 crore				
Occupation ☐ Private Sector ☐ Public Sector ☐ Professional ☐ Agriculturist ☐ Government Service				
☐ Business	☐ Student	☐ Retired	☐ Housewife	☐ Others _____
Please tick if applicable ☐ Politically Exposed Person (PEP) / ☐ Related Political Exposed Person ☐ Not Applicable				
Net Worth as on _____ (dd/mm/yyyy) (Should not be older than 1 year)				
Source of Funds and amount		Salary ☐ House Property ☐ Capital Gains Business ☐ Others _____ Amount _____		
Source of Wealth and amount		Income from Employment ☐ Property Sale ☐ Savings ☐ Sale of Investments ☐ Inheritance ☐ Other _____ Amount _____		
Line of Business / Industry		Mfg ☐ Real Estate ☐ Trader ☐ Bullion ☐ Stock ☐ Broker ☐ Agri ☐ Others _____		
Third Holder				
Gross Annual Income (Rs.) ☐ < 1 Lacs ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs – 1 crore ☐ > 1 crore				
Occupation ☐ Private Sector ☐ Public Sector ☐ Professional ☐ Agriculturist ☐ Government Service				
☐ Business	☐ Student	☐ Retired	☐ Housewife	☐ Others _____
Please tick if applicable ☐ Politically Exposed Person (PEP) / ☐ Related Political Exposed Person ☐ Not Applicable				
Net Worth as on _____ (dd/mm/yyyy) (Should not be older than 1 year)				
Source of Funds and amount		Salary ☐ House Property ☐ Capital Gains Business ☐ Others _____ Amount _____		

		Amount _____
Source of Wealth and amount		Income from Employment ☐ Property Sale ☐ Savings ☐ Sale of Investments ☐ Inheritance ☐ Other _____ Amount _____
Line of Business / Industry		Mfg ☐ Real Estate ☐ Trader ☐ Bullion ☐ Stock ☐ Broker ☐ Agri ☐ Others _____
I)	Mode of Operations of Joint Accounts	
	☐ Jointly ☐ Anyone of the holder or survivor(s)	
	If Mode of operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations such as transfer of securities including, Inter-Depository Transfer, Pledge / Hypothecation / Margin Pledge / Margin Re-Pledge (creation, closure, and invocation and confirmation thereof as applicable of securities and freeze / unfreeze of account and / or specific number of securities will be permitted)	
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, “Rights and Obligations of the Beneficial Owner and Depository Participant”.

Name (s) of holder (s)		Signature (s) of holder
Sole/ First Holder/ Guardian (in case sole holder is minor) (Mr./Ms.)		 5
Second Holder (Mr./Ms.)		 5
Third Holder (Mr./Ms.)		 5

Notes:

1. All communications 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 Constitutions of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
3. For receiving Statement of Account in electronic form:
 - I. Client must ensure the confidentiality of the password of the email changed.
 - 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 facility by giving 10 days prior notice.
4. In case of joint account, on death of any the joint holders, the surviving account holder(s) has to inform Participant about the death of account holder(s) with required documents within one year of the date of the demise.
5. In case if “first holder” is selected, the communication will be sent as per the preference mentioned at Sr. No. 4. In case “All joint account holders” is opted, communication to first holder will be sent as per the preference mentioned at

Sr. No. 4 and communication to other holders will be in electronic mode. The default option will be communicated to ‘first holder’, if no option selected.
6. Strike off whichever is not applicable.

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Acknowledgement

ORBIS FINANCIAL CORPORATION LIMITED
4A, Ocus Technopolis, Sector 54, Golf Club Road,
Gurgaon 122 022

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

Date:

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

Participant Stamp & Signature

NSDL Depository Charges for Beneficiary Account

S. No	Parameters	Beneficiary Account
1	A/c Opening Charges	NIL
2	Agreement& Stamp Paper charges	Actual
3	Annual Maintenance Charges	Rs.500 PA for Resident Individual Rs 500 PA for Corporate
4	Transaction Fees a. Off-market transfers b. Market transfer	INR 5/- per debit transaction
5	Dematerialization	NIL
6	Rematerialisation	NIL
7	Pledge Setup/ Removal/ Confirmation/ Invocation.	NIL
8	Out of Pocket Expenses (Courier charges, Tax Certificate fee, Tax Consultant's fee or such other costs, etc)	Pass through costs
9	Billing Cycle	Monthly
10	Validity	Good till mutually agreed upon

Client

 ⁶First Holder

 ⁶Second Holder

 ⁶Third Holder

Signature

Name

Depository Participant Orbis Financial Corporation Ltd

Signature



Name

Designation

Terms & Conditions between the Participant and the Client for providing the Transaction Statement through Internet

- a. The Client(s) is/are aware that it will not receive the transaction statements in paper form.
- b. The Client(s) will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the internet/email account.
- c. The Client(s) is/are aware that the transaction statement may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised.
- d. In case transaction statements are sent by email, the Client(s) shall immediately inform the DP about change in email address, if any.
- e. DPs and Client(s) shall have the right to terminate such service provided a written notice is given atleast 10 days in advance to the other party.

Signed and delivered by

Client	 ⁷ First Holder	 ⁷ Second Holder	 ⁷ Third Holder
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Signature

Name

Depository Participant Signature	Orbis Financial Corporation Ltd
	

Name

Designation

Witness:	Name / Address	Signatures
1. 		
2. 		

Date:
To
Depository Division,
M/s. Orbis Financial Corporation Limited,

Sub. : Receiving of Transactions Statement via Email

Ref.: Demat A/c No. :

Dear Sirs,

This is to inform you that I/We am/are _____,
having Demat Account number _____ with your
esteemed organization.

Further to this, I/we hereby provide you my/our email Id _____, so that
I//we can receive the transactions statement on my/our email.

You are requested to kindly note the above mentioned email id & update the same in your records, so
that I/we can receive the transactions statement on my/our email.

You are requested to kindly do the needful at the earliest.

With regards,
Signed and delivered by

Client

 ⁸ First Holder

 ⁸ Second Holder

 ⁸ Third Holder

Signature

Name

Declaration under the Prevention of Money Laundering Act, 2002

I /We _____ , jointly with _____ and _____
hereby declare that:

1. The Investments made by me in India have been derived from legally declared and assessed sources of income.
2. I understand that Orbis has the right to peruse my financial profile and also agree that Orbis has the right to terminate my agreement with it in case I am found guilty of violating the provisions of any Law, directly or indirectly, by any Competent Court of Law, having relation to the laws governing prevention of money laundering in the country.

Client

 ⁹ First Holder

 ⁹ Second Holder

 ⁹ Third Holder

Signature

Name

Format of Request

[Please tick (v) wherever applicable]

DP ID		Client ID		Date	
Name of account holder					
☐ Mobile Number					
☐ Email ID					
I hereby declare that the aforesaid mobile number or E-mail ID belongs to ☒ Me or ☐ My family (<i>spouse, dependent children and dependent parents</i>).					
Signature of account holder ⊗ ¹⁰					
Name of account holder					

Declaration Form for opting out of nomination

To Orbis Financial Corporation Limited 4A, Ocus Technopolis, Sector 54, Golf Club Road Gurgaon– 122002, Haryana, India www.orbisfinancial.in	Date	D	D	M	M	Y	Y	Y	Y
UCC/DP ID	I	N	3	0	3	6	2	2	
Client ID (only for Demat account)									
Sole/First Holder Name									
Second Holder Name									
Third Holder Name									
I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our trading / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading / demat account.									
Name and Signature of Holder(s)*									
1. _____ 2. _____ 3. _____									

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